

**AS PER THE  
BUILDING  
INSPECTOR:**

**ALL ITEMS REQUIRED FOR  
PERMIT PROCESS**

**MUST BE INCLUDED OR  
APPLICATION**

**WILL NOT BE  
ACCEPTED**

***(no exceptions)***

**ANY QUESTIONS PLEASE CALL THE  
BUILDING INSPECTOR @ (845) 831-  
7800 ext 3321.**



**TOWN OF FISHKILL**  
CODE ENFORCEMENT

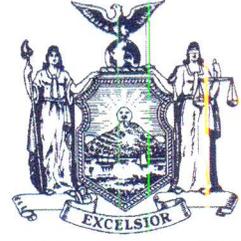
# **TOWN OF FISHKILL**

## **OFFICE OF MUNICIPAL DEVELOPMENT**

807 Route 52, Fishkill, New York 12524-3110

website: [www.fishkill-ny.gov](http://www.fishkill-ny.gov)

(845) 831-7800 ext. 3322 Fax: (845) 831-3256



**NEW YORK STATE**  
CODE ENFORCEMENT

## **Single, Two Family & Townhouse Dwelling**

**Plans and Specifications Submitted with a Building Permit for New Construction**

- 1) **Cover Sheet or First Page**
  - a) Name of the Registered Architect or Professional Engineer
  - b) Raised or Ink Stamp and Signature (2 copies w. survey)
  - c) Address
- 2) **Phone & Fax Number**
- 3) **Type of Project**
  - a) New
- 4) **9-1-1 Addressing Form**
- 5) **San 34 Form (if required)**
- 6) **Climatic Design**
- 7) **Plan Review completed by Design Professional**  
(complete sections pertinent to applicant)
- 8) **Energy Compliance**
- 9) **RES Check**
- 10) **WORKERS' COMPENSATION and CERTIFICATE OF LIABILITY** – Proof of insurance must be submitted from the contractor and/or homeowner at the time of the application.
  - a) Contractors **MUST** submit Certificate of Liability naming Town of Fishkill or homeowner of project as Certificate Holder.
  - b) Contractors **MUST** submit Certificate of Workers Compensation (not acceptable on Accord forms) or Affidavit in lieu thereof---signed and stamped by Workers Compensation Board.
  - c) If contractor is applicant, the contractor **MUST** provide a letter from the homeowner authorizing him to file for Building Permit.
  
- 11) **All applications MUST be complete before review by a Building Inspector.**

**BUILDING PERMIT APPLICATION**

Application/Permit #

Application/Permit # [ ] [ ] - [ ] [ ] [ ]

**TOWN OF FISHKILL, COUNTY OF DUTCHESS, NEW YORK**

The undersigned hereby applies for a permit to completely perform work in accordance with the description, plans, specifications and/or professionally prepared design standards and such conditions as may be indicated on the permit. The permit must be filled out completely and often requires the previous approvals of other agencies which must be included with the application. All provisions of the Town of Fishkill, local law and all other appropriate rules and regulations shall apply. The permit does not constitute authority to perform work in violation of any federal, state or local laws.

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

BUILDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

BUILDING SITE LOCATION: \_\_\_\_\_

(Road: Town, County, State or Private)

TAX GRID NUMBER: #06 [ ] [ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

PROJECT: \_\_\_\_\_

(Check all that apply.)

- Construction of New Building
- Demolition
- Factory Manufactured Home
- Conversion - Change in Use/Occupancy
- Alteration
- Addition to Existing Building
- Repair to Existing Structure
- Installation/Replacement of Equipment and Systems
- Installation/Extension of Electrical Systems
- Pool - Above Ground: size \_\_\_\_\_
- Pool - In-Ground: size \_\_\_\_\_
- Garage, Attached
- Garage, Detached
- Noncommercial Storage Building (shed)
- Deck/Porch
- Solid Fuel Heating Device (woodstove, pellet stove, fireplace)
- Sign
- Other: \_\_\_\_\_

Size of Structure (dimensions): \_\_\_\_\_ Square Footage: \_\_\_\_\_

Height: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Number of Dwelling Units: \_\_\_\_\_

No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms: \_\_\_\_\_ Finished Basement? \_\_\_\_\_

ZONING DISTRICT: \_\_\_\_\_ Fire District: \_\_\_\_\_

Proposed Setback Minimums:

Distance of structure from... Front Line: \_\_\_\_\_ Rear Line: \_\_\_\_\_ Left Side: \_\_\_\_\_ Right Side: \_\_\_\_\_

