

VILLAGE OF WAPPINGERS FALLS



BUILDING DEPARTMENT
OFFICE OF CODE ENFORCEMENT
OFFICE OF THE FIRE INSPECTOR
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845)296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

Shed /Detached Garages Building Permit Application

NOTE: APPLICATIONS FOR BUILDING PERMITS CANNOT BE REVIEWED UNTIL THE SUBMITTAL IS COMPLETE.

(All items below must be submitted and fee paid)

BUILDING PERMIT APPLICATION

Application must be fully completed

Must be signed by the owner or submitted with a consent form(included in packet)

Workers' Compensation, proof of insurance must be submitted from the contractor at the time of the application. Or if

*Homeowners doing their own project must fill out form BP-1 (included in packed) and have notarized. Please attach the following:

SITE PLAN (see attached example)

Lot dimensions --all sides Size and locations of any easements or right -of-ways

Name and locations of all adjacent streets Locations of proposed and existing structures

Setback dimensions --front, rear, and all sides

Outside building dimensions and distances between buildings on building site

Driveways, exterior stairs, landings, patios, and decks

BUILDING PLANS (If built on site) (two complete sets required and one set emailed in PDF format to cbrosco@wappingersfallsny.gov)

Floor system and support, size and type of material, spacing, spans

Wall system, size and type of material and spacing

Roof system, size and type of materials, spacing, spans

Overhead and sectional view of shed

For pre-built shed submit plans from supplier showing recommended floor support.

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

A BUILDING PERMIT IS NOT REQUIRED FOR SHEDS 144SQ FT. OR LESS AND 15 FT BUILDING HEIGHT WITH 10FT OR LESS IN HEIGHT AT THE EAVES AND COMPLYING WITH THE REGULATIONS IN SECTION 64-5B. (1) OF THE VILLAGE OF WAPPINGERS FALLS CODE.

VILLAGE OF WAPPINGERS FALLS

BUILDING PERMIT # _____ -- _____

SHED /DETACHED GARAGES BUILDING PERMIT APPLICATION

APPLICANT : _____

ADDRESS : _____ PHONE : _____

OWNER: _____

ADDRESS : _____ PHONE : _____

BUILDER : _____

ADDRESS : _____ PHONE : _____

BUILDING SITE LOCATION : _____ (Road:Town,County, State or Private)

TAX GRID NUMBER : #06 _____ --- _____ --- _____

ZONING DISTRICT : _____ Fire Department [] SW Johnson [] WT Garner

Existing size of Structure (dimensions) :

Height : _____ Number of Stories : _____ Number of Dwelling Units: _____

No. of Bedrooms: _____ No. of Bathrooms : _____ Finished Basement ? _____

(Check all that apply.)

Addition to Existing Building

Garage, Attached

Garage, Detached

Installation/Extension of Electrical Systems

PROJECT DESCRIPTION : _____

Proposed Setback Minimums :

Distance of Structure from ... Front Line: _____ Rear Line : _____ Left Side : _____ Right Side: _____

Road Frontage (feet) : _____ Lot Area (acres) : _____

Estimated cost of Project: _____

Required Submittals:

Building Plans (if built on site)Two sets required

For pre-built shed submit plans from supplier showing recommended floor support

Consent Form from Homeowner

INSURANCE / WORKERS COMPENSATION OR

Affidavit of Exemption to Show Proof of Workers' Compensation Insurance (notarized)

