



CITY OF NEWBURGH

Department of Code Compliance

123 Grand Street, Newburgh, New York 12550

Phone: (845) 569-7400 / Fax: (845) 569-0096

BUILDING PERMIT APPLICATION

Application must be completely filled in

A plot plan showing location of lot and buildings on premises, relationship to adjoining premises or public streets or areas, the existing or proposed connections to city water and sewer mains, provisions for handling storm water run-off and giving detailed description of layout of property must be on the diagram which is a part of this application or be drawn as a separate item and submitted with this application.

NEW CONSTRUCTION, SHEDS AND FENCES MUST SUBMIT 2 COPIES OF A STAMPED SURVEY

This application must be submitted with two (2) sets of plans showing proposed construction and two (2) complete sets of specifications. New York State law, under Section 7307 of the New York State Education Law, requires that the new buildings or alterations costing \$20,000.00 or more or changes that affect the structural safety of a building must be stamped and signed by a New York State licensed professional engineer or architect. Plans and specifications shall describe the nature and scope of work to be performed, the materials and equipment to be used and details of structural, mechanical, electrical and plumbing installations.

ELECTRICAL AND PLUMBING APPLICATIONS ARE FILED SEPARATELY BY THE LICENSED CONTRACTOR

Upon approval of this application, the building inspector will issue a building permit to the applicant together with approved duplicate set of plans and specifications. Such permit and plans and specifications shall be kept on the premises available for inspection throughout the progress of the work.

No building shall be occupied or used in whole or in part for any purpose whatsoever until an application is made for and a certificate of occupancy shall have been granted by the building inspector.

APPLICATION FEES	
NEW RESIDENTIAL	\$250.00 + \$17.00 per \$1,000.00 of construction value
NEW COMMERCIAL	\$350.00 + \$17.00 per \$1,000.00 of construction value
ALTERATIONS*	\$17.00 per \$1,000.00 of construction value * \$50.00 Minimum
DEMOLITION	\$150.00 per story (Residential) \$250.00 per story (Commercial)

IN ADDITION, THE FOLLOWING REQUIRE A SEPARATE PERMIT AND FEE.			
FENCE	\$25.00	SWIMMING POOL	\$50.00
SCAFFOLD	\$50.00 per erection	TANK REMOVAL	\$25.00 per tank
SIDEWALK	\$50.00	SPRINKLER PERMIT	2% of cost work
SIGN	\$100.00		

PERMITS AND FEES NOT LISTED HERE MAY BE REQUIRED AND ARE DETAILED IN §163-1 OF THE CITY CODE

BUILDING PERMIT CHECKLIST

OWNERS NAME: _____

PROJECT ADDRESS: _____

YES	NO	*CHECK OFF WHAT IS APPLICABLE/PROVIDED*
<input type="checkbox"/>	<input type="checkbox"/>	BUILDING PERMIT APPLICATION COMPLETE WITH A CERTIFIED PLOT PLAN OR SITE PLAN <i>*INCLUDE ALL STRUCTURES, UTILITIES, AND SPECIAL HAZARDS</i>
<input type="checkbox"/>	<input type="checkbox"/>	PROPERTY LOCATED IN HISTORIC DISTRICT OR BROADWAY CORRIDOR
<input type="checkbox"/>	<input type="checkbox"/>	PROPERTY LOCATED IN FLOOD PLAIN (FLOOD INSURANCE, ELEVATION CERTIFICATION)
<input type="checkbox"/>	<input type="checkbox"/>	BUILDING PLANS SIGNED & SEALED BY A NYS LICENSED PROFESSIONAL (PE OR RA)
<input type="checkbox"/>	<input type="checkbox"/>	ENERGY CODE COMPLIANCE (RES-CHECK, COM-CHECK, MEC-CHECK, MANUAL S & J)
<input type="checkbox"/>	<input type="checkbox"/>	APPROVED BY ARC/INFORMATIONAL – DATE APPROVED: _____
<input type="checkbox"/>	<input type="checkbox"/>	APPROVED SITE PLAN OR CHANGE OF USE - DATE APPROVED: _____
<input type="checkbox"/>	<input type="checkbox"/>	ZONING BOARD/VARIANCE APPROVAL – DATE APPROVED: _____
<input type="checkbox"/>	<input type="checkbox"/>	LETTER OF APPROVAL FOR ALTERATIONS (COMMERCIAL ONLY)
<input type="checkbox"/>	<input type="checkbox"/>	NYS DEPARTMENT OF STATE SYSTEM APPROVAL LETTER (MODULAR HOME ONLY)
<input type="checkbox"/>	<input type="checkbox"/>	SIGNED & SEALED FOUNDATION PLANS (MODULAR HOME ONLY)
<input type="checkbox"/>	<input type="checkbox"/>	SPRINKLER PERMIT APPLICATION – PLANS, HYDRAULIC CALCULATIONS
<input type="checkbox"/>	<input type="checkbox"/>	DECK/PORCH/PATIO SPECIFICATIONS (IF APPLICABLE)
<input type="checkbox"/>	<input type="checkbox"/>	PROPER ZONE FOR USE (300-129) RESIDENTIAL/INSTITUTIONAL/COMMERCIAL/INDUSTRIAL
<input type="checkbox"/>	<input type="checkbox"/>	PROOF OF LIABILITY INSURANCE – LIST CITY OF NEWBURGH AS CERTIFICATE HOLDER
<input type="checkbox"/>	<input type="checkbox"/>	PROOF OF NYS WORKERS COMPENSATION INSURANCE OR WAIVER FORM – LIST CITY OF NEWBURGH AS CERTIFICATE HOLDER
<input type="checkbox"/>	<input type="checkbox"/>	PROOF OF NYS DISABILITY BENEFITS
<input type="checkbox"/>	<input type="checkbox"/>	SIDEWALK AND/OR DRIVEWAY PERMIT (CITY SCAPE STANDARDS MUST BE MET)
<input type="checkbox"/>	<input type="checkbox"/>	PROOF OF OWNERSHIP
<input type="checkbox"/>	<input type="checkbox"/>	ELECTRIC PERMIT APPLICATION ATTACHED
<input type="checkbox"/>	<input type="checkbox"/>	PLUMBING PERMIT APPLICATION ATTACHED

