

APPLICATION FOR BUILDING/DEMOLITION PERMIT

BULK			
Zone:	Group:	Use:	
	Required	Existing	Proposed
Floor Area Ratio _____			
Lot Area _____			
Lot Width _____			
Street Frontage _____			
Front yard setback _____			
Side yard setback _____			
Total side yard setback _____			
Rear yard setback _____			
Maximum building height _____			

SIZE OF BUILDING			
Existing	Proposed	Completed	
Square feet floor area _____			
Front in feet _____			
Rear in feet _____			
Maximum depth in feet _____			
Number of stories _____			
Construction Type: _____	Occ. Class: _____		

Energy Rater: _____

AFFIDAVIT

State of New York)
 County of Rockland) SS.:
 Town/Village of _____)

**IS PROPERTY LOCATED
 IN A FLOOD PLAIN?**

YES _____ NO _____

I, _____, being duly sworn, deposes and says that is the owner (lessee, engineer, surveyor, architect, builder, or agent of the owner) in fee of the premises to which this application applies; that he (the applicant) is duly authorized to make this application and that the statements contained in the papers submitted herein are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith, and in accordance with the State Uniform Building Code and all other applicable laws, ordinances and regulations of the municipality. I also declare that the structure or area described in this application will not be occupied or used until I have obtained a Certificate of Occupancy.

Signature and Mailing Address

SWORN to before me this

_____ day of _____, 20_____

Witness: _____

If not witnessed by Building Department personnel, Notary signature is required.

 Notary Public

OFFICIAL USE ONLY	
Checked by: _____	Date: _____
Permit Granted for: _____	

Signature: _____	Date: _____
Director, OBZPAE	

**Required Inspections of Construction . . . YOU MUST CALL FOR THESE
(MINIMUM OF 24 HOUR NOTICE FOR ALL INSPECTIONS)**

Other inspections will be made in some cases, but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless a card is left on the job indicating approval of one of these inspections, it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be re-inspected after correction. **Call ahead for all inspections.**

1. **Footing Forms** - when excavation is complete and forms are in place (before pouring). Rebar in place, hooked at all corners.
2. **Foundation** - check here for waterproofing, type of block footing drains, insulation as needed.
3. **Plumbing under slab** - cast iron, copper, etc.
4. **Gravel under slab** - (usually combined with #3). Check for insulation as per Energy Code
5. **Plumbing Rough-In** - all work that will be covered must be installed at this time.
6. **HVAC Rough-In** - all work that will be covered must be installed at this time.
7. **Frame** - call when the frame is complete including fire stop, bridging, collar ties, etc., before it is covered from inside with insulation.
8. **Insulation** - tabs to be stapled on outer part of stud to form vapor barrier.
9. **Plumbing final** - this can be combined with final. All fixtures to be installed.
10. **In garage where appropriate** - fire rated sheet rock to be inspected before painting.
11. **Rough grading** - all surface water should be directed away from the building to an approved outlet; street, lawn, inlet, drainage swale, etc. This can be combined with final.
12. **FINAL** - Complete application for Certificate of Occupancy, produce certified plot plan or as-built survey including outlet for footing drains to positive outflow. Provide Fire Underwriters Certificate. Building must be essentially completed with all utilities working. Produce final approvals as applicable, Rockland County Health Department, i.e., septic, wells, etc.

PLEASE NOTE:

Failure to receive a "FINAL INSPECTION" will result in non-issuance of a Certificate of Occupancy.

If a Demolition Permit please submit the following:

The following items must be presented to the municipality before demolition can occur:

1. Asbestos abatement survey by a licensed practitioner.
2. Letter from a utility company that the gas and electric have been turned off.
3. A notice from the Rockland County Health Department that the premises has been baited for rodents and vermin.
4. Approval from the Department of Environmental Management and Engineering for sealing of sewer line.

