



# APPLICATION FOR BUILDING PERMIT

Village of New Paltz  
25 Plattekill Ave. New Paltz, NY 12561  
Ph. (845) 255-3055 Fax. (845) 255-5103

Date: \_\_\_\_\_  
Permit No: \_\_\_\_\_  
Permit Fee: \_\_\_\_\_  
Total: \_\_\_\_\_

Location of Premises: \_\_\_\_\_

Zone: \_\_\_\_\_ SBL: \_\_\_\_\_ Est. Cost of Construction: \$ \_\_\_\_\_

Owner: \_\_\_\_\_ Contractor: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

**For Renovations/Alterations/Repairs**

Bldg Type: Residential  Commercial  Other

Type of Work to be performed:  
(Check all that apply):

- Renovation      - Repair

- Alterations Lvl 1    - Alterations Lvl 2

- Alterations Lvl 3    - Addition

- Historic Bldg      - Relocated Bldg

- Change of Occupancy   - Demolition

- Tank Abandonment/Removal

- Fence                      - Electrical Upgrade

- Solar                      - Roof

- Other

**For New Construction**

Bldg Type: Residential  Commercial  Other

Bldg Dimension: Width: \_\_\_\_\_ Depth: \_\_\_\_\_

Height: \_\_\_\_\_ Bldg Gross (sqft): \_\_\_\_\_

Stories: \_\_\_\_\_ Bldg Footprint(sqft): \_\_\_\_\_

Bedrooms: \_\_\_\_\_ Bathrooms: \_\_\_\_\_ # Rooms: \_\_\_\_\_

Please complete below if applicable:

Planning Board File #: \_\_\_\_\_

Resolution Date: \_\_\_\_\_

Zoning Board File #: \_\_\_\_\_

Resolution Date: \_\_\_\_\_

Please provide a detailed description of the work to be performed (Include general dimensions if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The following documents and attachments must accompany this application.**

- Plot Diagram – Clearly locate all buildings, whether existing or proposed, and indicate all setback dimensions from property lines. Show street names and indicate whether interior or corner lot. A survey can be used to satisfy this requirement.
- Two (2) complete sets of plans and specifications. Plans shall be stamped by a licensed Architect or Engineer if the cost of construction exceeds \$20,000.00 or is deemed necessary by the Code Enforcement Official or their designee.

- Contractor’s proof of disability and workers compensation insurance. See attached for acceptable forms. “Village of New Paltz” must be certificate holder. “Acord” forms for liability insurance are not acceptable.
- Notarized Letter of Agent – If the applicant is not the owner of the property. See attached form.
- Application fee – Checks must be made out to “Village of New Paltz”
- Street opening permit from Department of Public works, if applicable
- For all permits requiring demolition: Asbestos survey and removal certification, Pest inspection certification.

Upon approval of the application, the Code Enforcement Official or their designee will issue a Building Permit, with an “approved” stamped set of complete plans and specifications. Such permit, approved plans and specifications shall be kept on the premises available for inspection throughout the progress of work.

Please allow two weeks for residential permit applications and four weeks for commercial permit applications to be reviewed.

**NO WORK IS TO BE COMMENCED BEFORE THE ISSUANCE OF A BUILDING PERMIT**

No building shall be occupied or used in whole or in part for any purpose, until a Certificate of Occupancy is granted by the Code Enforcement Official or their designee.

Any changes to the plans for construction and any field changes must be submitted for approval prior to the work being commenced.

**All sections must be completed. If not applicable, indicate with N/A.**

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Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to Chapter 86 of the Code of the Village of New Paltz and the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions, alterations, removals, or demolitions as hereby described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by \_\_\_\_\_ Date: \_\_\_\_\_

***IMPORTANT:*** Work shall remain accessible and exposed until inspected and accepted by the Code Enforcement Official or by an inspector authorized by the Code Enforcement Official. The permit holder shall notify the Code Enforcement Official when any element of work described in the permit is ready for inspection.



