#### TOWN OF WAPPINGER



\*\*If you are including a deck on the pool permit, the pool cannot be used until both the pool and the deck are issued a certificate of compliance\*\*

#### **BUILDING DEPARTMENT**

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

## BUILDING PERMIT APPLICATION

## (Swimming Pools, Above Ground)

Fee: \$175

LEGALIZATION FEE(work done without a permit): \$250.00 IF APPLICABLE \*\*IMPORTANT:

Any vessel that holds more than 24 inches of water must have a permit per NYS Building Code Section 3109. This includes pop-up and inflatable pools!!!!! No material for structures can be installed, constructed or delivered until building permit is approved, issued and received. Work estimated to be \$10,000 or more will require certified engineer/architect stamped and signed plans (deck).

#### INFORMATION REQUIRED FOR POOL:

- 1. Brochure of pool including information regarding ladder and height of pool sides
- 2. Specifications of pump, filter and ladder
- 3. Pool alarm specifications and certification form (form enclosed)

Pool alarm rated ASTMF2208 must be activated once pool is filled with water.

- 4. Pool must meet setback requirements (required distance from property lines) for whichever zone the property is in. Contact Building Department to find out setback requirements. Required information to be shown on plot plan page (see below)
- 5. If Pool is to include deck:
  - -sufficient drawings (2 Copies) of construction
- -show <u>all dimensions and construction</u>, <u>including footings and materials being used</u> (see attached checklist)
- 6. See below checklist for additional building permit requirements. The Building Inspector may have additional requirements.

#### INSPECTIONS REQUIRED TO CLOSE PERMIT:

- -Inspection by Town Building Inspector. Contact this department to set up inspection time.
- -Final electrical inspection by Town approved Electrical Inspection Agency. (see attached list)
- -If deck is included, footing inspection will also be required

## NO POOL TO BE USED UNTIL FINAL INSPECTION BY TOWN BUILDING INSPECTOR AND CERTIFICATE OF COMPLIANCE ISSUED!

\*ANY CHANGES to plans require approval by Code Official\*

**CALL 811 BEFORE YOU DIG** 

All permit fees are non-refundable

#### **BUILDING DEPARTMENT**

20 MIDDLEBUSH ROAD WAPPINGERS FALLS, NY 12590 (845) 297-6256 Fax (845) 297-0579

# REQUIREMENTS FOR ALL BUILDING PERMIT APPLICATIONS

\*INCOMPLETE SUBMISSIONS WILL DELAY THE ISSUANCE OF A PERMIT\*

| APPLICATIONS MUST BE COMPLETELY FILLED OUT AND SIGNED  |
|--|
| 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 DISAB.OR HOME OWNERS WAIVER   |
| The Town of Wappinger requires proof of Workers' Compensation (C105.2 or 26.3) and Disability (DB120.1) insurance. 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. |
| ANY NEWLY PURCHASED PROPERTIES WILL REQUIRE DEED   |

#### **BUILDING DEPARTMENT**

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

## **DECK AND/OR PORCH BUILDING PERMIT CHECKLIST**

Construction Drawings – Submit two (2) copies of CLEAR & NEAT "detailed" drawings of the proposed deck or porch.

Show STAIR and PLATFORMS
Show a TOP VIEW and SIDE SECTION VIEW showing

- 1. Elevations
- 2. Sizes & Dimensions of All Material (i.e. lumber)
- 3. Species of Lumber being used
- 4. All Construction Methods
- 5. Size, Depth and Spacing of Footings
- 6. Detailed Drawings of Stairs Showing Risers and Treads
- 7. Show if any electric to be added or altered
- 8. Pool gate details (if applicable)

Minimum Depth of Footings: 42"

Minimum width of footing:

Railing Height (on deck/porch) at least 36"

Railing Height (on stairs) at least 34"---no more than 38"

- 1. And to be continuous full length of stairs
- 2. Cannot be more than 2 1/4 " wide on top
- 3. Graspable handrails required. Handrails shall be continuous the full length of the stairs with four or more risers from a point directly above the lowest riser of the flight. Ends shall be returned or shall terminate in newel posts or safety terminals. Handrails adjacent to a wall shall have a space of not less than 1.5 inches between the wall and handrail.