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: -----

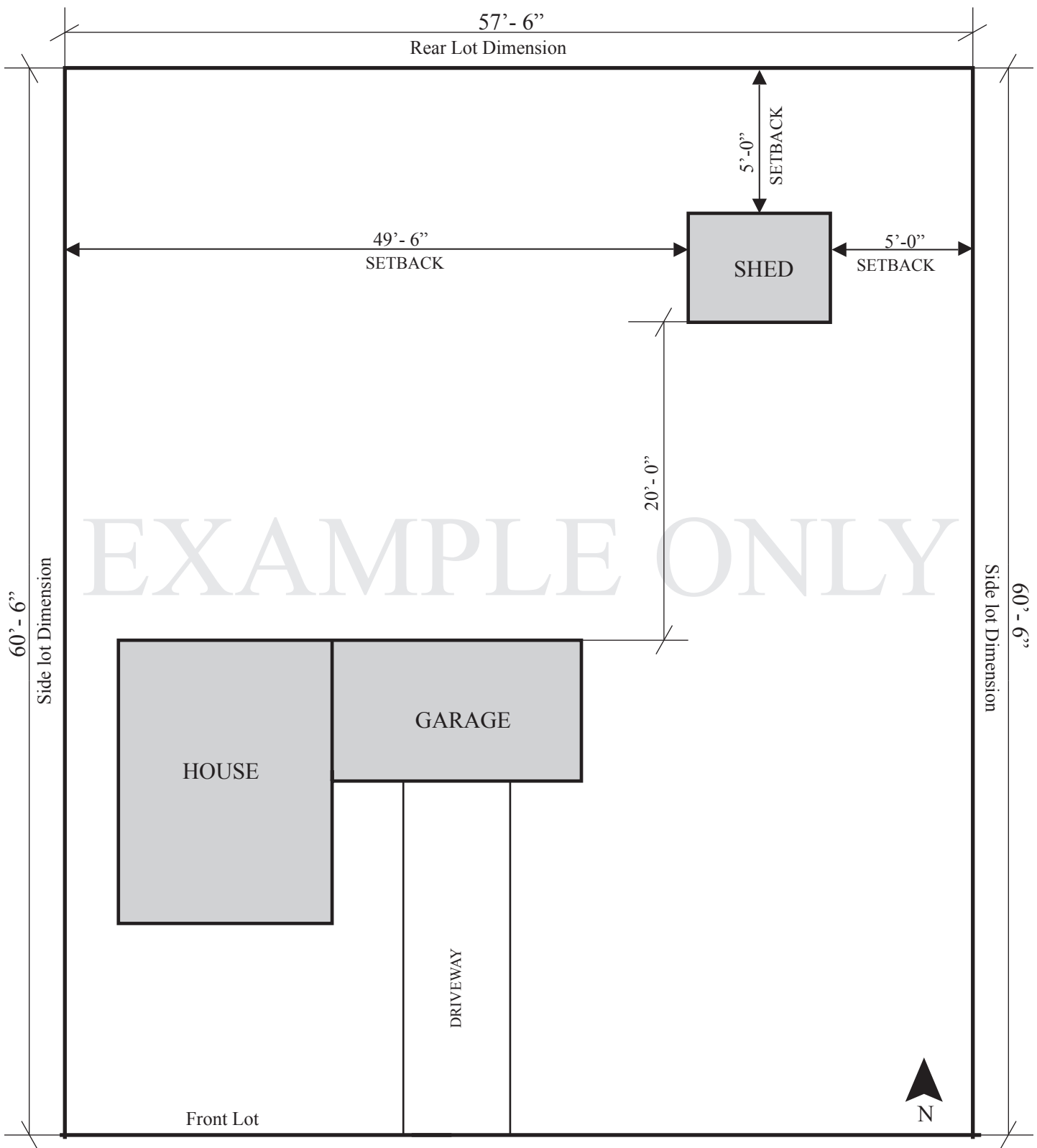
FEE : _____ Receipt # _____ Date Paid: _____ Check # _____ Cash

 Code Enforcement Officer Approval

Date

VILLAGE OF WAPPINGERS FALLS

SITE PLAN -EXAMPLE ONLY



7 SPRING ST.

NUMBER & STREET NAME

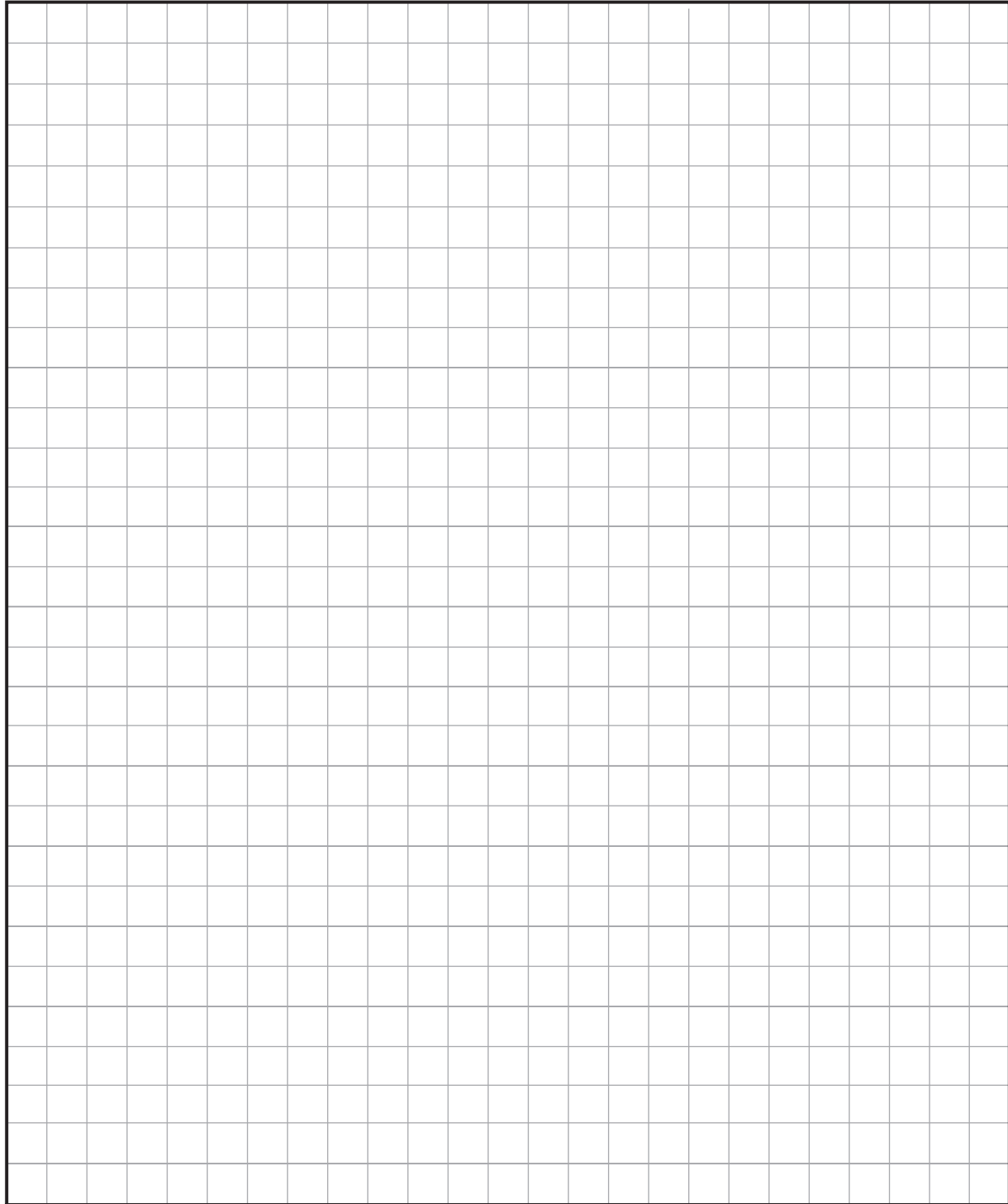
57'-6"