# Village of New Paltz

**Building Department**  
25 Plattekill Avenue, New Paltz, NY 12516  
[building@villageofnewpaltz.org](mailto:building@villageofnewpaltz.org)  
Office: 845-255-3055 FAX: 845-255-5103

## General Permit Application Checklist

Please return this with your application.

When receiving a permit application we check for all of the following details:

- Payment for the fee is able to be submitted with the application.
- The applicant is either the owner or has an appropriate proxy statement from the owner.
- All relevant parts of the application form are completed.
- Proof of either Worker's Compensation and Disability Insurances or Exemption(s)
  - Must specifically list the Village of New Paltz as a certificate holder
  - Legal entity name and address match general contractor's name and address listed on the permit application.
  - Insurance exemption form(s) is/are signed and dated.
  - For CE-200, specific job address must match address on the permit application.
- A map of the land parcel which shows where the proposed work would be done and:
  - existing structures & utilities both above ground & under when appropriate
- Two sets of construction documents, (such as detailed drawings), have been provided.
- Proof of energy code compliance has been submitted, (such as ResCheck or ComCheck reports). (This is only required for new habitable buildings or additions.)
- If either a new water and/or sewer connection(s) is needed or the proposal would modify the use for an existing sewer, then a permit from the DPW must be provided. The Ulster County Dept. of Health would provide that permit for on-site septic systems.
- A copy of the permit for a new roadway entrance has been provided, (when appropriate).
- Current known violation(s) and/or complaint(s) associated with the property is/are noted.
- A preliminary site inspection has been scheduled.

NOTE: Missing details may cause an application to be rejected as incomplete. A review of the details provided may cause an application for a permit to be denied. Please, we do not hold components of incomplete applications.

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**Do not begin work until you have received an actual permit.**



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Office: 845-255-3055 FAX: 845-255-5103

## Construction Documents

Please return this with your application.

Make sure at least two copies of construction documents are provided which:

- Adequately define the scope of the proposed work;
- Have an original stamp and signature by an architect or professional engineer who is licensed by New York State;
  - That includes all plans involving changes affecting either any building's structural safety or its public safety.
  - That also includes any alterations costing more than \$20,000.
  - Except...
    - One or two family homes with a combined habitable area of less than 1500 square feet;
    - Farm buildings used directly and solely for agricultural purposes;
- Indicate with sufficient clarity and detail the nature and extent of the work proposed;
- Substantiate that the proposed work will comply with the Uniform Code and the Energy Code
- Where applicable, include a site plan that shows any existing and proposed structures on the site with their closest distances to the lot lines, the location of any existing or proposed water supply line, sewer connection, well, septic system, power lines, and the location of the intended work.

Construction documents for a permit application will cause a permit to be denied unless they satisfy at least the requirements listed above.

One set of construction documents shall be retained by the building department, and a matching set of construction documents marked as approved by the building department shall be returned to the applicant. Keep the construction documents marked as approved at the work site for use by Code Enforcement personnel during inspections.

Note: The return of a set of construction documents marked as approved by the building department shall not be construed as authorization to commence work, nor does it indicate that a building permit will be issued.

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**Do not begin work until you have received an actual permit.**

## **Workers' Compensation Requirements under Workers' Compensation Law §57**

To comply with coverage provisions of the Workers' Compensation Law (WCL), businesses must:

- a) be legally exempt from obtaining workers' compensation insurance coverage; or
- b) obtain such coverage from insurance carriers; or
- c) be a Board-approved self-insured employer; or
- d) participate in an authorized group self-insurance plan.