**Stair landings** Min. 36" x 36" at top of stairs but no narrower than width of door

Min. 36" at bottom of stairs in direction of travel but no narrower than the

width of stairs

#### **GUARD OPENING LIMITATIONS:**

Spacing between spindles 4" sphere cannot pass through

Stairways – Treads & Risers 8 1/4" maximum

Riser height

Minimum Tread depth NO LESS THAN 9" if open

9" & 1 1/8" nosing if closed

Triangle area between stair risers 6" sphere cannot pass through

and treads



## DEC

#### **Swimming Pool Discharges**

(General Guidelines)

#### Be a Good Swimming Pool Neighbor!

Under certain conditions, draining swimming pools can cause fish kills and other harmful environmental impacts.

Failure to follow appropriate procedures and to implement appropriate testing and other safeguards may constitute discharge of pollutants without a State Pollutant Discharge Elimination System (SPDES) permit, could result in fish kills and other types of damage, and may cause the discharger to be subject to significant fines and to other civil and criminal liabilities

Under most conditions (when proper environmental safeguards are carefully followed) New York State Department of Environmental Conservation (NYSDEC) will not require <u>SPDES Permits</u> for draining of swimming pools to the ground.

Discharging pool water directly to or within 250 ft. of a stream, pond, lake or wetland may be prohibited or require a SPDES permit.

#### Be Astute and Don't Pollute!

- As a general rule, a 10 day holding time (after the last chemical treatment) is usually adequate to dissipate chlorine prior to discharge.
- Pool water should be essentially free of chlorine  $(\le 0.1 \text{ ppm total chlorine})$ , algaecides, and other potential pollutants prior to discharge.

Pollution Prevention Unit NYS DEC, 625 Broadway, 12<sup>th</sup> floor Albany, NY 12233-8010

- Bubbling, cascading or other forms of aeration will help to remove chlorine from the water.
- pH should be within a normal range (6 to 9). pH adjustment chemicals, instructions and test kits are available at any pool supply store.
- Pool discharges should be done slowly to prevent soil erosion, flooding, or damage to adjacent properties (the recommended maximum discharge rate is 25 gal/min or less).
- Filter system backwash should be handled and disposed of in an environmentally responsible manner.
- When in doubt, test your pool water to ensure that it is safe prior to release or discharge.

#### Keep Our Water Safe and Clean!

Remember, it is up to each one of us to do our part to protect the environment, be a good neighbor, and to comply with the law.

For additional information regarding the responsible discharge of water from swimming pools and any other water permit requirements, contact the Division of Water at your NYSDEC Regional Office.

NYSDEC Regional Office Phone Numbers:

Region 1 (631) 444-0420 Region 2 (718)482-6516 Region 3 (914) 332-1835 Region 5 (518) 623-3671 Region 7 (315) 426-7500 Region 9 (716) 851-7190 Region 8 (585) 226-5445

You can also contact the Pollution Prevention Unit (PPU) at 1-800-462-6553.

Or contact our websites:

NYSDEC website: www.dec.state.ny.us/ PPU website: www.dec.state.ny.us/website/ppu

