APPLICANT WORKSHEET FOR BUILDING PERMITS

This worksheet is presented as a guide for your preparation of a complete building permit application. Please be careful to include all the documents and items required for the proposed work. Incomplete applications will not be accepted.

BASIC INFORMATION:

a. Tax Map #
b. Property Location
c. Existing use of premises
d. Zoning
e. Do FEMA zoning regulations apply? (yes or no)
f. Do Coastal Zone regulations apply? (yes or no)
g. Owner(s) of record and contact information
h. Agent responsible for proposed work/construction
i. Architect contact information
j. Proposed work project details
k. Owner's authorization (if the owner is being represented by an agent, an authorization must be signed & notarized)
l. Zoning Board of Appeals Case # (if applicable)
m. Architectural Review Board Case #

NOTE: If an application is required for plan approval from the ZBA and/or ARB, the applicant is required to follow all directions, approvals, and agreements with one or both boards as applied. Any deviation(s) from approved plans will be resubmitted to applicable boards for additional approval.

APPLICATION REQUIREMENTS:

a. Building Permit Application
b. Construction plans: 2 sets for Residential and 2 sets for Commercial (1/4" scale ONLY)
c. Two CURRENT Land Surveys
   - Shall show existing and proposed work footprints and lot coverage calculations
   - Shall show data pertinent to zoning and building code regulations
d. FEMA Elevation Certificate for Flood Hazard Zones
e. Photographs of building, property, and adjacent properties (* SEE NOTE BELOW)
f. Landscape Plan as approved per the ARB (Architectural Review Board)
g. Certificate(s) of Occupancy and/or outstanding permit(s) – All issued
h. Builder/Contractor Identification and Licenses – Must be received prior to issuance of building permit
i. Certificate of Workman's Compensation – Must be received prior to issuance of a building permit
j. Certificate of Liability listing the Village of Manorhaven must be received prior to issuance of a building permit
k. Fees – to be determined on acceptance of building permit
l. Letter of Approval from the Water District
m. For Demolition Permits – please list carting company
n. Soil test borings indicating level of water at high tide
o. Signage – describe all information proposed on sign, type of sign, style of print and font size
p. Notice of utilization of Truss type construction

ADDITIONAL DOCUMENTS AND/OR APPROVALS IF APPLICABLE:

a. Any application in flood plain areas will require ARB (Architectural Review Board) approval if FILL is brought onto the project site (per Chapter 72 of the Village Code)
b. Nassau County Department of Health Services
c. Nassau County Department of Public Works
d. NYS Department of Environmental Conservation
e. Village of Manorhaven Trustees (docks, bays, lakes, waterways, etc.)
f. Fire Marshall – Business Multiple Dwellings (fuel tanks, fire alarms, fire suppression)
g. ZBA – Zoning Board of Appeals decision
h. ARB – Architectural Review Board approved site plan and approval resolution
i. Board of Trustees Special Exception Determination
BUILDING PERMIT APPLICATION CHECKLIST

Date Received: ____________________

Project Section _____ Block _____ Lot(s) _______ Application/Receipt # __________________

Zoning: ____________ Permit # ______________ Permit Fee: ____________________________

Fema: □ YES □ NO Coastal Zone: □ YES □ NO New Application: ______ Renewal: __________

OWNER INFORMATION:

Property Location: ______________________________________________________________________

Owner of Record: _______________________________________________________________________

Address ______________________________________________________________________________

City, State, Zip: _________________________________________________________________________

Home Phone: __________________ Cell Phone: ____________________ Email: ___________________

Work Phone: __________________ Fax: __________________________

AGENT INFORMATION:

Agent Responsible for Proposed Work: ______________________________________________________________________

Address ______________________________________________________________________________

City, State, Zip: _________________________________________________________________________

Home Phone: __________________ Cell Phone: ____________________ Email: ___________________

Work Phone: __________________ Fax: __________________________

ARCHITECT INFORMATION:

Plans Prepared By: _______________________________________________________________________

New York State RA/PE License #: ___________________________________________________________

Address ______________________________________________________________________________

City, State, Zip: _________________________________________________________________________

Home Phone: __________________ Cell Phone: ____________________ Email: ___________________

Work Phone: __________________ Fax: __________________________
PROPOSED WORK PROJECT DETAILS:

Electrician Business Name: _________________________ Electrician’s Name: _________________________

Village of Manorhaven Electrician’s License # __________________________

Contractor Responsible for Proposed Work: ________________________________

Nassau County Builder / Contractor License #: ________________________________

Existing Use of Premises _______________________ CO # __________ Date Issued __________

Proposed Project Description: ________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Is this project a new building: □ YES □ NO

If Yes: Square Footage Details:
1st Floor __________ 2nd Floor __________ Mezzanine __________ Basement: __________

Is this an addition, alteration or renovation? □ YES □ NO

Size of Existing Building ______________________________ Size of Proposed ______________________________

Present % of Lot ______________________________ Proposed % of Lot ______________________________

Front Setback: _________ Rear Setback _________ Right Side _________ Left Side _________

Additional Information: All measurements in square feet:

Pool _________ Deck _________ Patio _________ Fence _________ Garage _________

Shed _________ Other _________

Is this project a demolition: □ YES □ NO

Demolition of: ______________________________ Name of Carter: ______________________________

** Will any FILL be brought onto this site? □ YES □ NO

*** Will the property be regarded to change the site contours? □ YES □ NO

TOTAL ESTIMATED COST: $ ______________

Silt Fencing / Hay Bales MUST be in place PRIOR to the issuance of a permit!! NO EXCEPTIONS - INSPECTION REQUIRED!!
PARTY: NOTARY PUBLIC:

Application is hereby made for Issuance of a Building Permit pursuant to the Code of the Village of Manorhaven and the building Code of the State of the State of New York, and all amendments thereto, for the work as described herein and in the described plans and specifications.

