

Tel: (845) 446-4280 ext 316

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**TOWN OF HIGHLANDS BUILDING DEPARTMENT
254 MAIN STREET, HIGHLAND FALLS, NY 10928
COUNTY OF ORANGE**

Date of application: _____

Date examined: _____ By: _____

Application No. _____

Date approved: _____ By: _____

Permit No.: _____

Disapproved / Denied due to: _____

PRE-PERMIT INSPECTION: _____

APPLICATION FOR BUILDING PERMIT

INSTRUCTIONS

- a. The work covered by this application may NOT be commenced before the issuance of a valid Building Permit.
- b. This application must be completely filled in by typewriter or in ink and submitted to the Building Department.
- c. This application must be accompanied by two complete sets of plans/specifications detailing the proposed construction. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical, electrical and plumbing installations. (IF VALUE OF CONSTRUCTION EXCEEDS \$20,000.00, A NEW YORK STATE LICENSED ARCHITECT OR ENGINEER MUST SEAL AND SIGN PLANS)
- d. Two plot-plans(showing location of lot and of buildings on premises, relationship to adjoining premises or public streets or areas, and detailed description of layout of property) must be submitted for applications involving outdoor work.
- e. Upon approval of this application, the Building Department will issue a Building Permit to the applicant together with approved duplicate set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises available for inspection throughout the progress of the work.
- f. 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/Compliance has been issued.
- g. A CERTIFICATE OF INSURANCE FOR WORKER'S COMPENSATION AND DISABILITY OR EXEMPTION CERTIFICATE FROM WORKER'S COMPENSATION BOARD will be required upon filing of application.

Location: _____
(street address)

Tax Lot: SECTION _____ BLOCK _____ LOT _____

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the *New York State Building Construction Code* for the construction of buildings, additions, or alterations, or for removal or demolition, or change-of-use as herein described. The applicant agrees to comply with all applicable State and Local laws, ordinances and regulations.

(Print name & mailing address of applicant)

(Area code & telephone number of applicant)

Cellular phone number: _____ E-mail address: _____

State whether applicant is owner, lessee, agent, architect, engineer or contractor: _____

If applicant is not owner, attach separate sheet indicating owner's consent for applicant to obtain permit on their behalf, including owner's name(s), address and telephone number.

If owner or applicant is a corporation, attach separate sheet stating names and titles of two officers and signature of duly authorized officer.

Estimated value of construction \$ _____ Fee \$ _____

- 1. State existing use and occupancy of premises and intended use of proposed construction (i.e. dwelling, business, etc.):
 - a. Existing use and occupancy _____
 - b. Intended use and occupancy _____

MUST CALL "811" OR 1-800-962-7962 BEFORE ANY DIGGING IS DONE ON PROPERTY

(PLEASE READ INSTRUCTIONS ABOVE AND COMPLETE THE BACK OF THIS FORM)

2. Nature of work (check which is applicable): New building _____ Accessory building _____ Addition _____
Repair _____ Alteration _____ Demolition _____ Deck _____ Pool _____ Sign _____ Change of use _____ Other _____

3. Describe briefly the nature of work: _____

4. Will premises be in use / inhabited during performance of required work? Yes _____ No _____
(IMPORTANT: all fire-safety and emergency escape features must be fully functional at all times that the building is in use / inhabited)

5. If dwelling, number of dwelling units _____ Number of Stories _____ If garage, number of cars _____

6. Construction type: Masonry _____; Wood (stick frame) _____; Steel _____; Modular/manufactured _____
(Indicate whether truss, lightweight or engineered framing is proposed: Yes _____ No _____)

7. Check which type street, at property access point, is applicable: Town Road _____ Village Street _____ State Highway _____

8. Check which is applicable: Private Septic _____ Municipal Sewer _____ Private Well _____ Municipal Water _____ Private Water _____

9. Will substantial grading, cutting and/or filling, or tree removals be done on the property? Yes _____ No _____

10. Will blasting be done on the property? Yes _____ No _____

11. Are the premises located in a flood-plain zone (per FEMA mappings)? Yes _____ No _____

12. Name of Architect _____ Address _____ Tel# _____

Name of Engineer _____ Address _____ Tel# _____

Name of Contractor _____ Address _____ Tel# _____

13. Worker's Compensation Insurance (check which is applicable): Insured _____ Exempt _____
(attach acceptable proof of insurance OR file appropriate exemption form)

14. Zoning or use district in which premises are situated (per Zoning Map) _____

Does proposed construction violate any Zoning law, ordinance or regulation? Yes _____ No _____

If a Special Permit, Site Plan Approval, or Zoning Variance was granted by the Town Board, Zoning Board or Planning Board, give date and decision (attach copy of approval letter) _____

15. Will electrical work be performed by an Electrical Contractor licensed in Orange County? Yes _____ No _____

If so, specify name of licensed contractor: _____

NOTE: ALL ELECTRICAL WORK MUST BE INSPECTED BY A CERTIFIED THIRD-PARTY ELECTRICAL INSPECTION AGENCY AND A CERTIFICATE OF APPROVAL SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO COMPLETION OF THE PROJECT

STATE OF NEW YORK }
 } ss:
COUNTY OF _____ }

(Print full applicant name) _____,
being duly sworn, deposes and says that he/she is the applicant above named. He/she is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his/her 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.

(Signature of applicant)

Sworn to before me

this _____ day of _____ 20 ____

Notary Public _____ County of _____