Front Lot Dimension

*Village of Wappingers Falls Zoning Regulations for Residence Districts (§ 151-16) -
Accessory Buildings require a minimum distance of 5ft to Side Line and to Rear Line (Setback).

VILLAGE OF WAPPINGERS FALLS

**SITE PLAN - Need to submit a Site Plan or Draw a Site Plan of the proposed work.
PLEASE NOTE ON SITE PLAN IF CORNER LOT**



NUMBER & STREET NAME

***Village of Wappingers Falls Zoning Regulations for Residence Districts (§ 151-16) -
Accessory Buildings require a minimum distance of 5 ft. to Side Line and to Rear Line (Setback) .**

VILLAGE OF WAPPINGERS FALLS
CONSENT FORM

Name of property owner: _____

Address of property owner: _____

Phone number of property owner (Include home, work and mobile number):

Address of site where work is being conducted: _____

Description of work: _____

Name of person doing work: _____

Address of person doing work: _____

Phone number of person doing work (Include home, work and mobile numbers):

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

VILLAGE OF WAPPINGERS FALLS

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1,2,3 or 4 Family, Owner-occupied Residence

*** This form can not be used to waive the worker's compensation rights or obligations of any party. ***

Under penalty of perjury, I certify that I am the owner of the 1,2,3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of worker's compensation insurance coverage for such residence because: (please check the appropriate box)

- I am performing all the work for which the building permit was issued
- I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work.
- I have a homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total or less than 40 hours per week (aggregate hours for all paid individuals on the job site) for which the building permit is issued.

I also agree to either:

Acquire appropriate worker's compensation coverage and provide appropriate proof of the coverage on forms approved by the Chair of the NYS Worker's Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hour or more per week (aggregate hours for all paid individuals on the job site) for work indicated on the building permit, or if appropriate file a CE-200 exemption form; OR

Have the general contractor, performing the work on the 1,2,3 or 4 family, owned-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers compensation coverage or proof of exemption from that coverage on forms approved by the Chair of NYS Worker's Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on he job site) for work indicated on the building permit.

Signature of Homeowner

Date Signed

Homeowner's Name Printed

Home Telephone Number _____

Property Address that requires the building permit:

Sworn to before me this _____ day of _____, _____.

(County Clerk or Notary Public)

Once notarized, this BP-1 form serves as an exemption for worker's compensation and disability benefits insurance coverage.

VILLAGE OF WAPPINGERS FALLS

APPLICATION FOR A BUILDING PERMIT

IMPORTANT NOTICES: READ & SIGN

1. Work conducted pursuant to a building permit must be visual inspected by the Code Enforcement Office and must conform to the New York State Uniform Fire Prevention and Building Code, the Code of Ordinances of the Village of Wappingers Falls and all other applicable codes, rules or regulations.
2. It is the owner's responsibility to contact the Code Enforcement Office at 845-297-5277 Monday through Friday from 9:00 a.m. to 3:30 p.m. at least 48 hours before the owners wishes to have an inspection conducted . More than one inspection may be necessary. This is especially true for "internal work" which will eventually be covered from visual inspection by additional work (i.e., electrical work later to be covered by a wall)

DO NOT PROCEED TO THE NEXT STEP OF CONSTRUCTION IF SUCH "INTERNAL WORK" HAS NOT BEEN INSPECTED. Otherwise, work may need to be removed at the owner's or contractor's expense to conduct the interior inspection. Close coordination with the Code Enforcement Office will greatly reduce this possibility.

