TOWN OF UNION VALE

DIRECTOR OF CODE ENFORCEMENT GEORGE A. KOLB JR.



BUILDING DEPARTMENT 249 DUNCAN ROAD LAGRANGEVILLE, NY 12540 (845) 724-5953 FAX: (845) 724-3757 Building2@unionvaleny.us

BUILDING PERMIT APPLICATION

(<u>ALL SITE-BUILT STRUCTURES</u>: ADDITIONS, GARAGES, DECKS, PORCHES, ETC)

*** THE FOLLOWING MUST BE SUBMITTED AT TIME OF APPLICATION ***

O APPLIC FORM COMPLETED O INSURANCE SUBMITTED O INSURANCE ON FILE O CONSENT IF APPLIC

NOTE: THE FOLLOWING WILL BE NEEDED TO PROCESS YOUR APPLICATION

- Two copies of scaled drawings showing all details of construction and related footings, cross sections and floor plans on 18" x 24" paper size max. <u>Only</u> detailed drawings will be accepted and may be required to be submitted by a licensed design professional upon review of the Code Official. All applicable building codes must be adhered to from the N.Y.S. Residential Building Code.
 - A. Cross sections specifically drawn with materials to be used
 - B. Floor plans showing use of all rooms
 - C. Ceiling heights and projections
 - D. Window/Door clear opening sizes
 - E. Building/Structure elevations
 - F. Rafter/Joist/Header spans and sizes
 - G. Insulation values
 - H. Smoke/Carbon Dioxide detector placement
 - I. Plumbing/Mechanical details
- 2. Plot Plan Sheet provided must be filled out showing all sizes and setbacks of structure from all property lines.
- 3. Any increase in bedrooms will require approval from the Board of Health.

APPLICATION FOR BUILDING PERMIT

PLEASE NOTE TO ALL APPLICANTS: ALL INFORMATION IS TO BE COMPLETED IN FULL. PLEASE TYPE OR PRINT LEGIBLY OR APPLICATION WILL BE RETURNED.

APPLICATION TYPE: O Residential	O New Construction	O Commercial O Renovation/Alteration
APPLICANT:		DATE:
ADDRESS:		
TEL #:	_ CELL:	FAX #:
EMAIL (*REQUIRED*):		
NAME OWNER OF BUILDING/LAND:		
PROJECT SITE ADDRESS:		
MAILING ADDRESS:		
TEL #:	CELL:	FAX #:
EMAIL (*REQUIRED*):		
BUILDING/CONTRACTOR/ ARCHITE	CT OR ENGINEER IF R	EO.
COMPANY NAME:		
ADDRESS:		
TEL #:	CELL:	FAX #:
EMAIL (*REQUIRED):_		
DESCRIPTION OF WORK:		
		OFFICE USE ONLY
		APPROVALS: Zoning/ Fire/ Building
		O Approved O Denied DATE:
→ Signature of Applicant/ Da	ate	Signature of Code Enforcement Officer
REV: 7/25/16		FEE DUE: \$ PAID ON:

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OWNER'S AUTHORIZATION & CONSENT FORM

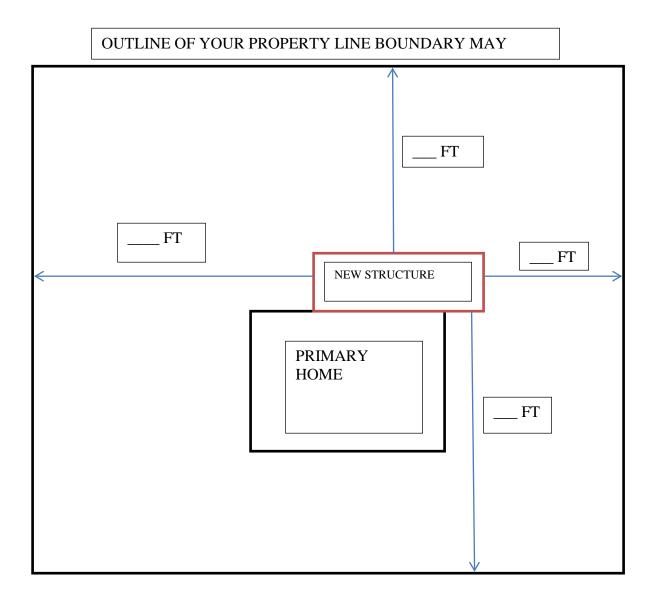
This form is to be signed and notarized when required by the owner of record of the property in which the work outlined on the building permit application has been applied for. Signing of this document gives permission for work to be commenced by the contractor designated. All insurance requirements are to be submitted to the parcel owner and this office. In addition any and all Engineering/ Attorney's fees associated with review of this application are the sole responsibility for reimbursement to the Town of Union Vale by the owner of record as per Sect. 105-12 of the Town of Union Vale Code before any Certificate of Occupancy is issued.

Date:		
Parcel Location:		
Contractor:		
Owner Signature:	Print:	
(Req. New Home and/or any application required to be reviewed by the Town of Union Vale P.E. and/ or Attorney)	NOTARY STAMP:	

NOTICE TO APPLICANTS: 240-109 Certificate of Occupancy

It shall be unlawful for a building owner 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 by the Building Inspector and the Zoning Administrator.

