

TOWN OF WAPPINGER



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

Fees:

72 SF or under: \$50

Over 72 SF to 200 SF: \$100

Over 200 SF: \$100 plus

\$0.40 per SF

BUILDING PERMIT APPLICATION

(ACCESSORY STRUCTURES)

Constructed Sheds, Pre-Fab Sheds & Non-Habitable Structures

LEGALIZATION FEE: \$250.00 IF APPLICABLE

****NO MATERIAL FOR STRUCTURES CAN BE INSTALLED, CONSTRUCTED OR
DELIVERED UNTIL BUILDING PERMIT IS APPROVED, ISSUED AND RECEIVED.****

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

Please provide:

Specifications of structure provided by manufacturer including:

1. Deed to property
2. Survey of property
3. Brochure of Pre-Fab Shed or Car Port
4. If shed or car port stick built include:
sufficient drawings (2 Copies) of construction;
show all dimensions and construction, including footings and materials being used
5. Plot Plan Sheet provided must be filled out showing all sizes and setbacks of structure
and other structures on the property from the property line in each direction.

**STRUCTURE MUST MEET REQUIRED SETBACKS. PLEASE CHECK WITH
BUILDING DEPARTMENT PRIOR TO SUBMITTING APPLICATION.**

SHED:

NOTE: PLEASE REST SHED ON PATIO BLOCKS OR GRAVEL BASE.

ELECTRICAL:

**NOTE: ALL ELECTRICAL WORK TO BE INSPECTED;
USE LIST ATTACHED OF THIRD PARTY INSPECTORS.**

All permit fees are non-refundable

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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
- ☐ INSURANCE REQUIRED (WORKERS COMP. AND DISABILITY OR HOME OWNERS WAIVER)

The Town of Wappinger requires proof of Workers' Compensation (C105 or 26.3) and Disability (DB120) insurance. The application for a Certificate of Attestation of Exemption, Form CE-200, from Workers' Compensation and/or Disability and Paid Family Leave Benefits coverage 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

- ☐ 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***

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:** _____

FIRE INSPECTOR:

☐ Approved ☐ Denied **Date:** _____

Signature of Applicant

Signature of Building Inspector

Print Name or Company Name(if applicable)

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date _____

Address: _____

Interior/Corner Lot: *circle one*

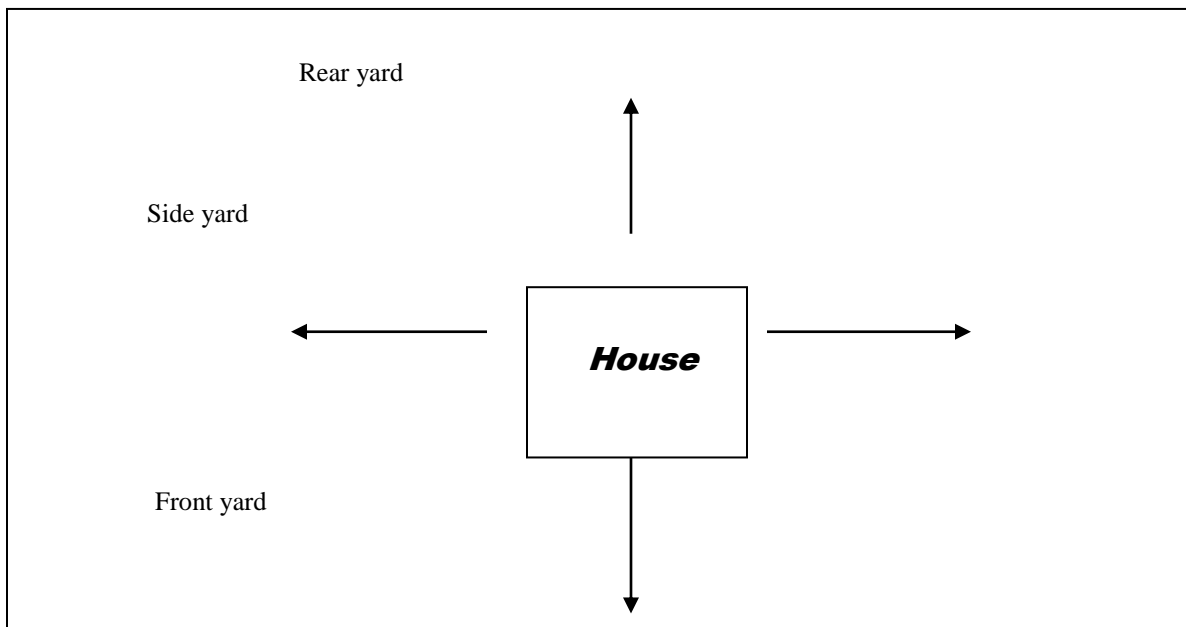
Owner of Land _____

Zone: _____

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

I. House, _____

STRUCTURE MUST MEET REQUIRED SETBACKS. PLEASE CONTACT OUR OFFICE TO FIND OUT HOW FAR YOU NEED TO BE FROM YOUR PROPERTY LINES.



INSTRUCTIONS:

- Draw proposed location of structure on plot plan.
- Indicate location setbacks to both sides and rear property line (How far away is the structure from all property lines, measure in feet) Structure must meet setback requirements.

****Please contact our office to verify your setback requirements. ****

Signature

Approved:/Rejected: _____

Date: _____

Zoning Administrator

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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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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
3. Footing inspection when complete all rebar placement and form work; notify at least 24 hours before
4. Framing inspection compliance to submitted approved drawings.
5. Rough plumbing with all required air/water tests
6. Final Electrical inspection by third party agency certificate
MUST BE SUBMITTED TO THIS OFFICE.
7. 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 #
Middle Department Insp. Agency, Inc.	
Pete Jennings Jr.	(518) 610-8133
New York Electrical Inspectors	
Greg Murad	(845)586-2430/(888) 693-4693
Tom Le Jeune	(845)373-7308
New York Board	
Pat Decina	(845)298-6792
Commonwealth Electrical Insp. Services	
Keith Sutton	(845) 527-8821
Ron Henry	(845)562-8429/845-541-1871
All County Electrical Insp. Services, Inc.	
Dave Scism	(845)757-5916
Electrical Underwriters of NY, LLC	
Ernest C Bello Jr.	(845) 569-1759
The Inspector, LLC	(518) 497-9918
Z3 Consultant, Inc.	
Gary Beck/ James Greaves	(845) 471-9370
NY Electrical Insp. & Consult, LLC	
John Wierl	(845) 551-8466
Swanson Consulting, Inc.	
J.O. Swanson	(845)496-4443
State Wide Inspection Services	
Frank J. Farina	(845) 202-7224
New York Certified Electrical Inspectors	
Jerry Caliendo	(845) 294-7695
John Metsger	
SAS Electrical Inspection	
Yuri Badovich	(845) 801-2172

**These are 3rd party inspectors and they charge their own fees.
Permit holder is responsible for the cost of these inspections***