#### Help Protect the Environment!

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

George E. Pataki, Governor

Denise M. Sheehan, Commissioner

#### **TOWN OF WAPPINGER BUILDING DEPARTMENT**

20 Middlebush Road, Wappingers Falls, N.Y. 12590 telephone: 845-297-6256 fax: 845-297-0579

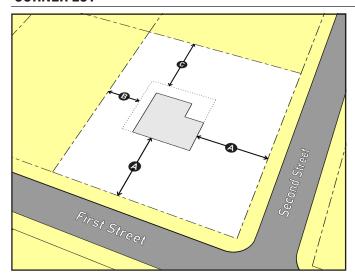
## **APPLICATION FOR BUILDING PERMIT**

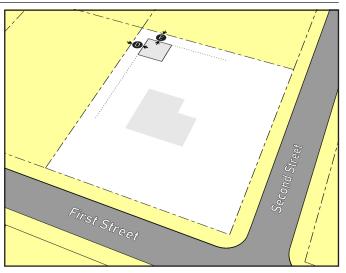
| <b>APPLICATION TYPE</b> :                 | O Residential       | <b>ZONE:</b>                        | DATE:       |
|---|---------------------|-------------------------------------|-------------|
| O New Construction                        | O Commercial        | APPL #:                             | PERMIT #    |
| O Renovation/Alteration                   | O Multiple Dwelling | GRID:                               |             |
| APPLICANT NAME:                           |                     |                                     |             |
| ADDRESS:                                  |                     |                                     |             |
|   |                     | FAX #:                              | _ E-MAIL:   |
|   |                     |                                     |             |
|   |                     |                                     |             |
|   |                     |                                     |             |
|   |                     |                                     |             |
| TEL #:                                    | _ CELL:             | FAX #:                              | E-MAIL:     |
| BUILDER/CONTRACTO COMPANY NAME:           | R DOING WORK:       |                                     |             |
|   |                     |                                     |             |
|   |                     | FAX #:                              |             |
| DESIGN PROFESSIONA                        |                     |                                     |             |
| TEL #:                                    | _ CELL:             | FAX #:                              | E-MAIL:     |
|   |                     |                                     |             |
| SETBACKS: FRONT:                          | REAR:               | L-SIDEYARD:                         | R-SIDEYARD: |
| SIZE OF STRUCTURE: _                      |                     |                                     |             |
| ESTIMATED COST:                           |                     | <b>TYPE OF USE:</b>                 |             |
| NON-REFUNDABLE API                        | PL. FEE:PAID O      | N: CHECK #                          | RECEIPT #:  |
| BALAN                                     | CE DUE:PAID O       | N: CHECK #                          | RECEIPT #:  |
| APPROVALS:                                |                     |                                     |             |
| ZONING ADMINISTRAT<br>O Approved O Denied |                     | FIRE INSPECTOR: O Approved O Denied | l Date:     |
| O Approved O Demed                        | Date                | O Approved O Demed                  | Date        |
|   |                     |                                     |             |
| Signature of Applicant                    | <del></del>         | Signature of Building Ins           | spector     |
|   |                     | ٥                                   | _           |
| Print Name or Company N                   | Name(if applicable) |                                     |             |

## **R-40 One-Family Residence District**

## **Building Placement and Composition**

#### **CORNER LOT**





#### **PRIMARY BUILDING SETBACKS**

| A        | Front yard from front line of street [min] | 50' |
|----------|--|-----|
| B        | Side yard [min]                            | 25′ |
| <b>G</b> | Rear yard [min]                            | 50' |

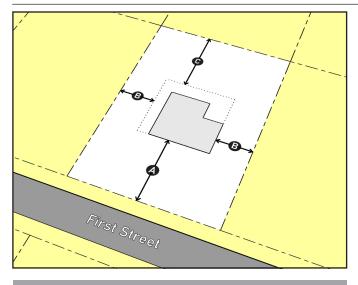
#### **ACCESSORY BUILDING SETBACKS** Accessary Building < 15' high and < 144 sq.ft.

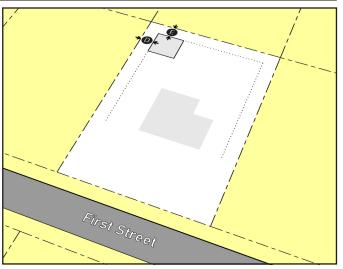
| Side yard [min] | 10' |
|-----------------|-----|
| Rear yard [min] | 10' |

Notes • For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.

Accessory structures above this size must comply with the primary structure setback requirements.

#### **INTERIOR LOT**





#### **PRIMARY BUILDING SETBACKS**

| A Front yard from front line of street [min] | 50 |
|--|----|
| Side yard [min]                              | 25 |
| Rear yard [min]                              | 50 |

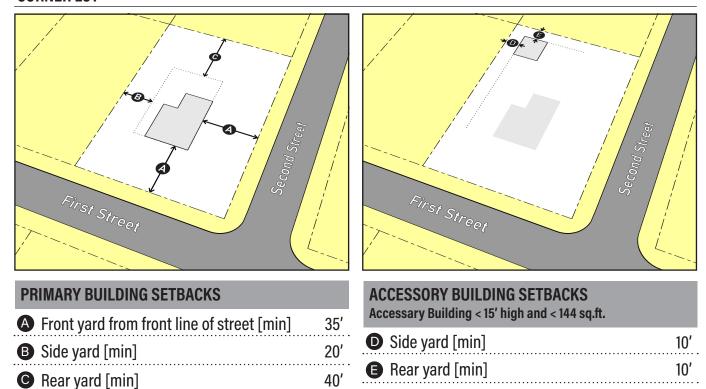
#### **ACCESSORY BUILDING SETBACKS** Accessary Building < 15' high and < 144 sq.ft.

