

# TOWN OF WAPPINGER



**BUILDING DEPARTMENT**  
20 MIDDLEBUSH ROAD  
WAPPINGERS FALLS, NY 12590-0324  
(845) 297-6256  
FAX: (845) 297-0579

## **BUILDING PERMIT APPLICATION (COMMERCIAL-NEW CONSTRUCTION)**

**Fee: \$250 (additional fees will apply)**

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

The following will need to be submitted to process your application:

1. Town of Wappinger Planning Board Resolution of approval for project.  
(ALL ITEMS MUST BE ADDRESSED IN RESOLUTION)
2. Two complete sets of approved site plan (SUPPLY GRID NUMBER ON EACH COPY)
3. Two complete sets of certified building plans with all contact numbers of design professional of record for the project.  
**\*\*PDF copy of plans will also be required in addition to the 2 paper copies.\*\***
4. Legal 911 address for property pertaining to project

Note to all applicants:

**ALL DRAWINGS SUBMITTED WILL BE REVIEWED  
FOR COMPLIANCE TO THE NEW YORK STATE BUILDING/FIRE CODE.  
YOU MUST PROVIDE ALL INFORMATION FOR PROCESSING, INCLUDING  
SEISMIC DESIGN FOR AREA/ALL FIRE ALARM DIAGRAMS, ETC.**

**\*\*ALL FEES ARE NON-REFUNDABLE\*\***

## BUILDING DEPARTMENT

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# REQUIREMENTS

## FOR ALL BUILDING PERMIT APPLICATIONS

- APPLICATIONS MUST BE COMPLETELY FILLED OUT AND SIGNED
- OWNERS SIGNATURE AND/OR OWNERS CONSENT FORM REQUIRED
- PLOT PLANS MUST BE FILLED OUT COMPLETELY AND SIGNED
- APPLICATION FEE MUST ACCOMPANY APPLICATION
- SURVEY OF PROPERTY REQUIRED
- INSURANCE REQUIRED (WORKERS COMP. AND DISABILITY OR EXEMPTION FORM)

The Town of Wappinger requires proof of Workers' Compensation (C105 or 26.3) and Disability (DB120) insurance. The town must be listed as certificate holder. The Certificate of Attestation of Exemption, Form CE-200, may only be completed by homeowners doing their own work, entities with no employees and/or out-of-state entities obtaining a contract or license in which all the work is being performed outside of New York State. A new CE-200 is required for each project with the project address listed on the certificate.

WE DO NOT ACCEPT THE ACCORD FORM AS PROOF OF INSURANCE

- ANY NEWLY PURCHASED PROPERTIES MUST ATTACH THE RECORDING PAGE FROM THE DUTCHESS COUNTY CLERK

***\*IF APPLICATION IS NOT LEGIBLE IT WILL NOT BE***

***ACCEPTED*** \*APPLICATIONS CAN ONLY BE PROCESSED ONCE ALL REQUIRED ITEMS ARE RECEIVED\*



**Dutchess County  
Department of Emergency Response  
Address Request Form**



Office Phone: (845) 486-2080  
392 Creek Road, Poughkeepsie, New York 12601

Fax Number: (845) 486-3998  
[addressing@dutchessny.gov](mailto:addressing@dutchessny.gov)

Name of Firm/Person requesting address \_\_\_\_\_

Contact person \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

**TO BE FILLED IN BY PERSON REQUESTING NEW ADDRESS:**

1. Type of Structure: ( ) Single-family ( ) Commercial ( ) Government  
( ) Multi-family ( ) Mobile Home ( ) Accessory Use ( ) Other

\_\_\_\_\_

2. Real Property Tax Parcel Grid Number:

**13** \_\_\_\_\_  
Swis code (4) Section (4) Block (2) Lot (6) Suffix (4)

Filed Map Number (if available): \_\_\_\_\_ Lot # \_\_\_\_\_

3. Parcel old address (if applicable):

\_\_\_\_\_

4. **Attach a plot plan showing actual location of driveway:**

=====

**To be completed by Addressing Staff:**

New assigned 9-1-1 address: \_\_\_\_\_

Assigned by: \_\_\_\_\_ Date Assigned: \_\_\_\_\_

**TOWN OF WAPPINGER BUILDING DEPARTMENT**

20 Middlebush Road, Wappingers Falls, N.Y. 12590

telephone: 845-297-6256 fax: 845-297-0579

**APPLICATION FOR BUILDING PERMIT**

**APPLICATION TYPE:**     Residential                                    **ZONE:** \_\_\_\_\_                                    **DATE:** \_\_\_\_\_  
 New Construction                                     Commercial                                    **APPL #:** \_\_\_\_\_                                    **PERMIT #** \_\_\_\_\_  
 Renovation/Alteration     Multiple Dwelling                                    **GRID:** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_

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

**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

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

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

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

**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**BUILDER/CONTRACTOR DOING WORK:**

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

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

**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**DESIGN PROFESSIONAL NAME:**

**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**APPLICATION FOR:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SETBACKS:** **FRONT:** \_\_\_\_\_ **REAR:** \_\_\_\_\_ **L-SIDEYARD:** \_\_\_\_\_ **R-SIDEYARD:** \_\_\_\_\_