Road Frontage (feet): \_\_\_\_\_ Lot Area (acres): \_\_\_\_\_

- Planning Approval - Site Plan, Special Use, etc.
- Town Variance (attach ZBA resolution)
- State Variance (attach Board of Review resolution)
- Driveway Permit - Town, County, State DOT
- Water/Sewer District Approvals
- Wetland
- Flood Plain
- SAN 34 Form - Dept. of Health Approval
- Manufactured Home: Stamped and Signed Plans
- Trusses: Stamped and Signed Plans
- Energy Code Compliance Sheet
- Electrical Inspection Agency: Application Filed
- Attached Plot Plan or Survey
- INSURANCE / WORKERS COMPENSATION**

**ESTIMATED COST OF PROJECT:** \_\_\_\_\_

Zoning Dept. Use:	Bldg. Dept. Use:
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[ ] FEE: Deposit: \_\_\_\_\_ Balance: \_\_\_\_\_ Total: \_\_\_\_\_

The undersigned applicant is responsible to notify the Town and hereby consents by the execution of this application to all necessary inspections to be made by the Building and Zoning Department of the Town of Fishkill. It is the responsibility of the applicant and design professional to contact the Building Department and supervise, certify all work changed from the original plans to be appropriately recorded and approved. It is understood that authorization is hereby given for the Building Inspector/Zoning Administrator to enter premises for purposes of inspection any time prior to the issuance of the Certificate of Occupancy.

**All inspections are listed on Building Permit.**

**All applications MUST be complete before review by an Inspector.**

**MINIMUM 72 HOURS FOR PERMIT TO BE ISSUED**

\_\_\_\_\_  
Signature (Owner, Builder, Agent)

\_\_\_\_\_  
Date





# Application for Approval of a Residential Sewage Disposal System

Tel. # 845-486-3404 Fax # 845-486-3545

INSTRUCTIONS: Building Inspector and Applicant to Complete Section 1 Health Department to complete Section 2

## SECTION 1

Date of Application \_\_\_\_\_ Town/Village: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

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

Applicant Telephone #: \_\_\_\_\_

Subdivision or Plan Name: \_\_\_\_\_

Lot Number: \_\_\_\_\_ Section No. #: \_\_\_\_\_ Number of Bedrooms: \_\_\_\_\_

(Town) (Section) (Map) (Parcel / Grid)

Tax Map Number: 

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Location and description of property: \_\_\_\_\_

Other name by which property is known: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Bldg. Permit Applic. No. \_\_\_\_\_

(Zoning Administrator / Building Inspector signature)

## SECTION 2

### For Health Dept. Use ONLY

Environ. Health File # or Map Code #:	
Individual Lot:	
Illegal Subdivision:	
Health Dept. Approved Subdivision:	

Map Expiration Date:	
Subdivision < 5 Lots:	
County Clerk Filed Map #:	
Parcel Extension Date:	

ACTION		DATE	INITIALS
C.O.	Contacts Applicant re: Engineering Requirements		
	Contacts Applicant re: Soil Tests		
	Transmits Application to District Office		
D.O.	Observes soil tests		
	Makes Pre-Construction Site Visit		
	Clears Building Permit with Building Inspector		
	Receives Well Completion Report		
	Receives Fill Section Certification		
	Completes Inspection		
	Clears Certificate of Occupancy with Bldg. Inspector		

Residential Code of New York PLAN REVIEW

Owner: \_\_\_\_\_ Reviewed by: \_\_\_\_\_  
 Location: \_\_\_\_\_ Date: \_\_\_\_\_

Building Type: ( ) One Family ( ) Two Family ( ) Townhouse

Type of Work: ( ) New Construction ( ) Existing Building

Table R301.2 (1)  
 CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

Ground Snow Load	Wind Speed (MPH)	Seismic Design Category	SUBJECT TO DAMAGE FROM			Ice Shield Underlayment Required	Flood Hazards
			Weathering	Frost Depth	Termite		

Plan Review Form #1 applies to ALL buildings regulated by the Residential Code of New York.

Forms #2, 3W,3M and 3S are specific to the type of construction material used for the structural components of the building.

Form #4 is for use with ALL ROOF COVERINGS.

