

**VILLAGE OF NEWARK**  
**BUILDING PERMIT**

**BUILDING PERMITS ARE REQUIRED FOR:**

**ALL NEW CONSTRUCTION**

**ADDITIONS TO EXISTING STRUCTURES**

**STRUCTURAL REMODELING OR ALTERATIONS**

**UTILITY SHEDS OVER 144 SQUARE FEET**

**SWIMMING POOLS**

**MOBILE HOMES IN MOBILE HOME PARKS**

**SOLID FUEL BURNING APPLIANCES**

**FUEL STORAGE TANKS**

**STRUCTURE MOVING**

**TO OBTAIN A BUILDING PERMIT, THE FOLLOWING ITEMS ARE REQUIRED:**

1. Instrument survey map of existing structures.
2. Plot plan for new structures.
3. Complete construction plans: For new construction, additions and remodeling over 1,500 square feet or in excess of \$20,000 require a licensed engineer's or architect's seal by State Education law Title 8, Section 7209 and Section 7307.
4. Certificate of liability, disability and Workmen's compensation insurance. If Workmen's Compensation is not required, a waiver must be filed Form WC/DB-100 (7-04).
5. Plans must comply with New York State Uniform Fire Prevention and Building Codes and Chapter 62 and Chapter 170 of the Village of Newark Code. Application may be made to the Zoning Board of Appeals for a variance, if required, and the application fee is \$100.00.
6. Wayne County Planning Board approval is required for structures fronting or having access from County roads.
7. New York State Department of Transportation approval is required for structures having access from State roads.

### **CERTIFICATES OF OCCUPANCY:**

No land can be occupied or used and no building which is erected, altered or extended can be used or changed in use until a Certificate of Occupancy is issued. Certificates of Occupancy cannot be issued until final building, plumbing and electrical approvals have been made. Electrical inspections are to be made by an electrical inspection agency approved by the Village of Newark.

### **DEMOLITION PERMITS:**

Required for the demolition of all structures, part of structure, or permanent type swimming pools. Requirements:

1. Certificate of waiver of Workmen's Compensation or Workman's Compensation and Disability Insurance Certificate.
2. Extermination and disinfectant's certificate for rodent and weed control.
3. Signed contract between owner and contractor.
4. Letter of credit, bond or certified check in the amount of \$500 to insure site clean-up in accordance with Village standards.
5. Documentation of planned disposal site. No burning allowed. **ALL** demolition materials are to be removed from the site.

### **FEES AND CHARGES:**

Fees are per Village Board authorized fee schedule on file in the Building and Zoning Department.

Costs for the work described in the Application for Building Permit include the cost of all of the construction, and other work done in connection therewith, exclusive of the cost of the land. If final cost shall exceed estimated cost, an additional fee may be required before the issuance of Certificate of Occupancy.

### **INSPECTIONS:**

Schedule inspections at least two (2) days in advance. Call 331-4770, Code Enforcement Official. Office hours are 8:00 A.M. to 5:00 P.M., Monday through Friday, except legal holidays when the office is closed.

**VILLAGE OF NEWARK**  
**BUILDING PERMIT APPLICATION**

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**OFFICE USE ONLY**

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Zoning of Lot: \_\_\_\_\_ Planning Board Approval/Date: \_\_\_\_\_ Zoning Approval/Date: \_\_\_\_\_

Certificate of Occupancy Required? Yes ☐ No ☐ Third Party Electrical Inspection Required? Yes ☐ No ☐

Certificate of Compliance Required? Yes ☐ No ☐ Power Line Setback Approval Required? Yes ☐ No ☐

RPZ Required? Yes ☐ No ☐ Easements Required or On-site? Yes ☐ No ☐

Code Enforcement Inspections Required:

☐ Footer ☐ Backfill ☐ Framing ☐ Insulation ☐ Plumbing ☐ Final

Reviewed/Approved By: \_\_\_\_\_

Building Permit Number: \_\_\_\_\_

Building Permit Fee: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Date Approved: \_\_\_\_\_