To assist State and municipal entities in enforcing WCL Section 57, businesses requesting permits or seeking to enter into contracts **MUST provide ONE** of the following forms to the government entity issuing the permit or entering into a contract:

A) Form [CE-200](#), *Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage*;

Form CE-200 can be filled out electronically on the Board's website, [www.wcb.state.ny.us](http://www.wcb.state.ny.us). Click on the last button in the lower right hand corner {WC/DB Exemptions Form CE-200 (In bright yellow letters)} Applicants filing electronically are able to print a finished Form CE-200 immediately upon completion of the electronic application. Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the Customer Service Center at any district office of the Workers' Compensation Board. Applicants using the manual process may wait up to four weeks before receiving a CE-200. Once the applicant receives the CE-200, the applicant can then submit that CE-200 to the government agency from which he/she is getting the permit, license or contract; or

B) Form [C-105.2](#), *Certificate of Workers' Compensation Insurance* (the business's insurance carrier will send this form to the government entity upon request). **Please Note:** The State Insurance Fund provides its own version of this form, the U-26.3; or

C) Form [SI-12](#), *Certificate of Workers' Compensation Self-Insurance* (the business calls the Board's Self-Insurance Office at 518-402-0247), or [GSI-105.2](#), *Certificate of Participation in Worker's Compensation Group Self-Insurance* (the business's Group Self-Insurance Administrator will send this form to the government entity upon request).

## **Disability Benefits Requirements under Workers' Compensation Law §220(8)**

To comply with coverage provisions of the WCL regarding disability benefits, businesses may:

- a) be legally exempt from obtaining disability benefits insurance coverage; or
- b) obtain such coverage from insurance carriers; or
- c) be a Board-approved self-insured employer.

Accordingly, to assist State and municipal entities in enforcing WCL Section 220(8), businesses requesting permits or seeking to enter into contracts **must** provide one of the following forms to the entity issuing the permit or entering into a contract:

A) [CE-200](#), *Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage* (see above);

B) [DB-120.1](#), *Certificate of Disability Benefits Insurance* (the business's insurance carrier will send this form to the government entity upon request); **or**

C) [DB-155](#), *Certificate of Disability Benefits Self-Insurance* (the business calls the Board's Self-Insurance Office at 518-402-0247).

**NYS Agencies Acceptable Proof:** Letter from the NYS Department of Civil Service indicating the applicant is a New York State government agency covered for workers' compensation under Section 88-c of the Workers' Compensation Law and exempt from NYS disability benefits.

Please note that **for building permits only**, certain homeowners of 1, 2, 3 or 4 family owner-occupied residences serving as their own General Contractor may be eligible to file Form [BP-1](#) (The homeowner obtains this form from either the Building Department or on the Board's website, <http://www.wcb.state.ny.us/content/main/forms/bp-1.pdf>)