Check off each applicable form that was used:

- |  |                            |
|--|----------------------------|
|  | Date Complete<br>(Initial) |
| [ ] Form #1 PLAN REVIEW FORM - MASTER                            | _____                      |
| [ ] Form #2 PLAN REVIEW FORM - FOUNDATIONS                       | _____                      |
| [ ] Form #3W PLAN REVIEW FORM - WOOD FRAME CONSTRUCTION          | _____                      |
| [ ] Form #3S PLAN REVIEW FORM - STEEL FRAME CONSTRUCTION         | _____                      |
| [ ] Form #3M PLAN REVIEW FORM - MASONRY OR CONCRETE CONSTRUCTION | _____                      |
| [ ] Form #4 PLAN REVIEW FORM - ROOF COVERINGS                    | _____                      |

	ITEM	CODE SECTION	REQUIRED/ALLOWED	ACTUAL
1	<b>Code Applicability</b>  State Agency regulation Community residence Hospice  Conversion to B&B	R101.2  R101.2.1  AJ701	Detached 1- or 2- Family Townhouse Max 3story with separate egress	
2	<b>Number of Stories</b> Material limitations Wood Steel ICF Foundations IF 3 story	Tab R602.3(5) R505.1.1 R404.4.1 See 313.5	2x6 allows 3 stories 2 stories max 2 stories max Sprinkler req'd	
3	<b>Construction Method Limits</b> Wind 100 MPH Hurricane region, and 110 MPH elsewhere  Seismic Irregular buildings in Seismic Design Cat C, D <sub>0</sub> , D <sub>1</sub>  Snow Over 70 psf ground snow	R301.2.1.1  R301.2.2.2.2  R301.2.3	Cannot use conventional framing methods  Cannot use conventional framing methods  Cannot use conventional framing methods	
4	<b>Live Loads</b>	Tab R301.5		
5	<b>Location on Lot</b>  Detached Garage	R302 Table R302.1  R302.1 Exp 2	< 5' from lot line - (1hr.)  2' allowed, 4" projection	
6	<b>Light and Ventilation</b> Habitable Rooms Light Ventilation  Stairway Illumination	R303 R303.1  R303.6	8% of floor area 4% of floor area  Artificial light req'd	
Complete the following worksheet to verify light and ventilation requirements				

Natural Light and Ventilation Worksheet					
Room (Floor)	Floor Area (Square Feet)	Light (8% Required)	Light (Actual)	Ventilation (4% Required)	Ventilation (Actual)

	ITEM	CODE SECTION	REQUIRED	ACTUAL
7	<b>Room Dimensions</b> Habitable room area  Other habitable rooms  Ceiling Height	R304.1  R304.2 R304.3  R305.1	Min. 120 SF (1 room)  70 SF other rooms 7' min. dimension  7' min.	
8	<b>Glazing</b> Safety Glazing Locations  Skylights/Sloped Glazing	R308 R308.4  R308.6		
9	<b>Garage - Attached</b> Opening Protection  Separation required (vert)  Horizontal separation	R309 R309.1  R309.2.1 Exception  R309.2.2	NP into sleeping room 3/4 hr. self-closing door  3/4 hr. wall One layer 5/8" type X  One layer 5/8" type X	

	ITEM	CODE SECTION	REQUIRED	ACTUAL
10	<b>Escape and Rescue Openings</b>	R310		
	Minimum Opening Area	R310.1.1	5.7 sq ft / 5.0 sq ft	
	Opening Height	R310.1.2	24 in (Net Clear)	
	Opening Width	R310.1.3	20 in (Net Clear)	
11	<b>Exits Doors</b>	R311.4.1	Min. 1 per dwelling unit	
	Door type and size	R311.4.2	3 ft / 6 ft 8 in side-hinged	
	Landing	R311.4.3		
12	<b>Stairways</b>			
	Under stair protection	R311.2.2	½" gyp. If enclosed	
	Width - Minimum	R311.5.1	36 in.	
	Headroom	R311.5.2	6 ft. 8 in. height	
	Tread depth	R311.5.3	9 in.	
	Riser Height		8 1/4 in	
	Landing	R311.5.4		
	Spiral	R311.5.8.1	NP as only mean of egress from a story	
13	<b>Handrails/Railings</b>			
	When Required	R311.5.6	4 or more risers	
	Height	R311.5.6.1	Min 34 in./ Max 38 in.	
	Continuity	R311.5.6.2		
14	<b>Guards</b>	R312		
	Where Required	R312.1	Surfaces raised 30"	
	Height		Min. 36"	
	Openings limitation	R312.2	4" sphere 6" triangle exception 4 3/8" stair exception	

