

# TOWN OF UNION VALE

DIRECTOR OF CODE ENFORCEMENT  
GEORGE A. KOLB JR.



SUPERVISOR  
BETSY MAAS

TOWN COUNCIL  
JOHN WELSH  
STEVE FRAZIER  
KEVIN DURLAND  
KEVIN MCGIVNEY

**BUILDING DEPARTMENT**  
249 DUNCAN ROAD  
LAGRANGEVILLE, NY 12540  
(845) 724-5953  
FAX: (845) 724-3757  
**building2@unionvaleny.us**

## BUILDING PERMIT APPLICATION

# ELECTRICAL

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

APPLIC FORM COMPLETED    INSURANCE SUBMITTED    INSURANCE ON FILE    CONSENT IF APPLIC

### FULL DESCRIPTION OF WORK TO BE PERFORMED:

Commercial: \_\_\_\_\_

Residential: \_\_\_\_\_

### DESCRIPTION:

Service Upgrade

Distribution wiring

Repair

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Inspections Required:

Rough Electrical before walls are closed.

Final Electrical Inspection by third party list provided in application. Submit copy of said inspection to this office.

Final inspection by this office, if required for compliance, for issuance of Certificate of Compliance.

# 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 (\*REQUIRED\*):** \_\_\_\_\_

**NAME OWNER OF BUILDING/LAND:** \_\_\_\_\_

**\*PROJECT SITE ADDRESS\*:** \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_

**EMAIL (\*REQUIRED\*):** \_\_\_\_\_

**BUILDING/CONTRACTOR/ ARCHITECT OR ENGINEER IF REQ.**

COMPANY NAME: \_\_\_\_\_

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

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_

**EMAIL (\*REQUIRED\*):** \_\_\_\_\_

**DESCRIPTION OF WORK:** \_\_\_\_\_

**ESTIMATE COST OF PROJECT:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

→ **Signature of Applicant/ Date**

REV: 7/25/16

<p style="text-align: center;"><b>OFFICE USE ONLY</b></p> <p style="text-align: center;"><b>APPROVALS: Zoning/ Fire/ Building</b></p> <p style="text-align: center;"><input type="radio"/> Approved    <input type="radio"/> Denied    DATE: _____</p> <hr/> <p style="text-align: center;"><b>Signature of Code Enforcement Officer</b></p> <p style="text-align: center;">FEE DUE: \$ _____ PAID ON: _____</p>
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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: \_\_\_\_\_

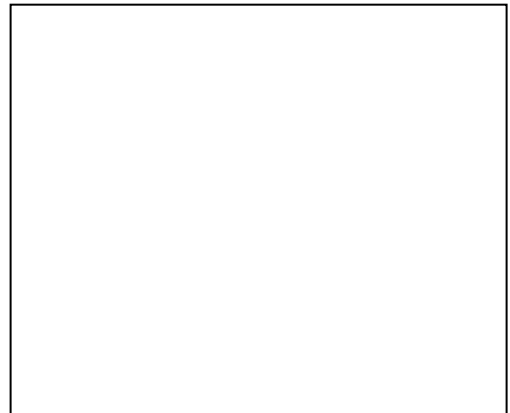
Parcel Location: \_\_\_\_\_

Contractor: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Print: \_\_\_\_\_

### **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.

TOWN OF UNION VALE BUILDING DEPARTMENT  
249 DUNCAN ROAD  
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**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](mailto: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](mailto:info@nyeis.us) Office  
[joann@nyeis.us](mailto:joann@nyeis.us) Certs/Billing

Ed Odell 914 384-6763  
Brian McPartland 914 382-4921  
Nick Morabito 914 384-6605

[nick@nyeis.us](mailto: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](mailto:jwierl@nyeic.com)

REV DATE: 11/30/11