| Side yard [min] | 10' |
|-----------------|-----|
| Rear yard [min] | 10' |

### **R-20 One-Family Residence District**

## **Building Placement and Composition**

#### **CORNER LOT**

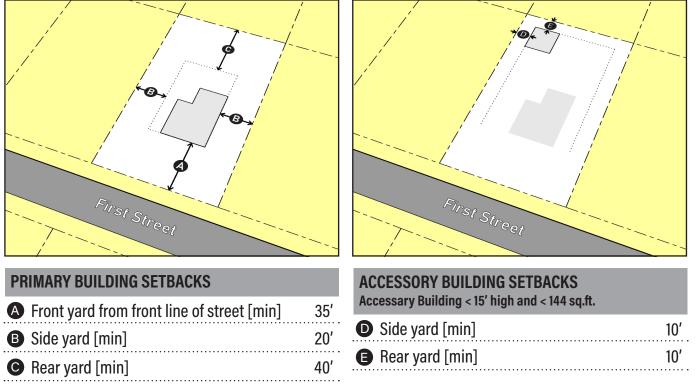


Notes - For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.

40'

- Accessory structures above this size must comply with the primary structure setback requirements.

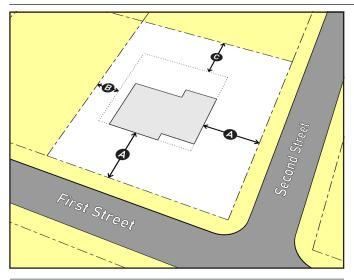
#### **INTERIOR LOT**

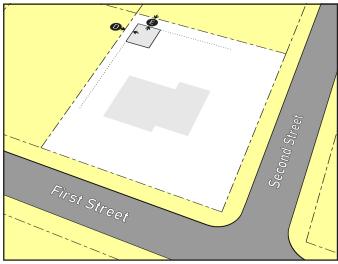


## **R-15 One-Family Residence District**

## **Building Placement and Composition**

#### **CORNER LOT**





#### **PRIMARY BUILDING SETBACKS**

| A Front yard from front line of street [min] | 35' |
|--|-----|
| Side yard [min]                              | 15′ |
| Rear yard [min]                              | 30' |

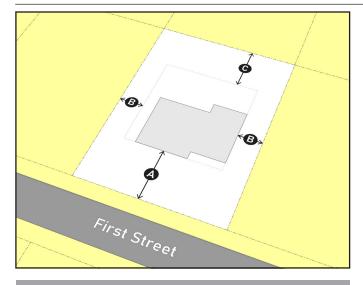
#### **ACCESSORY BUILDING SETBACKS** Accessary Building < 15' high and < 144 sq.ft.

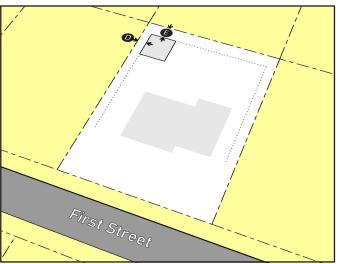
| Side yard [min] | 6′  |
|-----------------|-----|
| Rear yard [min] | 10' |

Notes - For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.

Accessory structures above this size must comply with the primary structure setback requirements.

