

TOWN OF WAPPINGER

**Fee:**

\$150 Application Fee (Residential)

or

\$250 Application Fee (Commercial)

PLUS

Additional square footage fees will be
calculated when plans are reviewed.

You will be notified of additional fees

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

BUILDING PERMIT APPLICATION

(RENOVATION / REPAIR OF EXISTING STRUCTURE) (INCLUDING BASEMENT AREAS)

O Commercial

O Residential

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

****Important****

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.

THE FOLLOWING WILL BE NEEDED TO PROCESS YOUR APPLICATION

1. **Two copies** of scaled drawings showing all details of construction and related footings, cross sections and floor plans. Only detailed drawings will be accepted and may be required to be submitted by a licensed design professional upon review of the Code Official. All applicable building codes must be adhered to from the N.Y.S. Residential and Building code.
 - A. Cross sections specifically drawn with materials to be used
 - B. Floor plans showing use of all rooms
 - C. Ceiling heights and projections
 - D. Window/Door clear opening sizes
 - E. Building/Structure elevations
 - F. Rafter/Joist/Header spans and sizes
 - G. Insulation values
 - H. Smoke/Carbon Monoxide Detector placement
 - I. Plumbing/Mechanical details
2. Any increase in bedrooms will require approval from the Board of Health, if septic is currently used.

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

TOWN OF WAPPINGER



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

TRUSS TYPE, PRE-ENGINEERED WOOD OR TIMBER CONSTRUCTION IN
RESIDENTIAL & COMMERCIAL STRUCTURES

FOR OFFICE USE ONLY

APPLICATION NO. _____

DATE RECEIVED: _____

Project Location:

STREET / ADDRESS _____ TOWN _____
GRID _____

OWNER INFORMATION:

NAME: _____

MAILING ADDRESS: _____

TELEPHONE # _____

E-MAIL: _____

PLEASE TAKE NOTICE THAT THE STRUCTURE IS (CHECK EACH APPLICABLE LINE):

- ☐ NEW STRUCTURE ☐ ADDITION TO EXISTING STRUCTURE
☐ EXISTING STRUCTURE ☐ REHABILITATION TO EXISTING STRUCTURE

TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE
(CHECK EACH APPLICABLE LINE): *(see back for sign designation)*

- ☐ TRUSS TYPE CONSTRUCTION (TT) ☐ PRE-ENGINEERED WOOD CONSTRUCTION (PW)
☐ TIMBER CONSTRUCTION FLOOR (TC) ☐ OTHER: _____

IN THE FOLLOWING LOCATION(S) (CHECK EACH APPLICABLE LINE): *(see back for sign designation)*

- ☐ FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS (F) ☐ ROOF FRAMING (R)
☐ FLOOR FRAMING AND ROOF FRAMING (FR) ☐ OTHER: _____

STRUCTURE CONSTRUCTION TYPE: (CHECK APPLICABLE LINE): *(see back for sign designation)*

- ☐ TYPE I NONCOMBUSTIBLE ☐ TYPE III NONCOMBUSTIBLE EXTERIOR WALLS ☐ TYPE V (COMBUSTIBLE)
☐ TYPE II NONCOMBUSTIBLE ☐ TYPE IV HEAVY TIMBER OR ANY MATERIAL PERMITTED BY CODE

OWNER OR OWNER'S REPRESENTATIVE SIGNATURE

DATE

OWNER OR OWNER'S REPRESENTATIVE PRINT

IDENTIFICATION OF BUILDINGS UTILIZING TRUSS TYPE CONSTRUCTION (check appropriate symbol)

	TYPE I NONCOMBUSTIBLE	TYPE II NONCOMBUSTIBLE	TYPE III NONCOMBUSTIBLE EXTERIOR WALLS	TYPE IV HEAVY TIMBER	TYPE V ANY MATERIAL PERMITTED BY	
Floor Construction						Floor Construction
Roof Construction						Roof Construction
Floor & Roof Construction						Floor & Roof Construction

Required Sign Location(s)

