BUILDING PERMIT APPLICATION

E L E C T R I C A L

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

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<th>APPLIC FORM COMPLETED</th>
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<th>INSURANCE SUBMITTED</th>
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<th>INSURANCE ON FILE</th>
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<th>CONSENT IF APPLIC</th>
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FULL DESCRIPTION OF WORK TO BE PERFORMED:

O  Commercial:__________________________________________________________

O  Residential:___________________________________________________________

DESCRIPTION:

O  Service Upgrade                     O  Distribution wiring                    O  Repair

O  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: O Residential  O New Construction  O Commercial  O 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: __________________________

____________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________

______________________________________________________
→ Signature of Applicant/ Date

OFFICE USE ONLY

APPROVALS:  Zoning/ Fire/ Building

O Approved     O Denied     DATE: ________

___________________________________________________
Signature of Code Enforcement Officer

FEE DUE: $___________ PAID ON: ________________

REV: 7/25/16
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.

REV 1/16/2014
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

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

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

REV DATE: 11/30/11

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