SAMPLE ONLY PLEASE PROVIDE ACTUAL DEMENSIONS FROM YOUR PROPERTY LINES



STREET : # 249 DUNCAN ROAD

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	194	
/	1827	

TOWN OF UNION VALE Building Department

LOCATION OF PROPOSED STRUCTURE PLAN

YOU ARE REQUIRED TO LOCATE THE PROPOSED STRUCTURE ON THE BELOW PLAN IN RELATION TO THE EXISITING HOME. PROVIDE ALL DISTANCES FROM <u>ALL</u> PROPERTY LINES TO NEW STRUCTURE AS WELL AS EXTERIOR DEMENSIONS. YOU MAY ALSO USE A COPY OF YOUR CURRENT PROPERTY SURVEY ***** SEE BACK FOR SAMPLE****

NAME:	DATE:
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GRID # ______ ADDRESS: ______

PRIMARY HOME

BUILDING DEPARTMENT INSPECTION PROCEDURE

ANY CHANGES to plans require approval by Code Official.

You are required to schedule all inspection with this office in advance of work to be inspected. Please provide building permit number, name on permit and specific type of inspection requested.

- 1. Pre-site inspection if required by Code Official.
- 2. Contact Utility Dig/Safe Hotline before any excavation commences.
- 3. Erosion control measures as dictated on plan or notes and SWPPP, if req., prior to any land disturbance activity.
- 4. Footing inspection when complete all rebar placement and form work; Notify at least 24 hours before placement.
- 5. Foundation walls both poured concrete and block complete; Notify at least 24 hours before concrete pour.
- 6. All concrete slabs must be inspected, i.e. garage, basement, etc.
- 7. Footing drains and damp-proof of walls before backfill.
- 8. Framing inspection per submitted approved drawings.
- 9. Rough plumbing with all required air/water tests.
- 10. Mechanical inspection includes: Furnace/Fireplace/Woodstove etc.
- 11. Rough Electrical inspection by third party inspector, approved list supplied.
- 12. Insulation compliance inspection prior to drywall installation.
- 13. Final Electrical inspection by third party agency certificate.
- 14. Provide final Sans 34 form approval by Dutchess County Board of Health
- 15. Final grading and soil stabilization/ driveway completion etc.
- 16. Provide ALL certificates required by Dutchess County Board of Health.
- 17. FINAL INSPECTION BY CODE OFFICIAL FOR COMPLIANCE TO SUBMITTED DRAWINGS, SITE PLAN AND N.Y.S. BUILDING/ FIRE CODE.

• Please note per Town of Union Vale Code Section 240-109 Certificate of Occupancy: It shall be unlawful to occupy or use any structure or appliance until a valid Certificate of Occupancy or Compliance is issued by the Code Enforcement Officer of the Town of Union Vale. Strict adherence to this regulation will be enforced by this office.

Directions to Applicant:

1- Obtain BLDG PERMIT
2-DISPLAY PERMIT IN VISIBLE PLACE
3-SCHEDULE ELECTRICAL INSPECTION
4-ELECTRICAL AGENCY will MAIL compliance cert to us
5-If ELECTRICAL is only PART of total project, you
additionally need to *SCHEDULE FINAL INSPECTION*
WITH BUILDING DEPARTMENT*

Town Board Approved Electrical Inspection Agencies

NEW YORK ELECTRICAL INSPECTIONS

<u>Greg Murad</u> HCR #4 Kelly Corners, NY 12455 845 586-2430 888 693-4693

<u>Tom LeJune</u> Local Inspector PO box 384 Amenia, NY 12501 845 373-7308

Z3 CONSULTANTS, Inc.

<u>Gary Beck</u> PO Box 363 Lagrangeville, NY 12540 Office/ Fax: 845 471-9370

NY BOARD OF FIRE UNDERWRITERS

Pat Decina845 298-6792800 356-2556

NY ATLANTIC-INLAND INC.

<u>William Jacox</u> 12 Ackert Road Rhinebeck, NY 12372 Phone: 845 876-8794

THIRD PARTY INSPECTIONS INC.

68 Gold Road Poughquag, NY 12570 845 590-1010 thirdpartyinsp@gmail.com

NEW YORK ELECTRICAL INSPECTION SERVICES

150 White Plains Road, Ste 104 Tarrytown, NY 10591 Phone: 914 347-4390 Fax: 914 347-4394

info@nyeis.us Office joann@nyeis.us Certs/Billing

Ed Odell 914 384-6763 Brian McPartland 914 382-4921 Nick Morabito 914 384-6605 <u>nick@nyeis.us</u> Anthony Rabasco 914 384-6634 Al Weis 914 384-6762 914 962-8236 home office Charlie Del Pozzo 914 384-6644

NY ELECTRICAL INSPECTIONS & CONSULTANTS LLC

John Wierl 93 Beattie Avenue Middletown, NY 10940 845 551-8466 jwierl@nyeic.com

SAS ELECTRICAL INSPECTION

Yuir Badovich P.O. Box 119 Greenfield Park, NY 12535 845-801-2172 yb@saselectricalinspection.com