

TOWN OF WAPPINGER



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

SITE WORK PERMIT APPLICATION

Residential Fee: \$150

Commercial Fee: \$250

This application form is to be used for the approval of site work related to:

- Subdivision Development
- Commercial Construction

A Site Work Permit entitles applicants to perform site work as per the approved site plan.

Required:

- Two copies of the site plan, including all site work details. A final certified as-built plan may be required to close the permit. Both must be stamped and signed by a NYS licensed design professional.
- Completed application and owner consent form. (attached)
- Insurance for contractors: The Town of Wappinger requires proof of Workers' Compensation (C105.2 or U-26.3) and Disability (DB120.1) 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

Building construction is not permitted until you have secured the applicable building permits.

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)

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OWNER CONSENT FORM

BUILDING PERMIT # _____ APPLICATION # _____

SITE LOCATION: _____

GRID: # _____

Name of APPLICANT: _____

(Person PHYSICALLY coming in to apply)

~ 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 the Zoning Administrator.*

I, _____, owner of the land/site/building hereby give my permission for the Town of Wappinger to approve or deny the above 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/business. If this permit is not issued a certificate before the expiration date it will remain as a violation on my property until it is closed out. After the expiration date a new application and the permit fee will have to be submitted/paid again in order to close out the permit. I understand, as the land/site/building owner, that I am ultimately responsible for the closure/completion of the work described on 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: _____