

# VILLAGE OF WAPPINGERS FALLS



**BUILDING DEPARTMENT  
OFFICE OF CODE ENFORCEMENT  
OFFICE OF THE FIRE INSPECTOR  
2582 SOUTH AVENUE  
WAPPINGERS FALLS, NY 12590  
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www.wappingersfallsny.gov**

## EXCAVATION PERMIT APPLICATION

NOTE: APPLICATIONS FOR BUILDING PERMITS CANNOT BE REVIEWED UNTIL THE SUBMITTAL IS COMPLETE.  
(All items below must be submitted and fee paid)

### 1. PLANS

\_\_\_ The applicant shall file, in addition to this application, a comprehensive plan drawn to a scale of one (1) inch to one hundred (100) feet setting forth in detail the requirements of Section 74-4 of the Code Book of the Village of Wappingers Falls.

### 2. BUILDING PERMIT APPLICATION

\_\_\_ Application must be fully completed

\_\_\_ If contractor is applicant, the contractor **MUST** provide consent from the homeowner authorizing him to file for Building Permit. (Complete **Consent Form** on Page 4)

\_\_\_ **Proof of Insurance** - The applicant shall file with the village a Certificate of insurance indicating that the village has been named as primary insured under an insurance policy in the amounts of three hundred thousand/five hundred thousand dollars (\$300,000.00/500,000.00) for bodily injury and fifty thousand dollars (\$50,000.00) for property damage.

\_\_\_ **Workers' Compensation** - Proof of insurance must be submitted from the contractor and/or homeowner at the time of the application.

\*Contractors **MUST** submit Certificate of Workers Compensation (not acceptable on Accord Forms) or Affidavit in lieu thereof -- signed and stamped by Workers Compensation Board.

#### Accepted Forms:

- U26.3 - Certificate of Workers' Compensation Ins (NYS Insurance Fund only)
- C105.2 (9/07) - Certificate of Workers' Compensation Insurance
- GSI 105.2 (2/02) - Certificate of Participation in Workers' Compensation

### 3. DEPARTMENT APPROVALS: Required **BEFORE** a review of the project by the Building Department.

\_\_\_ Dig Safety New York, if you plan to dig or do any type of excavation work, New York State Law requires you call Dig Safety New York prior doing so ..... 811

\_\_\_ Highway Department..... 845 297 9758

\_\_\_ Planning & Zoning Department ..... 845 297 5277 \_\_\_ Engineering 845 297 5277



VILLAGE OF WAPPINGERS FALLS

EXCAVATION PERMIT # \_\_\_\_\_

EXCAVATION PERMIT APPLICATION

APPLICATION TYPE:  NEW CONSTRUCTION  RESIDENTIAL  COMMERCIAL  
 RENOVATION/ALTERATION  MULTIPLE DWELLING

APPLICANT : \_\_\_\_\_

ADDRESS : \_\_\_\_\_ PHONE : \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS : \_\_\_\_\_ PHONE : \_\_\_\_\_

BUILDER : \_\_\_\_\_

ADDRESS : \_\_\_\_\_ PHONE : \_\_\_\_\_

DESIGN PROFESSIONAL NAME: \_\_\_\_\_

ADDRESS : \_\_\_\_\_ PHONE: \_\_\_\_\_

BUILDING SITE LOCATION : \_\_\_\_\_

TAX GRID NUMBER : \_\_\_\_\_ --- \_\_\_\_\_ --- \_\_\_\_\_

ZONING DISTRICT : \_\_\_\_\_ Fire Department  SW Johnson  WT Garner

PROJECT DESCRIPTION : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ACRES : \_\_\_\_\_

SET BACKS: FRONT: \_\_\_\_\_ REAR: \_\_\_\_\_ L- SIDE YARD: \_\_\_\_\_ R-SIDEYARD: \_\_\_\_\_

REQUIRED SUBMITTALS:

- Construction Drawings
  - Insurance / Workes' Compensation
  - Consent Form from Homeowner
  - 811 Dig Safe New York
  - Affidavit of Exemption to Show Proof of Workers' Compensation Insurance (notarized) (for residential structures only)
- OR

It is understood that authorization is hereby given for the Building Inspector/Zoning Administrator/Code Enforcement Officer to enter premises for purposes of inspections prior to the issuance of the Certificate of Occupancy. All inspection are listed on Building Permit. All applications MUST be completed before review by an inspector.

