

Village of Airmont

BUILDING AND ZONING DEPARTMENT

251 CHERRY LANE, AIRMONT, NEW YORK

Mailing Address: P.O. BOX 578, TALLMAN, NEW YORK 10982

Telephone: 845-369-8813

Fax: 845-357-8307

Website: www.airmont.org

APPLICATION FOR BUILDING PERMIT INSTRUCTIONS

Please be advised it is the home owners' responsibility to call for all required inspections.

Submit: 1 application forms completed, signed and a contact phone number.

Submit: 1 Plumber/HVAC certificate signed by a licensed contractor (for projects requiring plumbing or heating/AC work). Submittal of the plumbers photo License and certificate of insurance is required.

Submit: If project is for residential work, provide a copy of contractors *Rockland County Home Improvement License*. If the work is to be done by homeowner, sign and notarize the form indicating the work will be done by the homeowner and submit the *NY State Workers Compensation form BP-1* filled out, signed and notarized.

Submit: Residential and Commercial Contractors and all sub-contractors shall provide *all Licenses and Certificates of insurance indicating coverage for Workers Compensation, Disability and Liability Insurance*.

Submit: 2 Sets of building plans. If cost is over \$20,000.00, the plans must be signed and sealed by a New York State licensed Architect or Engineer. Some projects regardless of cost may require an Architect or Engineer seal at discretion of Building Inspector at the time of review. *Before final inspection the Licensed Professional shall provide affidavit stating structure has been erected in accordance with the approved plans as per Section 210-149 of the Village of Airmont Code.*

Submit: 2 Plot Plans (survey) indicating the location and size of proposed work to be performed and all existing buildings and structures on the property. *Copies of surveys bearing the signature or seal of a licensed engineer may not be altered and will not be accepted.*

Submit: Proof of 811 markout where digging/ excavating is required.

PLEASE NOTE: Escrow agreements are **required for landscaping, final grading and property restoration** on projects with any land disturbance.

FEE: Fee is based on the value of construction and must be submitted at time of application. This office reserves the right to adjust any fee prior to the issuance of a permit or Certificate of Occupancy if it is determined that the original fee was not sufficient.

RE-INSPECTION FEES: According to the Village of Airmont Code, Section 106.6H4, Re-inspection fees: For re-inspection required after construction has been disapproved or requested by contractor:

- a. Residential: **\$100.00** for the first re-inspection and **\$150.00** for each subsequent re-inspection.
- b. Non-residential: **\$100.00** for the first re-inspection and **\$150.00** for each subsequent re-inspection.

***BUILDING PERMIT APPLICATIONS WILL NOT BE ACCEPTED WITH
FORMS INCOMPLETE OR PROMISED TO BE DELIVERED AT A LATER DATE.***

Village of Airmont
Building Department
251 Cherry Lane, Airmont, New York
Mailing Address: P.O. Box 578, Tallman, N.Y. 10982
Phone: (845) 369-8813 Fax: (845) 357-8307

Louis M Zummo
Building Inspector

Dear Owner,

A Certificate of Occupancy must be issued for the work covered by this Building Permit. **All required inspections must be made** in order for this Certificate of Occupancy to be issued, and it is **your responsibility** to make sure that such inspections are made, including electrical inspections (if applicable) by the New York State Board of Fire Underwriters.

We have experienced many problems with Building Permits having expired, contractors paid and gone, work completed, but no Certificate of Occupancy issued. A lack of Certificate of Occupancy constitutes a violation and will cause serious problems when you decide to sell or refinance your home.

This Building Permit is good for **ONE YEAR** from the date it is issued. Please make sure that a Certificate of Occupancy is issued before you use the area covered by this permit. Failure to do so may result in the imposition of daily or weekly fines.

The **owner must call** for all required inspections as well as for the final inspection when the project is complete.

Please sign this form as an acknowledgement that you have read and understand the above.

Owner's Signature _____

Print Name _____

Address _____

Date _____

BUILDING DEPARTMENT

REQUIRED INSPECTIONS OF CONSTRUCTION...

YOU MUST CALL FOR THESE

Other inspections will be made in most cases, but those below must be made or Certificate of Occupancy will be withheld. Unless a card is left on the job indicating approval of one of these inspections, it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected after correction. Call ahead for all inspections.

1.FOOTING FORMS

when excavation is complete and forms are in place (*before pouring*). Rebar in place, hooked at all corners.

2.FOUNDATION

check here for waterproofing, type of block, footing drains, insulation as needed.

3. PLUMBING UNDER

SLAB cast iron, copper, etc

4. GRAVEL UNDER SLAB

(*usually combined with No. 3*) check for insulation as per Energy Code.

5. PLUMBING ROUGH-IN

All work that will be covered must be installed at this time.

6.FRAME

Call when the frame is complete including fire stop, bridging, collar ties, etc., before it is covered from inside with insulation.

7.INSULATION

Tabs to be stapled on outer part of stud to form vapor barrier.

8.PLUMBING FINAL

This can be combined with final. All fixtures to be installed.

9. IN GARAGE WHERE APPROPRIATE Fire

rated sheet rock to be inspected before painting

10. ROUGH GRADING

All surface water should be directed away from the dwelling to an approved outlet... street, lawn, inlet, drainage, swale, etc.

This can be combined with final.