3. 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).
4. New York State law requires contractors to maintain Worker's Compensation and Disability Insurance for their employees. No permit will be issue unless currently valid Worker's Compensation and Disability Insurance certificates are attached to this application or are on file with the Bureau of Fire Prevention and Inspection Services. If the contractor believes he/she is exempt from the requirements to provide Worker's Compensation and/or Disability Benefits, the contractor must complete form BP-1 attached hereto.
5. If a Certificate of Occupancy is required, the structure shall not be occupied until said certificate has been Issued. Section 64-9 (a) Village Code
6. Work undertaken pursuant to this permit is conditioned upon and subject to any state and federal regulations relating to asbestos material.
7. The permit does not include any privilege of encroachment in, over, under, or upon any city street or right-of-way.
8. The building permit card must be displayed so as to be visible from the street nearest to the site of the work being conducted.

I, _____, the above-named applicant, hereby attest that I am the lawful 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

----- Zoning Dept. Use: -----

[] Code Enforcement Officer Approval

Date

VILLAGE OF WAPPINGERS FALLS
POLICY ON CONSTRUCTION INSPECTIONS

Inspections are required under NYS and Village Law. The following inspections are required to be schedule by the contractor and/or property owner at a minimum 24 hours BEFORE the inspection is needed. In some cases more time is require before an inspection takes place. (see below) Failing to schedule required inspections is a violation of the Village Law and legal action may be taken against you and/or a STOP WORK ORDER issued if you fail to schedule the required inspections.

FOOTINGS - When the excavation for footings is completed and before footings are poured. Soil bearing test are the responsibility of the homeowner/contractor. Must call to schedule **48 hours BEFORE pouring concrete** in order to allow for corrections.

FOOTING DRAINS - Before backfilling foundation.

FOUNDATION WALLS - When the foundation forms (for poured walls) have been erected, and before any backfilling has taken place, **48 hours BEFORE pouring**. Block walls may require intermittent inspections for reinforcing rods or other details that may be included on designed plan. Also for block walls schedule an inspection before back-filling.

CONCRETE FLOORS & SLABS - **48 hours BEFORE pouring**.

UNDERGROUND AND ROUGH PLUMBING - DWV requires an air test of 5 psi or a water test (system being tested filled to at least 10 feet above that system with water), either test holding for at least 15 minutes. **Water- supply** required to be proved water tight under a water pressure not less than the working pressure of the system or by an air test of not less than 50 psi. Water used for testing must be from a potable source. **Back-flow devices** require an initial inspection and test and must be inspected and tested at least annually. These devices are inspected by Third-party inspectors (contact the office for a courtesy list of inspectors or visit the NYSDOH web-site.)

FINAL PLUMBING - DWV fixtures must be filled and prove water tight. Water-supply and Back-flow devices(see above)

FRAMING - When all framing has been completed and prior to the installation of any wall finishes. Inspector will check for fire caulking and/or Fire-rated assemblies.

INSULATION - When insulation and vapor barrier is installed and before wall finishes.

MECHANICAL - Solid fuel burning heating appliances, chimneys, flues or gas vents. ANY of the previous that will be concealed in walls or by finishes must be inspected prior to those walls or finishes being applied or installed. This includes clothing dryer vents.

FINAL - When all work is completed and before any occupancy of building or structure. Electrical, plumbing and fire inspections must also be completed.

NO CERTIFICATE OF OCCUPANCY - Will be issued for any building permit until all required inspections have been completed and work accepted.

TIME LIMITS - Work must begin within 6 (six) months from date of permit issue. Permit expires 1(one) year from date of issue. Failure to schedule any inspections before the expiration date of the permit is a violation of the Village Law. Any violation is subject to the applicable fee.

Fire Inspector, Building Inspector, Code Enforcement Officer, Zoning Administrator and Plumbing Inspector can be reached at 297-5277. Electrical Inspectors are third-party inspectors and are listed on the electrical permit package.

I, _____, the above-named applicant, hereby attest that I am the lawful owner of the property described within or am the lawful Contractor /Agent of said owner and I understand that is my responsibility to call and schedule the inspections required under NYS and Village Laws.

Signature of Owner/Contractor/Agent

Date Signed

Zoning Dept. Use: -----

[] Code Enforcement Officer Approval

Date