### TOWN OF TUSTEN BUILDING DEPARTMENT 210 BRIDGE STREET, PO BOX 195 NARROWSBURG, NEW YORK 12764 845-252-7146 prompt 2 FAX 845-252-7476

845-252-7146 prompt 2 FAX 845-25 EMAIL: <a href="mailto:codeenforce@tusten.org">codeenforce@tusten.org</a>



PERMIT NUMBER
SBL:

# **BUILDING PERMIT APPLICATION**

Date:
This application must be completely filled in and submitted to the Building Inspector.
This application must be accompanied by <b>two complete sets of plans</b> showing proposed construction and <b>a complete set of specifications</b> . 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. All plans are subject to New York State Education Law article 147 section 7307 which states that all plans for commercial construction and any residence 1500 square feet or more and additions costing \$20,000.00 or more, or changes affecting structural or public safety, shall be signed and sealed by a New York State licensed design professional. <b>A plot plan</b> showing the location of lot and of all buildings on premises, and all proposed buildings and the relationship to adjoining premises or streets or other areas, and giving a detailed description of properly showing all set back dimensions, i.e. all distances from building/s to rear, side, and front yard lines, must be drawn and submitted as part of this application.
All plans must be accompanied with a NYS energy code compliance ie: RESCHECK, ComCheck, etc.
Applicant must provide a copy of the <b>deed or other proof of ownership if recently purchased</b> . If applicant is not the owner of the property, <b>written authorization from the owner</b> must be provided.
Upon approval of this application, the Building Department will issue a Building Permit to the applicant together with an approved 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.
If property is determined to be in the flood plain area, an <b>Elevation Certificate and an Application for Development in flood area</b> will be required for all types of construction before a building permit will be issued.
CONSTRUCTION MUST CONFORM TO THE PLANS AND SPECIFICATIONS SUBMITTED WITH THIS APPLICATION. THE WORK COVERED BY THIS APPLICATION MAY NOT BE COMMENCED BEFORE THE ISSUANCE OF A BUILDING PERMIT. NO BUILDING SHALL BE OCCUPIED OR USED IN WHOLE OR PART FOR ANY PURPOSE WHATSOEVER UNTIL A CERTIFICATE OF OCCUPANCY SHALL HAVE BEEN GRANTED BY THE BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER.
CORRECT 911 ADDRESS (6"x8" BLUE REFLECTIVE SIGN) MUST BE POSTED ON PROPERTY IN ACCORDANCE WITH LOCAL LAW.
APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the New York State Uniform Code for the construction of buildings, additions, or for removal or demolition, as herein described. The applicant has read the above instructions including appendices A and B and agrees to comply with all the applicable laws, ordinances and regulations when applicable.
Name and address for legal notices:
(Signature of Applicant)
If applicant is a corporation, signature of duly authorized officer needed.

Town of Tusten Building Department

(Name of Corporation)

(Name and Title of Corporate Office)

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1.	Location of land on which proposed work will b	pe done.	
	Tax Map Section	Block Number	_ Lot/s Number
	Street Name and Number		
	Owners name as shown on tax record		
	Current Mailing Address		
	Telephone Number		
2.	State existing use and occupancy of the premise	s and the intended use and occupancy of prop	posed construction
	Existing use and occupancy		
	b. Intended use and occupancy		
	(Note: Be Specific, Permit and Certificate of Oc	ccupancy will be issued and limited to the sta	ted use and occupancy.)
3.	Nature of work to be performed (check box indi	cating which is applicable)	
	a.{ } New Building	{ } Addition to existing building	{ } Alteration to existing building
	{ } Demolition/Remove	{ } Replacement	{ } Mobile Home
	{ } Other (list)		
	b.{ } Number of Stories	{ } Number of Bathrooms:	{ } Number of Toilets
	{ } Number of Bedrooms		
	c. What kind of Heating System is being insta	alled (i.e. Fuel, Propane, Electric)	
4.	If residential dwelling, number of dwelling units	S	_
5.	If business, commercial or mixed occupancy, sp	ecify nature and extent of each type of use _	
6.	Dimensions of existing structures, if any; Front	Rear Depth	Height
7.	Dimensions of same structure with alterations or	r additions: Front Rear	Depth Height
8.	Square footage of present structure		
9.	Square footage of proposed work		
10.	Size of lot: Front Rear	Depth Square footage of Lot	
11.	Name of Home Owner Insurance Carrier		Policy No
12.	Architect or Engineer		
	Address	Te	elephone No.
	) Triang 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	11. T	

13. NYS Worker's Compensation and Disability Law compliance. This section must be completed and submitted with the following documentation.

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**Homeowner (acting as GC):** Proof of NYS WC insurance policy (form C-105.2, U26.3, SI-12) and Disability insurance policy (form DB-120.1, DB-155) or an Affidavit of Exemption to show Specific Proof of Worker's Compensation Insurance Coverage for a 1,2,3 or 4 Family, Owner-occupied residence (BP-1) if he/she qualifies.