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**1. PERMIT APPLICANT**

Name: \_\_\_\_\_ Home Phone: (    ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Bus. Phone: (    ) \_\_\_\_\_

**2. PROPERTY OWNER IF DIFFERENT FROM APPLICANT**

Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**3. PROJECT LOCATION:**

Street Address: \_\_\_\_\_

Tax Map number: \_\_\_\_\_

**4. ARCHITECT OR ENGINEER OF RECORD**

Name: \_\_\_\_\_ Bus. Phone: (    ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

New York State License #: \_\_\_\_\_

**5. PRIME CONTRACTOR/BUILDER**

Name: \_\_\_\_\_ Bus. Phone: (    ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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6. CONTRACTOR INSURANCE

A. Workman's Compensation secured by Contractor

Yes ☐ No ☐ N/A ☐

B. Disability Benefits Secured by Contractor

Yes ☐ No ☐ N/A ☐

7. PROPOSED WORK, CONSTRUCTION, AND OCCUPANCY CLASSIFICATION

A. Nature of Work: \_\_\_\_\_

B. Occupancy or Use Classification: \_\_\_\_\_

C. Construction Classification: \_\_\_\_\_

D. Estimated Cost (Materials & Labor): \$ \_\_\_\_\_

E. Structure Size: \_\_\_\_\_  
(Length X Width)

Height: \_\_\_\_\_ Square Footage: \_\_\_\_\_

8. SITE INFORMATION

A. Flood Plain: Is the site within a flood plain? Yes ☐ No ☐

B. Water Supply: Public: ☐ on-premise well ☐?

C. Sewage Disposal System: Public: ☐ Private Septic: ☐

D. Energy Information: Heating Source (Primary) \_\_\_\_\_

(Secondary) \_\_\_\_\_

9. OTHER

A. The applicant shall notify the Code Enforcement Official of any changes in the information contained in the application during the period for which the permit is in effect. A permit will be issued when the application has been determined to be complete and when the proposed work is determined to conform to the requirements of the New York State Uniform Fire Prevention and Building Code. The authority conferred by such permit may be limited by conditions.

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- B. A building permit may be suspended or revoked if it is determined that the work to which it pertains is not proceeding in conformance with the New York State Uniform Fire Prevention and Building Code, or with any condition attached to such permit, or if there has been a misrepresentation or falsification of a material fact in connection with the application for the permit.
- C. A building permit shall expire twelve (12) months from the date of issuance, or upon the issuance of a Certificate of Occupancy (other than a temporary Certificate of Occupancy), whichever comes first. The Code Enforcement Official may, upon written request for good cause, allow successive extensions for periods not excluding three (3) months each, provided that (1) The permit has not been revoked or suspended at the time the application for extension is made; (2) The relevant information in the application is up to date; (3) a renewal fee of \$ 30.00 is paid with the extension request.

10. CERTIFICATION

I HEREBY CERTIFY THAT I HAVE READ THE INSTRUCTIONS AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES COVERING THIS TYPE OF WORK WILL BE COMPLETED WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING THE CONSTRUCTION, THE PERFORMANCE OF CONSTRUCTION OR USE OF A STRUCTURE.

OWNER/AUTHORIZED AGENT: \_\_\_\_\_ DATE: \_\_\_\_\_

11. SUBMISSION

Two (2) sets of plans (including site and landscaping, elevations, sections, details, and schedules) and specifications describing the proposed work are to be submitted with each application. All plans and specifications shall be in accordance with the State Education Law, Sections 7307 and 7209. This law requires that the seal and signature of a licensed architect or professional engineer be affixed to all plans submitted except residential buildings under 1,500 square feet of living area, or to alterations costing under \$20,000.

