

**BUILDING DEPARTMENT
INCORPORATED VILLAGE OF NISSEQUOGUE
ST. JAMES, SUFFOLK COUNTY, NEW YORK 11780**

PERMIT APPLICATION

Section Block Lot

Map of

Square feet "ground floor"

Square feet "additional" stories"

Square feet "private garage"

(For Building Department Use Only)		Date
Application No.
Permit Issued
Permit Expires
Zoning District
Architectural
Review Board
Plan Board
LWRP-Casual Mgt.
Zoning Board of Appeal
Fee Paid
Foundation Insp.
<small>(Note Verification Survey Required)</small>		
Framing Insp.
Plumbing Insp.
N.Y.S. Energy Code Insp.
Suffolk County Board of Health Certification #
Electrical Insp. Certificate #
Certificate of Occupancy #

A PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

This Application is to be submitted in Quadruplicate. Answer All Of the Following.
The undersigned hereby applies for a permit to do the following work which will be done in accordance with the description, plans, building and zoning specifications submitted, and such special conditions as may be indicated on the permit.

Owner of Property: _____ (Tel. No.)

(Name) (Tel. No.)

(Address)

DATE LOT WAS OFFICIALLY FORMED

DATE LOT WAS ACQUIRED BY OWNER

FROM WHOM ACQUIRED (IF NOT IN FILED SUBDIVISION)

The person responsible for the supervision of the work insofar as the Building Code and the Village Zoning Ordinance apply is:

(Name) (Tel. No.)

(Address)

Name of Architect Address

Name of Builder Address

Name of Plumber Address

Name of Mason Address

LOCATION OF WORK

If on Corner, which corner, northeast , northwest , southeast , southwest

Site located on Village Road , Private Road

(Designate by marking with an "X" in the correct space)

- | NATURE OF PROPOSED WORK | TYPE OF OCCUPANCY | ESTIMATED COST OF CONSTRUCTION |
|---|---|--|
| <input type="checkbox"/> Construction of a new building | <input type="checkbox"/> Installation of swimming pool | <input type="checkbox"/> One-Family Dwelling |
| <input type="checkbox"/> Addition to a building | <input type="checkbox"/> Installation of wall or fencing | <input type="checkbox"/> Attached garage |
| <input type="checkbox"/> Alteration to a building | <input type="checkbox"/> Installation of tennis court | <input type="checkbox"/> Accessory building |
| <input type="checkbox"/> Demolition of a building | <input type="checkbox"/> Installation of dock or bulkheading | <input type="checkbox"/> Other |
| <input type="checkbox"/> Moving of a building | <input type="checkbox"/> Installation of retaining wall | \$ |
| <input type="checkbox"/> Installation of plumbing | <input type="checkbox"/> Changes to existing | |
| | <input type="checkbox"/> Other Work grades, affecting drainage from site. | |

ZONING SPECIFICATIONS: Fill in for new building, or addition to existing building, or a change of occupancy.
Indicate on the plot plan street names, the location and size of the property, the location, size and set-backs of proposed buildings, and the location of all existing buildings. Show proposed building(s) in dotted line and existing building(s) in solid line.

Size of property ft. x ft.

Size and use of existing buildings, if any ft. x ft.

Size of Proposed building ft. x ft.

Height (from grade to ridge) ft.

Front yard ft.

Side yard ft. and ft.

Rear yard ft.

If on corner, setback from side street ft.

Note: All distances are net, as measured from property line to nearest part of building.
Note: Applicant represents that he is not seeking a building permit on property which has been so subdivided as to create a remaining parcel which is undersized or is in any other way violative to the current Zoning Ordinance of the Village of Nissequogue.

Survey Certifying Site Location by (Name of Licensed Surveyor _____)
Workmens Compensation Insurance _____

Pursuant to Section 57 of the Workmens Compensation Law a Certificate of Insurance on the Standard Form Approved by the Industrial Commissioner must be filed with this application covering all operations in connection therewith. If not filed with this application, a certificate will be furnished by _____ Policy No. _____ Surety _____
Exp. Date _____

Will Fireplace be installed – YES NO
Will plumbing be installed – YES NO
Type of Air conditioning to be installed
Size and where located
Location of and size of fuel tank
Size of heating unit output B.T.U. Hz Phase Amperage
Electrical service, voltage Hz Phase Amperage
Other information pertinent to obtaining building permit –

NO OCCUPANCY PERMITTED PRIOR TO THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY

Information pertinent to obtaining certificate of occupancy

- a) Final inspection, Building Department approval
- b) Submit a copy of survey indicating compliance with minimum zoning set back requirements.
- c) Sunber County Board of Health certificate on water supply and sewage disposal.
- d) Submit fire insurance underwriters certificate, covering all electrical installations.
- e) Submit boiler certificate.
- f) Village approval of drainage
- g) Architects, P.E., or qualified Construction Supervisor's letter that the structure has been erected in accordance with the approved Plans.

Special Conditions of the Permit:

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.....
.....
By

State of New York } **AFFIDAVIT**
County of Suffolk } (Designate Capacity of Affiant)
Village of Nissequogue }

The undersigned (Owner, Owner's Agent, Architect, Contractor) being duly sworn, says that the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the applicable **ZONING ORDINANCE, BUILDING ADMINISTRATIVE ORDINANCE, BUILDING CONSTRUCTION CODE**, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Sworn to before me this day of 20.....
Signature
Owner, Owner's Agent, Architect, Contractor

Notary Public
.....
Notary Public
AFFIDAVIT
State of New York }
County of Suffolk } SS.
Village of Nissequogue }

I, Owner of the premises located
.....
Being duly sworn depose and say:

That the premise described herein will only be used as a one family dwelling, or other () in accordance with the current Zoning Ordinance of the Incorporated Village of Nissequogue.

Sworn to before me this day of 20.....
Signature

Notary Public
.....
Notary Public
BUILDING PERMIT

Fee Paid \$ No.....

Permission is hereby granted for the (building) (alteration) described on the above application.
This permission covers only the work described in the above application and no changes shall be made in any of the dimensions as shown above unless an amendment to the application is filed and a new permit obtained.
This permit will expire unless work is commenced within 13 months from the date hereof, and completed within 18 months.

Dated: 20
NOTE: Fee of per sq. ft. based on sq. ft. of livable area, as computed by Building Department at the time Building Department
building permit is issued. Incorporated Village of Nissequogue
By