<u>General Contractor</u>: Proof of NYS WC insurance policy (form C-105.2, U26.3, SI-12) and Disability insurance policy (form DB-120.1, DB-155) or a project/site specific WC/DB Exemption (CE 200) if he/she qualifies.

<u>Subcontractors</u>: In cases where neither the General Contractor, nor the homeowner have a NYS WC or Disability insurance policy, all subcontractors working on site must submit proof of NYS WC insurance policy (form C-105.2, U26.3, SI-12) and Disability insurance policy (form DB-120.1, DB-155) or a project/site specific WC/DB Exemption (CE 200) if he/she qualifies.

Company	Contact name	Address	Phone	Add'l Info
General Contractor:				
Excavator subcontractor:				
Masonry/concrete sub:				
Framing subcontractor:				
Electrical subcontractor:				
HVAC subcontractor:				
Plumbing subcontractor				
Well Drilling sub:				
Other subcontractor				
14. Estimated Cost (Note: Costs for the work describe connection therewith.)	of Construction:ed in the Application for Buildi	ng Permit include the cost of	f all of the construction and	d other work done in
ZONE PREMISES LOCATED IN SQUARE FOOTAGE OF LOT DOES PROPERTY HAVE CURE DOES PROPOSED CONSTRUCT APPROVALS GRANTED BY: (i ATTACH RESOLUTIONS - ESTIMATED COST OF CONSTRUCTIONS INITIAL FEE TO BE CHARGED	RENT ZONING OR CODE VIO TION VIOLATE ANY ZONIN if required) PLANNING BOAK PB/ZBA FEES PAID { } YE RUCTION (Item No. 17) \$	SITE PLAN A DLATIONS { } YES { } IG LAW, ORDINANCE OR RD { } YES { } NO – ZOI ES { } NO	TTED IN ZONE { ) YES PPROVAL REQUIRED { NO REGULATION? { } Y	} YES { } NO ES { } NO { } NO
IF DISAPPROVED, REASON: BY:		DATE:	- <i>,</i>	· ,

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# **APPENDICE A**

#### **Inspection Schedule**

- 1. All structures will be subject to inspection at the following stages of construction:
  - A. Site inspection
  - B. Footing Excavation, Piers for deck prior to pouring concrete
  - C. Foundation foundation coating or parging applied
  - D. Concrete (floors, slabs)
  - E. Perimeter Drains
  - F. Completion of framing
  - G. Electric rough-in
  - H. Plumbing rough-in including pressure test
  - I. Insulation (energy code compliance)
  - J. Blower door tests results
  - K. Final inspection at completion of structure for CofO of CofC
- 2. It will be the responsibility of the Permit Holder to notify the Code Enforcement Officer at the above stages of progress and call for inspection
- 3. Random inspections may be made at any time.
- 4. Third party approved electrical inspection will be required. ALL ELECTRICAL WORK MUST BE INSPECTED BY, AND A CERTIFICATE OF APPROVAL OBTAINED FROM AN APPROVED INSPECTION AGENCY OR ORGANIZATION.

Any changes in the original plans must be validated by the design professional. 24 hours' notice is required for inspections, well log and water test are required, a 911 reflective premise identification is also required for Certificate of Occupancy.

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# **APPENDICE B**

#### RESIDENTIAL REMINDER & SPECIFICATION LIST

### ITEMS THAT NEED TO BE INCLUDED ON DRAWINGS AND/OR REQUIRED BY STATE:

- 1. Proper footings, piers, and/or post hole depth.
- 2. Proper drainage installed to daylight or sump
- 3. Proper damp proofing applied.
- 4. Proper ventilation of crawl spaces, cellars and roofs.
- 5. Anchor bolts (min ½" diameter) in foundation walls at least 6' on center.
- 6. Insulation of foundation and band joist, ("R" value noted).
- 7. Sill sealer installed.
- 8. Beam size, joist size and spacing.
- 9. Post supporting beam, size and spacing.
- 10. Sub-floor material and attachment method.
- 11. Wall thickness and insulation, ("R" value noted).
- 12. Wall sheathing and wind bracing, ("R" value noted).
- 13. Window sizes, efficiency u-values, open able area for required egress windows and header sizes noted.
- 14. Bearing wall size and spacing noted.
- 15. Roof construction noted.
- 16. Ventilation system for roof noted.
- 17. Roof sheathing type and clips if necessary.
- 18. Tyvek, if necessary.
- 19. Bridging, if required.
- 20. Programmable thermostat. (1 per dwelling)
- 21. Smoke detectors and CO detectors as required
- 22. Bathroom fans, if no windows.
- 23. Stairway and railing details.
- 24. Electrical plan.
- 25. Please be aware that the house must have 75% energy efficient lighting
- 26. Blower door test -- 3 exchange rates per hr.
- 27. Sticker for construction type and floor/roof trusses if applicable placed on electric meter panel