

# TOWN OF WAPPINGER



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

## BUILDING PERMIT APPLICATION (MANUFACTURED HOME)

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

APPLIC FORM COMPLETED     INSURANCE SUBMITTED (WC&DB)     INSURANCE ON FILE     CONSENT IF APPLIC

Grid # \_\_\_\_\_ Date: \_\_\_\_\_

BP # \_\_\_\_\_ APPLIC # \_\_\_\_\_

Make: \_\_\_\_\_ SINGLE or DOUBLE-WIDE

Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_ Year: \_\_\_\_\_

Size: \_\_\_\_\_ Bedrooms: \_\_\_\_\_

Deck: ( ) YES ( ) NO Size: \_\_\_\_\_

Shed: ( ) YES ( ) NO Size: \_\_\_\_\_

**PARK NAME:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Park Owner:** Name: \_\_\_\_\_

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

Telephone # \_\_\_\_\_

**Mobile Home Owner:**

Name: \_\_\_\_\_

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

Telephone # \_\_\_\_\_ Lot # \_\_\_\_\_

**Mobile Home Installer:**

Name: \_\_\_\_\_

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

Telephone # \_\_\_\_\_

All mobile home installations are to comply with the New York State Uniform Fire Prevention and Residential Code and Town of Wappinger Building Code and Zoning Code and Fire Prevention Code.

**INSPECTIONS REQUIRED ARE AS FOLLOW: Concrete Slab, Electrical and Water Line, Footings for Decks and Final Inspection prior to skirting by Code Official for Compliance. \*\*ALL FEES ARE NON-REFUNDABLE\*\***

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

\_\_\_\_\_

**FIRE INSPECTOR:**

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

\_\_\_\_\_

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

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

(Person PHYSICALLY coming in to apply, if other than the 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: \_\_\_\_\_

# TOWN OF WAPPINGER PLOT PLAN

Building Permit # \_\_\_\_\_

Date \_\_\_\_\_

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

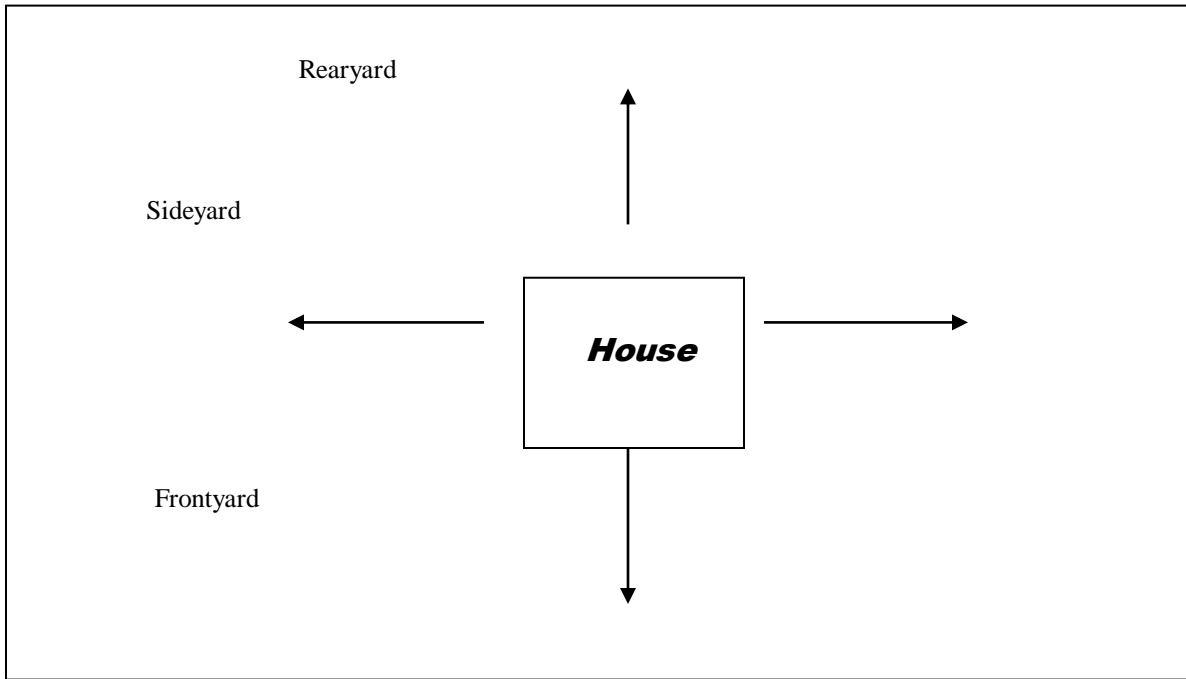
Interior/Corner Lot: *circle one*

Owner of Land \_\_\_\_\_

Zone: \_\_\_\_\_

**LIST ALL EXISTING STRUCTURES ON PROPERTY:** (*ie: Pool, shed, decks, detached garage*)

1. House, \_\_\_\_\_



Draw proposed structure on plot plan.  
Indicate Location Setbacks to both sides and rear property line  
measurement of structure you are applying for.

\_\_\_\_\_  
Signature

Approved:/Rejected: \_\_\_\_\_

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

Zoning Administrator

## 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