# VILLAGE OF NEW PALTZ - EXAMPLE OF PLOT/SITE PLAN

An up to date survey is acceptable



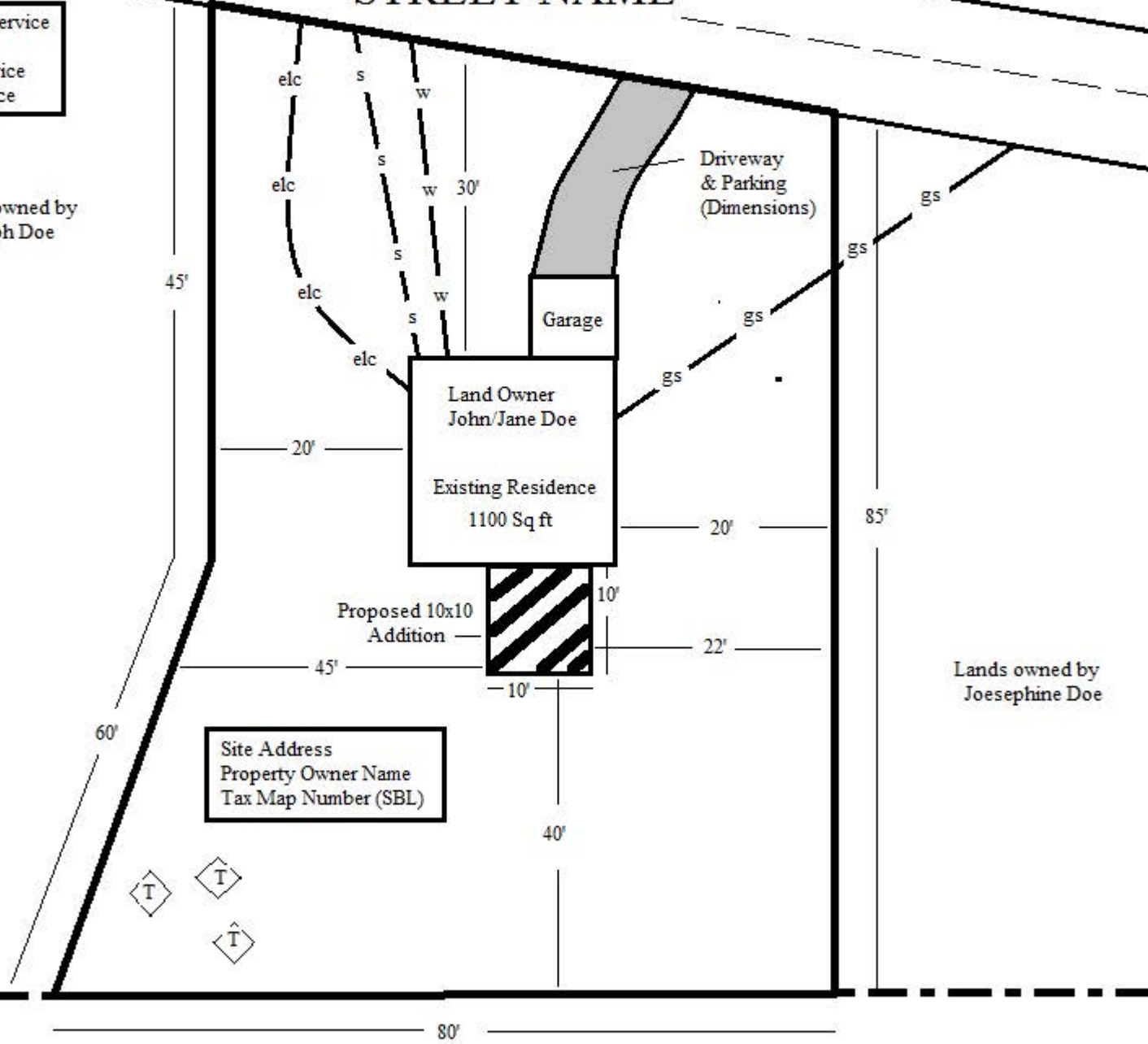
\*Note: This is an example of the minimum work required. For larger and/or more indepth projects consider hiring a professional consultant to expedite the review process.

\*\* Note: Be prepared to hire a professional consultant if required by the planning, zoning, building departments.

elc - electric service  
s - sewer  
w - water service  
gs - gas service

## STREET NAME

Lands owned by  
Joeseeph Doe



If there are any questions regarding site plan layout, please contact the Building Department to speak with an inspector. (845) 255-3055 during working hours, Monday - Friday 9am to 4pm

Provide as much information as possible. The more descriptive the rendering the easier it will be to make determinations.



## OWNERS AUTHORIZATION LETTER

Village of New Paltz  
25 Plattekill Ave. New Paltz, NY 12561  
Ph. (845) 255-3055 Fax. (845) 255-5103

I \_\_\_\_\_, affirm that I am the property owner  
(OWNER)

at \_\_\_\_\_ in the County of \_\_\_\_\_  
(OWNER'S ADDRESS)

and State of \_\_\_\_\_, Designation number (Sec. \_\_\_\_\_ Block \_\_\_\_\_

Lot \_\_\_\_\_) which is the property described in the foregoing application and that I designate:

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(AGENT'S NAME AND ADDRESS)

as my agent to make the attached application.

**THIS DESIGNATION SHALL BE EFFECTIVE UNTIL WITHDRAWN BY THE OWNER OR UNTIL TWO (2) YEARS FROM THE DATE AGREED TO, WHICH EVER IS SOONER.**

This will allow my agent to answer any and all questions on my behalf and to sign any and all documents for me; however, I accept full responsibility to ensure that my project meets all zoning and building code compliance.

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(Owner's Signature) (Date)

Signature of Notary Public: