



Town of Union Vale

Building Department

249 Duncan Road

Lagrangeville, NY 12590

Tel: (845) 724-5953

Fax: (845) 724-3757

E-Mail ~ building2@unionvaleny.us

BUILDING PERMIT APPLICATION SIGNAGE PERMIT

1- Supply (2) copies of sign installation, 1/4" scale on 18" x 24" paper max. unless otherwise noted.

2- Completed signed application submitted indicating all information below.

- A. TYPE (HANGING, FREE STANDING, WALL MOUNT, MATERIAL USED, SINGLE OR DOUBLE SIDED, INLLUMINATED, ETC. INCLUDE SKETCH OR COMPUTER RENDERING.
- B. INCLUDE TOTAL SIZE, WIDTH & LENGTH, AND TOTAL HEIGHT OF SIGN.
- C. TOTAL LENGTH OF STORE FRONT/ PRINCIPAL BUILDING.
- D. EXACT LOCATION ON PARCEL INDICATING SETBACK MEASUREMENTS FROM ALL PROPERTY LINES. SHOW ON PLOT PLAN ENCLOSED OR ACTUAL SURVEY OF PARCEL.
- E. ANY ELECTRICAL SERVICE TO SIGNAGE WILL BE REQUIRED TO BE INSPECTED AND CERTIFIED FOR COMPLIANCE BY THIRD PARGTY ELECTRICAL INSPECTOR (LIST PROVIDED).
- F. AUTHORIZATION AND SIGNING OF THIS APPLICATION BY OWNER AND/ OR APPLICANT CERTIFIES THAT LIABLITY INSURANCE IS CARRIED COVERING BOTH THE ERECTION AND MAINTENANCE OF THIS SIGN STRUCTURE.

- Please note a final inspection the installation of all signage must be schedules with this office for compliance to drawings submitted. A required Certificate of Compliance is required to be issued by this office for work performed.

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: ☐ Residential ☐ New Construction ☐ Commercial ☐ Renovation/Alteration

APPLICANT: _____ DATE: _____

ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

NAME OWNER OF BUILDING/LAND: _____

PROJECT SITE ADDRESS: _____

MAILING ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

BUILDING/CONTRACTOR/ ARCHITECT OR ENGINEER IF REQ.

COMPANY NAME: _____

ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

DESCRIPTION OF WORK: _____ **ESTIMATE COST OF PROJECT:** _____

OFFICE USE ONLY

APPROVALS: Zoning/ Fire/ Building

O Approved O Denied DATE: _____

→ **Signature of Applicant/ Date**

Signature of Code Enforcement Officer

FEE DUE: \$ _____ **PAID ON:** _____

TOWN OF UNION VALE

DIRECTOR OF CODE ENFORCEMENT
GEORGE A. KOLB JR.



SUPERVISOR
PATRICIA TOMPKINS

TOWN COUNCIL
JOHN WELSH
STEVE FRAZIER
DAVID MCMORRIS
CORRINA KELLEY

BUILDING DEPARTMENT
249 DUNCAN ROAD
LAGRANGEVILLE, NY 12540
(845) 724-5953
FAX: (845) 724-3757

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: _____

NOTARY STAMP:

**(Req. New Home and/or any
application required to be reviewed
by the Town of Union Vale P.E.
and/ or Attorney)**



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.

PROVIDE ACTUAL DIMENSIONS FROM YOUR PROPERTY LINES

OUTLINE OF YOUR PROPERTY LINE BOUNDARY MAY VARY

* SEE SAMPLE LOCATED ON BACK PAGE*

INDICATE FREESTANDING LOCATION ON PARCEL OR
EXACT WALL SIGN PLACEMENT ON BUILDING

PRIMARY
STRUCTURE



STREET FRONTAGE: # _____

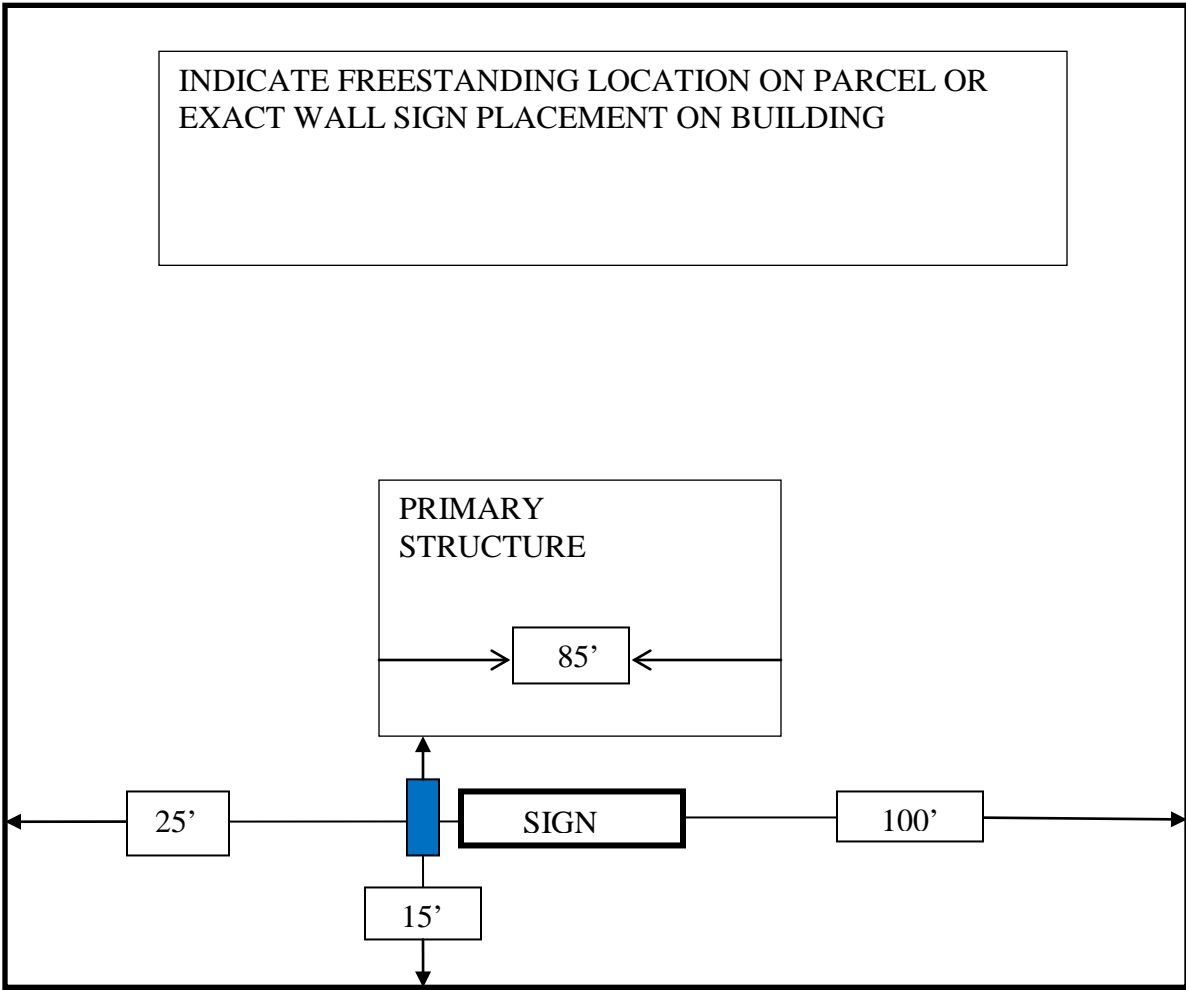
OWNER: (PRINT) _____ (SIGN) _____

DATE: _____

PROVIDE ACTUAL DIMENSIONS FROM YOUR PROPERTY LINES

OUTLINE OF YOUR PROPERTY LINE BOUNDARY MAY VARY

INDICATE FREESTANDING LOCATION ON PARCEL OR
EXACT WALL SIGN PLACEMENT ON BUILDING



STREET: #249 DUNCAN ROAD

TOWN OF UNION VALE BUILDING DEPARTMENT
249 DUNCAN ROAD
LAGRANGEVILLE, NY 12540

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

Greg Murad

HCR #4

Kelly Corners, NY 12455

845 586-2430

888 693-4693

Tom LeJune

Local Inspector

PO box 384

Amenia, NY 12501

845 373-7308

Z3 CONSULTANTS, Inc.

Gary Beck

PO Box 363

Lagrangeville, NY 12540

Office/ Fax: 845 471-9370

NY BOARD OF FIRE UNDERWRITERS

Pat Decina

845 298-6792

800 356-2556

NY ATLANTIC-INLAND INC.

William Jacox

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

nick@nyeis.us

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

REV DATE:
11/30/11

