TOWN OF PRATTSVILLE, NY. OFFICE OF CODE ENFORCEMENT Email: prattcodeofficer@gmail.com Phone 518.299.3125 EXT 4

Building Permit Application

All administr	rative information and	project description information	is required prior to processing. Fees are	
determined	afterwards; See our fee	e schedule for reference. Work	<u>c cannot begin without a permit in</u>	
		be issued without the fee paid. I ct in the application is finished.	Final Certificates of Compliance or Occupancy will	
Name of applicant(s):			Date of Application	
Phone number(s): email of applicant(s):				
Current mail	ing address of applican	t(s):		
Relation to P	Property (circle one):			
OWNER	CONTRACTOR	PROPERTY MANAGER	OTHER	
	<mark>ESTIMAT</mark>	ED COST OF PROJECT:		
Section 1	L – Work Site Administ	rative Data		
Address of worksite		,	Prattsville, NY 12468	
Tax Map Number: Property Class: 🔵 Residential 🔵 Commercial				

Section 2 - In accordance with Title 19, Chapter XXXII, Part-1203, Section 1203-3 of the NYS New York Codes, Rules and Regulations, Permits are required for all work except what's listed. https://dos.ny.gov/system/files/documents/2021/12/2021-12-10-full-text-of-rule-part-1203.pdf

➤ Building Permit expires twelve (12) months from date of issuance ➤ All applications must have TWO complete sets of plans showing proposed construction. These plans MUST INCLUDE: Description of the nature of the work Materials and equipment used and installed Structural Mechanical Electrical Plumbing *electronic plans are accepted on memory stick or CD in lieu of the paper copies.

The fee that must accompany this permit application and the provisions in the Education Law requiring drawings to bear the seal of a NYS Registered Architect or licensed Professional Engineer are both based on the proposed building size expressed in square feet. To determine square footage, use outside building dimensions and include the areas of habitable basements and all above grade floor levels except non-habitable attics. Do not include area of attached or detached garages or carports.

If the area of the new residential building is greater than 1500 sq. ft. or if the cost of the alteration or addition exceeds \$20,000.00, or if the addition or alteration will have an effect on either structural or public safety, plans submitted must bear the original seal and signature of the NYS licensed Professional Engineer or Registered Architect as provide for in Sections 7307 and 7209 of the New York State Education Law.

Name:	RA	PE
License No	Phone:	

Work coved by this application has been started or completed: O YesO No

➤ All electrical work must be performed by a NYS Licensed Electrician and inspected by a Greene County approved electrical inspector. A list of electrical inspectors is available at www.discovergreene.com or at the town hall. Keep in mind there will be at least two inspections with regards to electrical: rough-in and final. ➤ All work shall be performed in accordance with the construction documents submitted and accepted as part of this application. The Code Enforcement Office shall be notified immediately in the event of changes occurring during construction. Any deviation from the approved plans must be authorized by the approval of revised plans subject to the same procedure established for the examination of the original plans. ➤ New Construction or Additions must follow the setback rules established in the Town of Prattsville Code, Local Law NO. 3 Of 1985 Section III.

Section 3 – Contractor, Plumber, Electrician Information

*If contractor is the applicant only fill in sections not already accounted for on Page 1 of this application.

Name of Primary Contractor:	Phone Number:	
Address:	Email address:	
Name of Sub-Contractor:	Phone Number:	
Address:	Email address:	
Name of Sub-Contractor:	Phone Number:	
Address:	Email address:	
*If the Plumber of Electrician are employed	by Contractor or Sub-Contractor just write in their name/title	
Name of Plumber:	Phone Number:	
Address:	Email address:	
Name of Electrician:	Phone Number:	
Address:	Email address:	
See section 4 for insurance information requ	uirements.	
Subcontractors must also provide proof of in	nsurance, disability, and workman's compensation.	
Electricians must provide a copy of NYS Cer	tification.	
Plumbers must provide a copy of NYS Certif	ication.	
Section 4 – Insurance Information If app	licant is Owner of 1, 2, 3, or 4 Family Owner-occupied Residence:	
Is the owner performing all the work for thi	s permit application? Yes No	
Is the owner not compensating the individu	al performing the work? Yes No	
Is the owner paying individuals a total of lea	ss than 40 hours a week? Yes No	
If "YES" to one of the above questions, subn	nit Copy of homeowner's policy and Form BP-1 (12/08)	

If "NO" to all above questions, or applicant is Business or General Contractor, we require one of the following proofs of workers' compensation and disability insurance (either A, B or C):

A. Affidavit of Exemption (provide copies attached): NY State entities Form CE-200 (12/08)

B. Certificates of Workers' Compensation Insurance and Disability Benefits Insurance: Workers' Comp Form C-105.2 (09/15) OR State Insurance Fund Form U-26.3 AND (Disability) Form DB-120.1 (12/21) OR Form DB-820/829 (09/17)

C. Self-insured or participating in authorized self-insurance plan: Form SI-12 (05/09) OR Form C-105 (01/12) AND Form DB-155 (09/16

ACORD forms are NOT acceptable proof of NY State workers' compensation or disability insurance coverage!

Section 5 – Scope of Work

Nature of work: (circle one & fill out as necessary)						
➤ New Residential Structure Number of Dwellings: ➤ New Commercial Structure Occupancy Load (if Assembly Space):						
> Addition > Repair > Alteration > Relocation						
➤ All Other New Structures (decks, pools, detached garages, sheds, etc.) Description	➤ All Other New Structures (decks, pools, detached garages, sheds, etc.) Description					
Dimensions						
Change of Occupancy Class from: Change of Occupancy Class to:						
If a new residential structure, a residential alteration, or addition, specify the total numbers in the struct	ure:					
Total Number of Dwelling Units: Number of Kitchens:Number of Bedrooms:						
Number of Bathrooms:						
Dimensions of New Construction: Front: Rear:Depth: Height: No of Stories:						
Sewage Supply New Septic Existing Municipal						
If applicable, attached DEP approval may be required before Building Permit is issued.						
Water Supply: O New well O Existing well O Municipal Water Supply						
Flood Plain Information:						
The site \bigcirc is or \bigcirc is not within a flood plain Elevation The site \bigcirc is or \bigcirc is not in a designated wetland.						
Heating Systems: (Check all that apply) O Electric Oil Gas Warm Air Baseboard Separate Air Conditioning Owned Wood with alternative backup						

Indicate with sufficient clarity and detail the nature and extent of the work proposed. Furnish plans, material lists, and any other documentation to substantiate that the proposed work will comply with the Uniform Code and the State Energy Conservation Construction Code. Include (new) heating systems and source of fuel.

This application is hereby made to the Code Enforcement Office for the issuance of a Building Permit pursuant to the				
Current New York State Uniform Code and New York State Energy Conservation Code for the construction of buildings,				
additions or alterations, or the installation of swimming pools or other structures and/or equipment as herein				
described. The applicant has read the requirements prescribed herein and agrees to comply with all applicable laws,				
ordinances, and regulations. The applicant understands section 175.30 of the NYS Penal Law and attests that the				
information provided herein is true and accurate.				
Signature of Applicant(s):				
Action of Planning Board: [] Approve [] Disapprove				
Chairman:	Date:			
Action of Code Enforcement Officer: [] Approve [] Disapprove				
Code Enforcement Officer:	Date:			
Building Permit Number: Ca	lculated Fee Amount:			
Fee paid; CASH CHECK #				