Residential Construction	Commercial Construction												
<p>Affixed to electric meter box attached to the exterior of the structure or affixed to the exterior wall of the residential structure at a point immediately adjacent to the electric box or a location likely to be seen by first responders with approval by the authority having jurisdiction.</p> <p>6" DIAMETER</p> <p>REFLECTIVE RED PANTONE #187</p> <p>REFLECTIVE WHITE</p> <p>1/2" STROKE</p> <p>The construction type designation shall be "I", "II", "III", "IV" or "V" to indicate the construction classification of the structure under section 602 of the BCNYS</p> <p>DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION</p> <table><tr><td>"F"</td><td>FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS</td></tr><tr><td>"R"</td><td>ROOF FRAMING</td></tr><tr><td>"FR"</td><td>FLOOR AND ROOF FRAMING</td></tr></table> <p>NYS BUILDING STANDARDS AND CODES</p>	"F"	FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS	"R"	ROOF FRAMING	"FR"	FLOOR AND ROOF FRAMING	<table><tr><td>Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway</td><td>Attached to the door, or attached to a sidelight or the face of the building, not more than 12 inches (305 mm) horizontally from the latch side of the door jamb, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.</td></tr><tr><td>Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway</td><td>Attached at each end of the row of doors and at a maximum horizontal distance of 12 feet (3.65M) between signs, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.</td></tr><tr><td>Fire department hose connections</td><td>Attached to the face of the building, not more than 12 inches (305 mm) horizontally from the center line of the fire department hose connection, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.</td></tr></table> <p>6" DIAMETER</p> <p>REFLECTIVE RED PANTONE (PMS) #187</p> <p>REFLECTIVE WHITE</p> <p>2" MIN.</p> <p>1/2" STROKE</p> <p>1/4"</p> <p>DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION</p> <p>ROMAN ALPHANUMERIC DESIGNATION OF CONSTRUCTION TYPE BASED ON SECTION 602 OF THE BUILDING CODE OF NEW YORK STATE</p>	Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached to the door, or attached to a sidelight or the face of the building, not more than 12 inches (305 mm) horizontally from the latch side of the door jamb, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.	Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached at each end of the row of doors and at a maximum horizontal distance of 12 feet (3.65M) between signs, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.	Fire department hose connections	Attached to the face of the building, not more than 12 inches (305 mm) horizontally from the center line of the fire department hose connection, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.
"F"	FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS												
"R"	ROOF FRAMING												
"FR"	FLOOR AND ROOF FRAMING												
Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached to the door, or attached to a sidelight or the face of the building, not more than 12 inches (305 mm) horizontally from the latch side of the door jamb, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.												
Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached at each end of the row of doors and at a maximum horizontal distance of 12 feet (3.65M) between signs, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.												
Fire department hose connections	Attached to the face of the building, not more than 12 inches (305 mm) horizontally from the center line of the fire department hose connection, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.												

BUILDING DEPARTMENT

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

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 DISAB. 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****

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



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

OWNER CONSENT FORM

BUILDING PERMIT # _____ **APPLICATION #** _____

SITE LOCATION: _____

GRID: # _____

Name of APPLICANT: _____
(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 the Zoning Administrator.

FAILURE TO COMPLY MAY RESULT IN COURT PROCEEDINGS.

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. 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.

Date

Owner's Signature

Owner's Telephone Number

Print Name

Print Owner's Address

FOR OFFICE USE ONLY

Code Enforcement Official: _____

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
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. Interim plot plan for new homes only before any framing begins must be submitted and approved.
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 CODE OFFICIAL FOR COMPLIANCE TO SUBMITTED DRAWINGS AND N.Y.S. BUILDING CODE.
14. Final inspection by Fire Inspector for approval.
15. Provide Final As-Built for Site Plan of Project.
16. Final Inspection by Zoning Administrator for compliance to site plan approval and resolution.
17. Provide ALL certificates required by Dutchess County Board of Health.

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
Inspections On Time	
Alfred Shauger/ Maria Mendez Emmanouil Zervakis	(845)233-6711