12. This application received by \_\_\_\_\_ DATE: \_\_\_\_\_

**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION, PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION IN THE VILLAGE OF NEWARK**

**Owner:** \_\_\_\_\_

**Subject property:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please take notice that the (check applicable line):**

- \_\_\_\_\_ **New Residential Structure**
- \_\_\_\_\_ **Addition to existing residential structure**
- \_\_\_\_\_ **Rehabilitation to existing residential structure**

**To be constructed or performed at the subject property reference will utilize (check each applicable line):**

- \_\_\_\_\_ **Truss type construction (TT)**
- \_\_\_\_\_ **Pre-engineered wood construction (PW)**
- \_\_\_\_\_ **Timber construction (TC)**

**In the following location(s) (check applicable line):**

- \_\_\_\_\_ **Floor framing, including girders and beams (F)**
- \_\_\_\_\_ **Roof framing (R)**
- \_\_\_\_\_ **Floor framing and roof framing (FR)**

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Name:** (Print of type name of person signing and submitting form)

\_\_\_\_\_

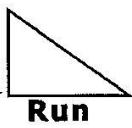
**Capacity:** (Insert "Owner" or "Owner's Representative" as applicable)

\_\_\_\_\_

# CROSS SECTION

Town or City of: \_\_\_\_\_ Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Street: \_\_\_\_\_

\_\_\_\_\_ Pitch  \_\_\_\_\_ Run

\_\_\_\_\_ "Roof Sheathing" \_\_\_\_\_ Ridge Board \_\_\_\_\_ x

\_\_\_\_\_ #Roof Felt \_\_\_\_\_ Rafters \_\_\_\_\_ x

\_\_\_\_\_ Roof Color \_\_\_\_\_ "OC.

\_\_\_\_\_ Roof Type \_\_\_\_\_ Wall Ties or \_\_\_\_\_ x

\_\_\_\_\_ x Facia \_\_\_\_\_ Ceiling Joists \_\_\_\_\_ "OC.

\_\_\_\_\_ x Soffit \_\_\_\_\_ Top Plates \_\_\_\_\_ x

\_\_\_\_\_ Header \_\_\_\_\_ x

\_\_\_\_\_ Sidewall \_\_\_\_\_

\_\_\_\_\_ "Sheathing" \_\_\_\_\_ Framing \_\_\_\_\_ x

\_\_\_\_\_ Felt \_\_\_\_\_ "OC.

\_\_\_\_\_ Building \_\_\_\_\_

\_\_\_\_\_ #Paper \_\_\_\_\_ Firewall \_\_\_\_\_ Yes

\_\_\_\_\_ Siding Type \_\_\_\_\_ No

\_\_\_\_\_ "Siding Exposure" \_\_\_\_\_ Bottom Plate \_\_\_\_\_ x

\_\_\_\_\_ Sub Floor \_\_\_\_\_ "

\_\_\_\_\_ Joists \_\_\_\_\_ "OC.

\_\_\_\_\_ x Sill Plate \_\_\_\_\_ Crawl Space \_\_\_\_\_ "

\_\_\_\_\_ #Block Rows \_\_\_\_\_ Steel Mesh \_\_\_\_\_ x

\_\_\_\_\_ x x Block Size \_\_\_\_\_ Slab \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Thickness \_\_\_\_\_

\_\_\_\_\_ "Footing Width" \_\_\_\_\_ Drain Crock \_\_\_\_\_ Yes

\_\_\_\_\_ "Footing Depth" \_\_\_\_\_ No

**Workers' Compensation Requirements under Workers' Compensation Law §57**

To comply with coverage provisions of the Workers' Compensation Law (WCL), businesses must:

- a) be legally exempt from obtaining workers' compensation insurance coverage; or
- b) obtain such coverage from insurance carriers; or
- c) be a Board-approved self-insured employer; or
- d) participate in an authorized group self-insurance plan.

To assist State and municipal entities in enforcing WCL Section 57, businesses requesting permits or seeking to enter into contracts **MUST provide ONE** of the following forms to the government entity issuing the permit or entering into a contract:

A) Form CE-200, *Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage*;

Form CE-200 can be filled out electronically on the Board's website, [www.wcb.state.ny.us](http://www.wcb.state.ny.us). Click on the last button in the lower right hand corner {WC/DB Exemptions Form CE-200 (In bright yellow letters)} Applicants filing electronically are able to print a finished Form CE-200 immediately upon completion of the electronic application. Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the Customer Service Center at any district office of the Workers' Compensation Board. Applicants using the manual process may wait up to four weeks before receiving a CE-200. Once the applicant receives the CE-200, the applicant can then submit that CE-200 to the government agency from which he/she is getting the permit, license or contract; or