11. OUTLET FOR FOOTING DRAINS, IF

UNDERGROUND This could be combined with final.

12. FINAL

Complete application for Certificate of Occupancy. Produce certified plot plan and exhibit Fire Underwriters Laboratory Certificate. Building must be essentially completed with all utilities working.

NOTE: sewage disposal systems must be completely checked before, during and after construction. If in any doubt, contact this office. For public sewer connection, produce written approval by the Village of Airmont. For septic systems, produce certificate of approval from Rockland County Health Department.

SIGNATURE

Village of Airmont Mandatory Inspection Sheet

ADDRESS: _____

TAX LOT _____ **PERMIT #** _____

POOL SITE _____

FOOTING FORM & TRENCHES _____

FOUNDATION & BACKFILL _____

FOOTING DRAINS _____

OUTLET FOR FOOTING DRAINS _____

FRAMING _____

GRAVEL UNDER SLBS & V.M.W _____

PLUMBING UNDER SLABS & C.I. _____

PLUMBING ROUGH-IN _____

PLUMBING FINAL _____

ROUGH GRADING _____

INSULATION _____

FINAL FOR CERTIFICATE OF OCCUPANCY _____

ELECTRICAL UNDERWRITERS _____

Signature Required: _____

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APPLICATION FOR BUILDING PERMIT

An incomplete application will **NOT** be accepted. Please enter N/A if a section is not applicable.

PROJECT LOCATION & INFORMATION

NUMBER & STREET ADDRESS

TAX MAP #

ZONE

CURRENT USE OF PROPERTY/BUILDING

PROPOSED USE OF PROPERTY/BUILDING

1. OWNER IDENTIFICATION

OWNER'S NAME

OWNER'S STREET

CITY

STATE

ZIP

PHONE

CELL

2. TYPE OF CONSTRUCTION OR IMPROVEMENT

New Building (*Proposed use is*) _____

Conversion (*Current use*) _____ (*Proposed use*) _____

Addition

Alteration

Repair/Replacement

Relocation

Demolition

Misc. Structure or Equipment

Above Ground Pool In Ground Pool (*Contact Building Dept. for additional pool requirements*)

4. DESCRIPTION OF PROJECT _____

5. ESTIMATED VALUE OF CONSTRUCTION _____

DESIGNERS & CONTRACTORS PLEASE ATTACH ALL LICENSES AND CERTIFICATES OF INSURANCE

1. ARCHITECT OR ENGINEER INFORMATION

NAME			
STREET	CITY	STATE	ZIP
PHONE		LICENSE #	

2. GENERAL CONTRACTOR INFORMATION

NAME			
STREET	CITY	STATE	ZIP
PHONE		LICENSE #	

3. ELECTRICAL CONTRACTOR INFORMATION

NAME			
STREET	CITY	STATE	ZIP
PHONE		LICENSE #	

PLEASE ATTACH A SKETCH OR PLOT PLAN OF PROJECT LOCATION & DETAILS

Two copies of the plot plan or sketch must be made as part of this application and must include the following information:

1. Location of proposed structure or addition showing the number of stories and all exterior dimensions.
2. The distance of the proposal from all lot lines.
3. The distance of the proposal from any structure including neighboring structures.
4. The depth of the proposed foundation or footers.
5. The maximum percentage of the lot to be covered by the building.

6. Addition will be used as: Family Room Living Room Kitchen Den Bedroom

Bathroom Other (*explain*) _____

7. Basement: Full Partial Crawl Pier Slab

8. Garage: Attached Detached

9. Deck/Porch: Open Covered Enclosed Screened

Other (*explain*) _____

AFFIDAVIT OF OWNERSHIP

State of New York
SS: County of Rockland

_____ being duly sworn,
deposes and says that he/she resides _____
at _____ in _____

County of _____ State of _____ that he/she is
the owner in fee of all that certain lot, piece or parcel of land situated, lying and being in the Village of Airmont
Tax Map and that hereby authorize on his/her behalf the filing of an application for a Building Permit and/or
Certificate of Occupancy, and that the statements of fact contained in said application are true.

OWNER

STREET CITY STATE ZIP

Sworn to before me this _____ day of _____, 20_____

NOTARY PUBLIC



Zone _____ Value of Construction \$
Permit Number _____ Bldg. Permit Fee \$
Date Issued _____ C.O. Fee \$
C.O. _____ Total \$

Permit Granted for, _____

DATE BUILDING INSPECTOR

Variance Received Yes No Variance #

TO BE COMPLETED BY THE PLUMBER CONTRACTOR

Date Submitted

OWNER OF PROPERTY

Work to be done at:

STREET CITY STATE ZIP

Plumbing Contractor Information

PLUMBING CONTRACTOR

STREET CITY STATE ZIP

PHONE LICENSE #

BUILDING PERMIT #

FIXTURES TO BE INSTALLED

Bath Tub(s)

Urinal(s)

Lavatory(s)

Shower(s)

Water Closet(s)

Kitchen Sink(s)

Laundry Tub(s)

TOTAL NUMBER OF FIXTURES

Check all that apply:

New Building

Alteration

Addition

Repair

PLUMBER'S SIGNATURE

**SUBMIT DIAGRAM & INFORMATION PERTINENT TO WORK PROPOSED.
CONTRACTOR MUST CALL FOR REQUIRED INSPECTIONS**