APPLICATION FOR BUILDING PERMIT

SHEET OF INSTRUCTIONS

1. In making this application, submit the following:
 - a. One (1) copy of this form.
 - b. Two (2) sets of building plans.
 - c. Two (2) copies of the plot plans.
 - d. Proof of driveway access approval from the Highway agency having jurisdiction.
 - e. Sewer approval from Orangetown Department of Public Works.
 - f. Certificate of Workman's Compensation and Disability Benefits Insurance or Owner's affidavit.
2. Plot Plans drawn to scale, shall show area, dimension, and location of lot; size and exact location of proposed structures, additions or alterations; all existing structures on lot; streets, curbs, sidewalks, parking spaces, driveway; yards and setback; and such other information as may be necessary.
3. Building plans drawn to scale shall show structural details, floor plans, elevation, plumbing, electrical, heating, and ventilation details.
4. The N.Y.S. Department of Education Law states that a building permit may not be issued for any commercial structure or for a residence containing more than 1500 sq. ft. of habitable space unless the building plans are prepared and signed by a New York State licensed engineer or registered architect.
5. No building permit or Certificate of Occupancy shall be issued by the Director unless all provisions of the Town of Orangetown Zoning Code and the New York State Uniform Fire Prevention and Building Code are in compliance.
6. Fees are based on cost of construction. (This office reserves the right to adjust any fee prior to issuing the Certificate of Occupancy if it is shown that the original fee was not sufficient to cover the actual cost.) Bills, invoices and other documentation must be submitted to substantiate both the Estimated Cost of Construction, as well as the Actual Cost of Construction.
7. Mandatory inspections are required for issuance of a Certificate of Occupancy. A form listing mandatory inspections will accompany the Building Permit. This form must be completed and returned.
8. Curbs, sidewalk, paved driveways, and underground utilities are required by the Zoning Code.
9. It shall be unlawful to use or permit the use of any building or premises or part thereof, hereafter created, erected, changed, converted or enlarged wholly or partly, in its use or structure, until a Certificate of Occupancy shall have been issued.
10. This office reserves the right to require that the affidavit of compliance on the applicatiuon for a Certificate of Occupancy be submitted and signed by the architect or engineer of record.
11. All Commercial building permit applications require a separate check in the amount of \$30.00 for the Stream Maintenance Fee in addition to the building permit fee.
12. The building permit expires two years from the date of issuance. Two six (6) months extensions may be granted **prior** to the expiration date of the building permit. Renewal of all expired building permits require a new application and fee.

NO WORK IS TO BE STARTED UNTIL BUILDING PERMIT HAS BEEN ISSUED

NO USE OR OCCUPANCY OF STRUCTURE OR LAND WITHOUT CERTIFICATE OF OCCUPANCY

BUILDING PERMIT VALID FOR TWO YEARS FROM DATE OF ISSUANCE

PERMIT EXPIRES TWO (2) YEARS FROM DATE OF ISSUANCE. TWO SIX (6) MONTH EXTENSIONS MAY BE GRANTED PRIOR TO EXPIRATION DATE.

APPLICATION FOR BUILDING/DEMOLITION PERMIT

Phone: (845) 359-8410 Office Hours: 8 to 4
Fax: (845) 359-8526

Name of Municipality: Town of Orangetown Date Application Received: _____

Inspector: _____	OFFICIAL USE ONLY		
Zoning District: _____	Acreage: _____		
Permit Information:			
Permit No.: _____	Date: _____		
C.O. No.: _____	Date: _____		
Check Amount: _____	Check Date: _____	Receipt #: _____	
Check #: _____	From: _____		
S.M.F. Ck. No.: _____	Receipt #: _____		
1st 6Mo Extension/Date: _____	Ck. # _____	Amt. _____	Receipt #: _____
2nd 6Mo Extension/Date: _____	Ck. # _____	Amt. _____	Receipt #: _____
GIS Fee: From _____	Ck. # _____	Amt. _____	Receipt #: _____ Date: _____

Rockland County Home Improvement - please submit a copy of license
Workmen's Compensation and Disability Carrier - please submit a copy of the policy
Note: See inside for instructions for completing this application

Property Location: _____

Section: _____ **Block** _____ **Lot** _____

Property Owner: _____ **Phone # Home:** _____

Address _____ **Work:** _____

Lessee _____ **Phone #** _____

Address _____

Contact Person _____ **Phone #** _____

Architect/Engineer: _____ **NYS Lic #** _____ **Phone #** _____

Address _____

Builder/General Contractor: _____ **RC Lic #** _____

Address _____ **Phone #** _____

Plumber: _____ **RC Lic #** _____

Address _____ **Phone #** _____

Heat/Cooling: _____ **RC Lic #** _____

Address _____ **Phone #** _____

Electrician: _____ **RC Lic #** _____

Address _____ **Phone #** _____

Existing use of structure or land: _____

Proposed Project Description: _____

Proposed Square Footage: _____ **Estimated Construction Value (\$):** _____

Board Decisions: _____

PLANS REVIEWED: _____

PERMIT REFERRED/DENIED FOR: _____

FOR OFFICE USE ONLY
SECTION: _____ BLOCK: _____ LOT: _____ NAME: _____