B) Form C-105.2, *Certificate of Workers' Compensation Insurance* (the business's insurance carrier will send this form to the government entity upon request). Please Note: The State Insurance Fund provides its own version of this form, the U-26.3; or

C) Form SI-12, *Certificate of Workers' Compensation Self-Insurance* (the business calls the Board's Self-Insurance Office at 518-402-0247), or GSI-105.2, *Certificate of Participation in Worker's Compensation Group Self-Insurance* (the business's Group Self-Insurance Administrator will send this form to the government entity upon request).

**Disability Benefits Requirements under Workers' Compensation Law §220(8)**

To comply with coverage provisions of the WCL regarding disability benefits, businesses may:

- a) be legally exempt from obtaining disability benefits insurance coverage; or
- b) obtain such coverage from insurance carriers; or
- c) be a Board-approved self-insured employer.

Accordingly, to assist State and municipal entities in enforcing WCL Section 220(8), businesses requesting permits or seeking to enter into contracts **must** provide one of the following forms to the entity issuing the permit or entering into a contract:

A) CE-200, *Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage* (see above);

B) DB-120.1, *Certificate of Disability Benefits Insurance* (the business's insurance carrier will send this form to the government entity upon request); or

C) DB-155, *Certificate of Disability Benefits Self-Insurance* (the business calls the Board's Self-Insurance Office at 518-402-0247).

**NYS Agencies Acceptable Proof:** Letter from the NYS Department of Civil Service indicating the applicant is a New York State government agency covered for workers' compensation under Section 88-c of the Workers' Compensation Law and exempt from NYS disability benefits.

Please note that for **building permits only**, certain homeowners of 1, 2, 3 or 4 family owner-occupied residences serving as their own General Contractor may be eligible to file Form BP-1 (The homeowner obtains this form from either the Building Department or on the Board's website, <http://www.wcb.state.ny.us/content/main/forms/bp-1.pdf>)



**IF YOU'RE NOT  
LEAD-SAFE CERTIFIED,  
DISTURBING  
JUST SIX  
SQUARE FEET  
COULD COST YOU  
BIG TIME**

**GET LEAD-SAFE CERTIFIED BY APRIL 22, 2010.**



**If you're working on homes, schools or day care centers built pre-1978, you now must be EPA Lead-Safe Certified.**

#### **WHAT**

The Lead-Based Paint Renovation, Repair and Painting (RRP) rule is a federal regulatory program affecting anyone who disturbs painted surfaces where lead may be present.

- Submit an application to certify your firm for five years.
- A one-day class will certify your renovators for five years.
- Learn the required steps to contain the work area, minimize dust and thoroughly clean up every day.

#### **WHO**

- Any contractor, including renovators, electricians, HVAC specialists, plumbers, painters and maintenance staff, who disrupts more than six square feet of lead paint in pre-1978 homes, schools, day care centers and other places where children spend time.

#### **WHY**

1. Avoid risk of government fines and civil liability:
  - Without certification and by not following approved practices, you and your company can face tens of thousands of dollars in fines and put yourself and your company at risk of potential lawsuits.
2. Protect your workers, yourself and your customers from a health risk:
  - Dust from renovation, repairs and painting can contaminate an entire home and, if inhaled or ingested, can cause irreversible damage to children and adults.
3. Gain competitive advantage:
  - Certification makes you stand out from others and positions you as a professional contractor consumers can trust. Using your company's certification in your marketing materials may help attract business.
  - Consumers will look for the certification before hiring contractors and may be more accepting of additional costs and time associated with doing the job safely.
  - Upon certification of your firm, your company will be listed as a Lead-Safe Certified Contractor on the EPA website, giving your firm the potential for new customers.

#### **WHERE**

To find an accredited trainer in your local area or get additional info, go to [epa.gov/getleadsafe](http://epa.gov/getleadsafe) or call 800-424-LEAD.

#### **WHEN**

**Now** -- Certification requirements begin April 22, 2010.