#### **INTERIOR LOT**





#### **PRIMARY BUILDING SETBACKS**

| A Front yard from front line of street [min] | 35' |
|--|-----|
| Side yard [min]                              | 15' |
| Rear yard [min]                              | 30' |

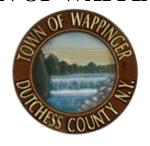
## **ACCESSORY BUILDING SETBACKS**

| Accessary Building < 15 high and < 144 sq.m. |     |
|--|-----|
| Side yard [min]                              | 6'  |
| Rear yard [min]                              | 10' |

## TOWN OF WAPPINGER PLOT PLAN

| Buildi       | ng Permit #                |                  |                   | Date                         |               |
|--------------|----------------------------|------------------|-------------------|------------------------------|---------------|
| Addre        | ess:                       |                  |                   | Interior/Corner Lo           | t: circle one |
| Owne         | r of Land                  |                  |                   | Zone:                        |               |
| LIST A       | ALL EXISTING ST            | RUCTURES ON      | N PROPERTY:       | (ie: pool, shed, decks, deta | iched garage) |
| l. <u>Ho</u> | use,                       |                  |                   |                              |               |
|              |                            |                  |                   |                              |               |
|              |                            |                  |                   |                              |               |
|              |                            | Rearyard         |                   |                              |               |
|              |                            |                  | <b>1</b>          |                              |               |
|              | Sideyard                   |                  |                   |                              |               |
|              |                            | <b>——</b>        | House             |                              |               |
|              |                            |                  | House             |                              |               |
|              | Frontyard                  |                  |                   | I                            |               |
|              |                            |                  |                   |                              |               |
|              |                            | NO POOLS PER     | RMITTED IN FRO    | ONT YARD                     |               |
| REQU         | IRED:<br>w proposed and al | l evicting struc | ctures on plot    | nlan                         |               |
| - Indi       | cate Location Setb         | acks to both si  | des and rear p    | roperty line (measure        | -             |
| - Snov       | w location of mech         | ianicai equipm   | ient and fliter s | system backwash discl        | narge area    |
|              |                            | SIG              | SNATURE REQU      | UIRED                        |               |
| Appro        | ved:/Rejected:             |                  |                   | Date:                        |               |
|              | , -                        | Zoning Adm       | inistrator        |                              |               |

## TOWN OF WAPPINGER

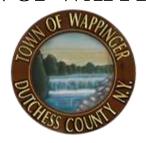


BUILDING DEPARTMENT 20 MIDDLEBUSH ROAD WAPPINGERS FALLS, NY 12590-0324 (845) 297-6256 FAX: (845) 297-0579

## **OWNER CONSENT FORM**

| BUILDING PERMIT #  | APPLICATION #  | <u></u>   |
|--|--|---|
| SITE LOCATION:   |  | _   |
| GRID: #  |  | _   |
| Name of APPLICANT/OWNER:   |  |   |
|  | ~ CERTIFICATION ~  |   |
|  | wner to use or permit the use of any building or or enlarged, wholly or partly, in its use or struct   |   |
| Wappinger to approve or deny the att<br>understand that this permit will not b<br>building inspector having access to the<br>will remain as a violation on my prop | , owner of the land/site/building her tached application in accordance with local and the closed out unless all proper inspections are the interior of my residence. If this permit is not perty until it is closed out. After the expiration lose out the permit. I understand that I am ulting IN COURT PROCEEDINGS. | d state codes and ordinances. I completed which can include the t closed before the expiration date it date the permit fee and application will |
| Date   | Owner's Signature  |   |
| Owner's Telephone Number   | Print Name   |   |
|  | Print Owner's Address  |   |

## **TOWN OF WAPPINGER**



#### **BUILDING DEPARTMENT**

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

## Building Department POOL ALARM CERTIFICATION (ASTM F 2208 only)

| Building Permit:                               |   |   |  |
|--|---|---|--|
| Date:  |   |   |  |
| Location:                                      |   |   |  |
| Owner / Builder:                               |   |   |  |
| Company / Busines                              | SS:   |   |  |
| to the laws, title or reg                      | by attests to the fact that the building/structure has gulation governing Building Construction, Title 19 er XXXIII, Subchapter A, Part 1220.5, Building Construction                                 | 9 NYCRR Residential Code of New Yo                                      |  |
| have been tested and the minimum of 85 dba (de | er/builder company/business hereby acknowledges hat both manual and automatic features are working lecibel) when measures 10' away from alarm med both at poolside and inside any adjacent residence. | ng properly. The alarm sound is a chanism and meets requirements of AST |  |
| Property Owner/Authoriz                        | ized Agent that installed working pool alarm.   |   |  |

## **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\*