STATE OF NEW YORK

COUNTY _______________ SS: _______________________________ being duly sworn

PRINT NAME OF PERSON SIGNING APPLICATION

Deposes and says that he/she is the applicant as named above. He/she is the ________________

OWNER OR AGENT, CONTRACTOR, OFFICER

Of said Owner or Owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of her/his knowledge and belief; and that the work will be performed in the manner set forth in this application, plans and specifications file herewith.

Sworn to, before me this _________day of _________________, 20_______

_______________________________

Applicant Signature

_______________________________

Notary Signature

STAMP WITH EXPIRATION DATE

THIS SECTION TO BE COMPLETED BY BUILDING INSPECTOR

Building Inspector Approval: _________________________________

Date of Approval: _________________________________
OWNER AUTHORIZATION

STATE OF NEW YORK  }  SS:
COUNTY OF NASSAU

I, ____________________________________________________________, residing at ____________________________________________________________,
being the owner of premises ____________________________________________________________,
also known as Nassau County Tax Map # ____________________________________________________________,
hereby authorize ____________________________________________________________,
whose mailing address is ____________________________________________________________,
to appear on my behalf before the ____________________________________________________________,
of the Village of Manorhaven, and to file any documents required with references to my application for:
_____________________________________________________________________________________

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by the Board as a condition of their approval.

_______________________________________________   ____________________________
OWNER SIGNATURE                                                                       DATE

Sworn to, before me this __________day of ____________________, 20_____

________________________________________
Notary Signature
NOTICE REGARDING EXPIRATION OF PERMITS

Permit # ________________________________
Location: ________________________________

Work detailed in permits shall commence within 6 months of issuance and shall; be completed within (1) year of issuance, or renewed prior to expiration according to the Manorhaven Code. A Certificate of Occupancy must be obtained prior to use or occupancy. This also applies to Certificates of Completion, and Certificates of Approval (Plumbing.)

**Inspections:**

The permit process includes a series of required inspections. The general contractor is responsible for making appointments for the required inspections. The applicant, the owner’s agent, and the owner, are equally responsible for obtaining the proper inspections. The **owner** is ultimately responsible for obtaining the final Certificate of Occupancy/Completion Approval prior to use or occupancy and is responsible for making appointments for inspections noted on the building permit placard.

I am the (check one) □ OWNER □ OWNER’S AGENT □ GENERAL CONTRACTOR

Name (print): ____________________________________________________________________________
Address: ________________________________________________________________________________

The approved permit and plans shall be at the premises at all times. NOTE: The owner, general contractor, architect, or agent must be present during inspections.

I have read the information above and understand it.

Signature: ________________________________

STATE OF NEW YORK
COUNTY OF NASSAU

Sworn to me this________ day of_______________ 20____
________________________________________
Signed

____________________________
Notary Public
**PERMIT TRACKING REPORT**

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<th>Project Section</th>
<th>Block</th>
<th>Lot(s)</th>
<th>Date Submitted</th>
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<th>Need Fees:</th>
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<th>Permit Description:</th>
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NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER
CONSTRUCTION IN RESIDENTIAL STRUCTURES
(In accordance with Title 19 NYCRR PART 1265)

INCORPORATED VILLAGE OF MANORHAVEN

OWNER OF PROPERTY: __________________________________________________________

SUBJECT PROPERTY (ADDRESS AND TAX MAP NUMBER):
____________________________________________________________________________
____________________________________________________________________________

PLEASE AFFIX APPROPRIATE SIGN OR SYMBOL IN ACCORDANCE WITH TITLE 19 NYCRR 1265
SECTION 382-B OF THE EXECUTIVE LAW.

PLEASE TAKE NOTICE THAT THE (CHECK ALL THAT APPLY):

☐ New Residential Structure
☐ Addition to Existing Residential Structure
☐ Rehabilitation to Existing Residential Structure

TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE
(check each applicable line):

☐ Truss Type Construction (TT)
☐ Pre-Engineered Wood Construction (PW)
☐ Timber Construction (TC)

IN THE FOLLOWING LOCATION(S) (CHECK APPLICABLE LINE):

☐ Floor Framing, Including Girders and Beams (F)
☐ Roof Framing (R)
☐ Floor Framing and Roof Framing (FR)

SIGNATURE: ___________________________________________ DATE: ______________________

PRINT NAME: ________________________________________________________________

CAPACITY (Check One): ☐ Owner ☐ Owner’s Representative
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.

DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION

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<th>Designation</th>
<th>Description</th>
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<td>&quot;F&quot;</td>
<td>FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS</td>
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<tr>
<td>&quot;R&quot;</td>
<td>ROOF FRAMING</td>
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<tr>
<td>&quot;FR&quot;</td>
<td>FLOOR AND ROOF FRAMING</td>
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