**SIZE OF STRUCTURE:** \_\_\_\_\_

**ESTIMATED COST:** \_\_\_\_\_ **TYPE OF USE:** \_\_\_\_\_

**NON-REFUNDABLE APPL. FEE:** \_\_\_\_\_ **PAID ON:** \_\_\_\_\_ **CHECK #** \_\_\_\_\_ **RECEIPT #:** \_\_\_\_\_

**BALANCE DUE:** \_\_\_\_\_ **PAID ON:** \_\_\_\_\_ **CHECK #** \_\_\_\_\_ **RECEIPT #:** \_\_\_\_\_

**APPROVALS:**

**ZONING ADMINISTRATOR:**

Approved     Denied    **Date:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**

**FIRE INSPECTOR:**

Approved     Denied    **Date:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of Building Inspector**

\_\_\_\_\_  
**Print Name or Company Name(if applicable)**

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## OWNER CONSENT FORM

BUILDING PERMIT # \_\_\_\_\_ APPLICATION # \_\_\_\_\_

SITE LOCATION: \_\_\_\_\_

GRID: # \_\_\_\_\_

Name of APPLICANT/OWNER: \_\_\_\_\_

### ~ CERTIFICATION ~

#### 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/or Zoning Administrator.

*I, \_\_\_\_\_, owner of the land/site/building hereby give my permission for the Town of Wappinger to approve or deny the attached application in accordance with local and state codes and ordinances. I understand that this permit will not be closed out unless all proper inspections are completed which can include the building inspector having access to the interior of my residence. If this permit is not closed before the expiration date it will remain as a violation on my property until it is closed out. After the expiration date the permit fee and application will have to be re-submitted in order to close out the permit. I understand that I am ultimately responsible for the closure of this permit.*

**FAILURE TO COMPLY MAY RESULT IN COURT PROCEEDINGS.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Owner's Telephone Number

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Owner's Address

**FOR OFFICE USE ONLY**

Code Enforcement Official: \_\_\_\_\_

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## **TOWN OF WAPPINGER** **BUILDING DEPARTMENT INSPECTION PROCEDURE**

**\*ANY CHANGES to plans require approval by Code Official\***  
You are required to call **1-800-962-7962** before you excavate and contact **Underground Facilities Protective Organization** for approval.

You are required to schedule all inspections 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. Erosion control measures as dictated on plan or notes;  
All new homes must install a construction Rock Wash at Drive entrance 12' x 25' before site construction begins.
3. Footing inspection when complete all rebar placement and form work;  
notify at least 24 hours before our (mandatory)
4. Foundation walls both poured concrete and block complete;  
Notify at least 24 hours before pour.
5. Footing drains and damp-proof of walls before backfill.
6. **Provide interim foundation location (4 COPIES). Must be approved by Town and signed copy returned to applicant before framing can begin.**
7. Framing inspection compliance to submitted approved drawings.
8. Rough plumbing with all required air/water tests
9. Mechanical Inspection includes: Furnace/Fireplace/Woodstove etc.
10. Rough Electrical inspection by third party, approved list supplied.
11. Insulation compliance inspection prior to drywall installation
12. Final Electrical inspection by third party agency certificate  
**MUST BE SUBMITTED TO THIS OFFICE.**
13. Final inspection by Fire Inspector for approval.
14. **Provide FINAL AS-BUILT for Site Plan of Project (4 COPIES)**
15. Final Inspection by Zoning Administrator for compliance to site plan approval and resolution.
16. Provide ALL certificates required by Dutchess County Board of Health.
17. **FINAL INSPECTION BY CODE OFFICIAL FOR COMPLIANCE TO SUBMITTED DRAWINGS AND N.Y.S. BUILDING CODE.**

**\*IT SHALL BE UNLAWFUL TO OCCUPY ANY STRUCTURE UNTIL A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS ISSUED BY THE CODE ENFORCEMENT OFFICER OF THE TOWN OF WAPPINGER\***

## Town Board Approved Electrical Inspection Agencies

Name:	Telephone #
<b>Middle Department Insp. Agency, Inc.</b>	
Dave Williams	(800) 479-4504
<b>New York Electrical Inspectors</b>	
Greg Murad	(845)586-2430/(888) 693-4693
Tom Le Jeune	(845)373-7308
<b>New York Board</b>	
Pat Decina	(845)298-6792
<b>Tri-State Insp. Agency, Inc.</b>	
Lou Ambrosia	(845) 986-6514
<b>Commonwealth Electrical Insp. Services</b>	
Keith Sutton	(845) 527-8821
Ron Henry	(845)562-8429
<b>All County Electrical Insp. Services, Inc.</b>	
Dave Scism	(845)757-5916
<b>Electrical Underwriters of NY, LLC</b>	
Ernest C Bello Jr.	(845) 569-1759
<b>The Inspector, LLC</b>	(518) 497-9918
<b>Z3 Consultant, Inc.</b>	
Gary Beck	(845) 471-9370
<b>NY Electrical Insp. &amp; Consult, LLC</b>	
John Wierl	(845) 551-8466
<b>Swanson Consulting, Inc.</b>	
J.O. Swanson	(845)496-4443
<b>State Wide Inspection Services</b>	
Frank J. Farina	(845) 202-7224
<b>New York Certified Electrical Inspectors</b>	
Jerry Caliendo	(845) 294-7695
John Metsger	(845) 339-2119