\_\_\_\_\_  
Signature of Owner/Contractor/Agent

\_\_\_\_\_  
Date Signed

Zoning Dept. Use:

FEE : \_\_\_\_\_ Date Paid : \_\_\_\_\_ Receipt # : \_\_\_\_\_ Cash /Check #: \_\_\_\_\_

\_\_\_\_\_  
 Code Enforcement Officer Approval

\_\_\_\_\_  
Date

**VILLAGE OF WAPPINGERS FALLS**  
**EXCAVATION PERMIT APPLICATION**

**IMPORTANT NOTICES: READ & SIGN**

The applicant shall file, in addition to this application, a comprehensive plan drawn to a scale of one (1) inch to one hundred (100) feet setting forth in detail the requirements of Section 74-4 of the Code Book of the Village of Wappingers Falls.

The applicant hereby agrees to hold the Village harmless on account of damages of any kind which may arise during the progress of the work authorized by this permit.

The applicant certifies all persons concerned with actual work under this permit are duly covered by Worker's Compensation Insurance and the Village shall be harmless on account thereof.

Work under this permit shall commence within thirty (30) days of the date of the permit and be continued in an expeditious manner.

The applicant, for himself, his distributees and personal representatives, covenants and agrees to defend any action or judgement recovered therein brought or found against the village of Wappingers Falls for negligence arising out of any claim for damage or injuries to others, that the work and construction was defective, improperly protected or completed and to pay any judgement recovered on account of said claim.

The village shall have the right to select counsel to represent it for the defense of any claim, suit or action arising hereunder, all fees and disbursement for the same to be paid by the applicant herein.

The applicant shall file with the village a Certificate of insurance indicating that the village has been named as primary insured under an insurance policy in the amounts of three hundred thousand/five hundred thousand dollars (\$300,000.00/500,000.00) for bodily injury and fifty thousand dollars (\$50,000.00) for property damage.

The applicant shall be responsible for all damages caused to public utilities and shall replace any cracked or damaged sewer pipe or water mains with new pipe.

The applicant shall take every reasonable precaution to properly warn all persons of any danger during the course of the work.

**OWNER HEREBY AGREES TO ALLOW THE CODE ENFORCEMENT OFFICE TO INSPECT THE SUFFICIENCY OF THE WORK BEING DONE PURSUANT TO THIS PERMIT, PROVIDE, HOWEVER, THAT SUCH INSPECTION(S) IS(ARE) LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON WORK-RELATED VIOLATIONS WHICH ARE READILY DISCERNIBLE FROM SUCH INSPECTION(S).**

The permit does not include any privilege of encroachment in, over, under, or upon any city street or right-of-way.

In consideration of being granted this permit, the undersigned applicant accepts it subject to the conditions described.

I, \_\_\_\_\_, the above-named applicant, hereby attest that I am the lawful  
(Please Print Your Name)

owner of the property described within or am the lawful Contractor /Agent of said owner and affirm under the penalty of perjury that all statements made by me on this applications are true.

\_\_\_\_\_  
Signature of Owner/Contractor/Agent

\_\_\_\_\_  
Date Signed



VILLAGE OF WAPPINGERS FALLS

CONSENT FORM

Name of property owner: \_\_\_\_\_

Address of property owner: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number of property owner: (Include home, work, mobile number and e-mail address):

(H) \_\_\_\_\_ (C) \_\_\_\_\_

(W) \_\_\_\_\_ (E-mail) \_\_\_\_\_

Address of site where work is being conducted: \_\_\_\_\_

\_\_\_\_\_

Description of work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of person doing work: \_\_\_\_\_

Address of person doing work: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number of person doing work (Include home, work, mobile numbers and e-mail address):

(H) \_\_\_\_\_ (C) \_\_\_\_\_

(W) \_\_\_\_\_ (E-mail) \_\_\_\_\_

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date Signed