PROPERTY INFORMATION

Property Address: _____
City: Newburgh State: New York Zip: 12550
Section: _____ Block: _____ Lot: _____
Tax Map Designation (SBL) _____

EXISTING CONDITIONS

Residential: _____ # of Units: _____ Commercial: _____
3 or more dwelling units: _____ Mixed Use _____
Vacant Land: _____

PROPOSED CONDITIONS

Residential: _____ # of Units: _____ Commercial: _____
3 or more dwelling units: _____ Mixed Use _____

FOR COMMERCIAL AND MIXED-USE STRUCTURES ONLY

Specify the current use of the building: _____
Specify the proposed use of the building: _____

PROPOSED WORK

Number of Stories: _____ Cost of Work: _____
Square Footage: _____

-Check all that apply-

- Alteration Addition Decks/Porches Painting
- Demolition New Construction Sidewalk Other

BRIEFLY DESCRIBE WORK: _____

PROPERTY OWNER'S CONTACT INFORMATION

Owner's Name: _____

Owner's Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

APPLICANT CONTACT INFORMATION (PARTY MAKING APPLICATION ON OWNER'S BEHALF)

Applicant's Name: _____

Applicant's Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

FOR ALL STRUCTURES

Architect/ Engineer Name: _____

Architect/ Engineer Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

CONTRACTOR INFORMATION

Contractor Name: _____

Contractor Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

ELECTRICIAN'S INFORMATION

License number: _____

Electrician Name: _____

Electrician Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

PLUMBER'S INFORMATION	License number: _____
Plumber Name: _____	
Plumber Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	E-mail: _____

YOU MUST PROVIDE A COPY OF THE CONTRACTOR'S WORKER'S COMPENSATION INSURANCE CERTIFICATE

CE-200 INSURED **DB-120.1 DISABILITY** **S1-12 SELF INSURED**
HOMEOWNER ACTING AS CONTRACTOR MUST SUBMIT CERTIFICATE OF ATTESTATION OF EXEMPTION (CE-200)
ADDITIONAL INFORMATION IS AVAILABLE FROM THE WORKERS' COMPENSATION BOARD [HTTP://WWW.WCB.NY.GOV](http://www.wcb.ny.gov) OR WORKER'S COMPENSATION OFFICE
41 NORTH DIVISION ST. PEEKSKILL, NY 10566 (914) 788-5775

IF A DUMPSTER IS BEING USED, A PERMIT IS REQUIRED. CONTACT THE DEPARTMENT OF PUBLIC WORKS AT 88 PIERCE'S ROAD, NEWBURGH, N.Y. 12550 OR CALL (845) 565-3297.



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Application is hereby made to the Building Inspector of the City of Newburgh for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Construction Code for the construction of buildings, additions or alterations, or the removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations. Applicant further agrees that the City of Newburgh Building Inspector or his designee will be permitted to perform periodic inspections of this property to ensure that the work is being performed according to these codes, ordinances and regulations. It is understood by the applicant that if work is not performed according to codes, ordinances and regulations, any permit that has been issued by the Building Inspector may be withdrawn and an order to stop work will be issued.

Signature of Applicant

Name of Applicant

Date

**COMPLETE THIS SECTION ONLY IF APPLICANT
IS OTHER THAN OWNER**

_____ swears and say that he/she is the applicant signed above. He/she is the
Agent: **Corporate Officer:** **Contractor:** of said owner or owners and is duly
authorized to perform said work and to make and file this application; that all statements contained in the
application are true to the best of his/her knowledge and belief; that the work will be performed in the manner
set forth in the application and in the plans and specifications filed therewith.

Signature of Applicant: _____

Applicant Contact Number: _____

Applicant Address: _____

Subscribed and sworn to before me
on _____, 20____

(Notary Public)

**THE ABOVE STATEMENT MUST BE SIGNED AND NOTARIZED PRIOR TO SUBMITTING
APPLICATION**



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Notice of Utilization of Truss Type Construction, Pre-Engineered Wood Construction and / or Timber Construction

Per Title 19, Part 1265 of the Official Compilation of Codes, Rules and Regulations of the State of New York, Effective January 1, 2015. Please note that part of the requirement is that the structure is to be placarded with a code compliant symbol before a certificate of occupancy can be issued

To: _____

Owner Name: _____

Property Address: _____

City: Newburgh State: New York Zip: 12550

Section: _____ Block: _____ Lot: _____

Tax Map Designation (SBL)

Please take notice that the (check applicable box):

- 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 box):

- truss type construction (TT)
- pre-engineered wood construction (PW)
- timber construction (TC)

in the following location(s) (check applicable box):

- floor framing, including girders and beams (F)
- roof framing (R)
- floor framing and roof framing (FR)

Signature of Applicant

Name of Applicant

Date

Capacity: Owner
(Office Use Only)

Owner's Representative