



Incorporated Village of Nissequogue Building Department

631 Moriches Road
St. James, N.Y 11780
Tel.: 631-862-9494
Fax: 631-862-7401

APPLICATION FOR PERMIT TO BUILD OR INSTALL

Submit in duplicate. Each application must be typewritten or printed. Incomplete or illegible applications will not be accepted. APPLICATION is hereby made for a permit to do the following work, which will be done in accordance with the description, survey and plans submitted pursuant to Section 57 of the Workmen's Compensation Law, Zoning Ordinance, Building Code and all other applicable ordinances and laws.

A PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

(Type or print)

Property located at No. _____ Street _____ Distance _____

Village _____ State of New York Map of _____

Suffolk County Tax Map# 802 - _____ - _____ - _____ Zoning District _____

Owner of record on tax rolls _____

Mailing Address _____ Tel. _____

Architect or Engineer _____ Address _____

City _____ State _____ Zip _____ Tel. _____ E-Mail _____

Contractor / Builder _____ Address _____

Tel. _____ Mobile _____ Fax _____ E-Mail _____

Plumber _____ Address _____

Tel. _____ Mobile _____ Fax _____ E-Mail _____

Electrician _____ Address _____

Tel. _____ Mobile _____ Fax _____ E-Mail _____

DESCRIPTION OF WORK _____

COMPLETE ALL THAT APPLIES TO THIS APPLICATION

NEW CONSTRUCTION / ADDITIONS

Basement _____ sq. ft.

Finished Basement Unfinished Basement

1st Floor Area _____ sq. ft.

2nd Floor Area _____ sq. ft.

Attic Space (6' 8" & over) _____ sq. ft.

Garage Area _____ proposed sq. ft.

Front Entry Side Entry

Pool _____ Fence _____

Outside Basement Entrance _____

Fireplace(s) _____ Type _____

Porch/Portico _____ sq. ft.

Deck/Balcony _____ sq. ft. _____ Height ft.

Shed/Accessory _____ sq. ft. _____ Height ft.

Carport _____ sq. ft. Misc. _____ sq. ft.

Demolition of _____ Total sq. ft. _____

INTERIOR ALTERATIONS

Basement _____ sq. ft. 1st Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft.

Garage/Porch/Sunroom converted to living space _____ sq. ft. Other _____ sq. ft.

(Please circle one)

FIXTURES IN **Bsmt.** **1st Floor** **2nd Floor** **3rd Floor**

Sinks				
Bath Tubs				
Showers				
Toilets				
Dishwasher				
Refrigerator				
Laundry Tub				
Washer				

List Number of Fixtures to left and show diagram on plans.

APPLICATION IS FOR A PERMIT TO DO AS FOLLOWS:

TOTAL No. of Fixtures _____

Central Air Conditioning _____ HVAC units _____

Electric _____ Gas Fired _____

Total no. of Units _____

Pressure (gas) test(s) _____

Specify Appliance(s) _____

HEATING & COOLING

Application is for a permit to install the following heating equipment to be used to heat space, area, processing, domestic hot water, including fuel oil storage tanks.

New Conversion Replacement Installation to be: Oil Gas Electric Tank Only

Tank installation only, is burner installed? YES NO Replacement? YES NO

Inside Tank Capacity _____ Gallons Type of tank _____

Outside Tank Capacity _____ Gallons

PERMITS EXPIRE AFTER ONE YEAR AND MAY BE RENEWED ONE TIME ONLY

AFFIDAVIT

I, _____, being the _____,
OWNER (Commercial may be Owner's Agent, Architect or Contractor)

swear that to the best of my knowledge and belief, 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 as has been approved by the Village of Nissequogue and that all provisions of the Zoning and Building Ordinance and the State Building Code and all other laws pertaining to the proposed work shall be complied with, whether specific or not, and that such work is authorized by the owner.

Signature _____
OWNER (Commercial may be signed by Owner's Agent, Architect or Contractor)

Sworn to before me this:

_____ day of _____ 20 _____

(Signature of Notary Public)

Notary Stamp