	ITEM	CODE SECTION	REQUIRED	ACTUAL
15	<b>Alarms and Life Safety</b> <u>Smoke Alarms</u> Locations Power/Wiring  <u>CO alarms required</u> Locations  Power/Wiring  <u>Automatic Sprinkler Systems</u>	R313.1 R313.1.1  R313.4 R313.4.1  R313.4.3  R313.5	  Inside, outside, each level Interconnect, hard wired  If CO source exists Story with sleeping Story with CO source Interconnect, hard wired  3 stories above grade NFPA 13D	
16	<b>Foam Plastic Insulation</b>	R314		
17	<b>Wall and Ceiling Finishes</b> Interior Coverings Plaster  Gypsum  Exterior siding Water resistive barrier Coverings	R702 Tab R702.1(1)  Tab R702.3.5  R703 R703.2 Tables R703.4	Based on material used   Based on material used	
18	<b>Dwelling Separation</b> <u>Two-family</u> - Required Sprinkler Exception  <u>Townhouses</u> , separate bldgs Exterior wall Exception: Common Wall  Parapet Walls  Structural Independence	R317 R317.1  R317.2  R317.2.2 and R317.2.3  R317.2.4	1 hr min ½ hr min  Each 1 hr min 2 hr min  30" - exceptions Rating matches wall	
19	<b>Protection of the Structure</b> Decay and rotting  Termites	R319  R320		

	ITEM	CODE SECTION	REQUIRED	ACTUAL
20	<b>Flood Resistant Construction</b> Base flood elevation  Add 2' freeboard	R324 R324.1.3  R324.1.3.3	Flood zone?	Yes No
21	<b>Ext Windows, Glass Doors</b>  Performance/Wind load  Testing/Labeling  Wind-borne Debris  Anchorage, Wind Force Sys	R613  R613.2  R613.3  R613.6  R613.7		
22	<b>Fireplaces and Stoves</b>  Masonry Fireplaces  Factory-Built Fireplaces  Exterior Air Supply	Chapter 10  R1001  R1004  R1006		
23	<b>Chimneys and Gas Vents</b>  Masonry Chimneys Factory-built Chimneys  Fire Blocking  Multiple-Appliance Venting Solid fuel prohibition	Ch. 10, 18, 24  R1003 R1005  M1801.9 R602.8  M1801.11 M1801.12		
24	<b>Plumbing/Sanitation</b>  Fixtures Required  Fixture Spacing  Waste Type/approval  Water Source/approval	R306, R307 Chapt. 25 - 32 R306  R307.1 Figure 307.2  P2603.1.1  P2603.1.2	Toilet, Lav, tub or shower Kitchen sink	

	ITEM	CODE SECTION	REQUIRED	ACTUAL
25	<b>Electrical Requirements</b>	Ch 33 thru 42	NFPA 80-08 (NEC)	
	Receptacle Placement	E3801.2.1	12 ft. max	
	Small appliance circuits	E3801.2	2 - 20 amp	
	GFCI and Arc Fault	E3802 E3802.11	GFCI 10 locations Arc Fault all circuits	
	Switch Locations	E3803	1 per habitable room & bathrooms	
26 (a)	<b>Energy Compliance</b> Climate Zone	Chapter 11 Table N1101.2		
	<u>Compliance Path</u> Mandatory provisions	N1101.2		
	<input type="checkbox"/> Prescriptive	N1102 - N1104		
	<input type="checkbox"/> Energy Code alternative	ECCNY Chap 4		
	Approved Software	N1101.2.3		
	<input type="checkbox"/> Res Check compliance			
	<input type="checkbox"/> RemRate/RemDesign			
	<input type="checkbox"/> EnergyStar/HERS			
	Construction Documents	N1101.13		
26 (b)	<b>Energy - Prescriptive Path</b> Building Envelope	Table N1102.1		
	Insulation amounts	Fenestration	U - .35	
		Skylight	U - .60	
		Glazing SHGC	NR	
		Ceiling		
		Wood wall		
		Floor		
		Basement wall		
		Slab R, depth		
		Crawl space	Ventilate OR Insulate	



**WORKERS COMPENSATION AND DISABILITY INSURANCE REQUIREMENTS**

TOWN OF FISHKILL, COUNTY OF DUTCHESS, NEW YORK

New York State law requires an applicant for a Building Permit to submit proof of Workers Compensation Insurance and proof of Disability Insurance. This proof must be on the following forms:

**For Workers Compensation**

C-105.2

U-26.3

SI-12

GSI-105.2

**For Disability**

DB-120.1

DB-155

**ONLY THE ABOVE FORMS ARE ACCEPTABLE. BE ADVISED THAT "ACORD" FORMS ARE NOT ACCEPTABLE AS PROOF OF WORKERS COMPENSATION OR DISABILITY COVERAGE.**

You can get the proper forms from your insurance company.

If you are a homeowner doing your own work on your own house, you may be eligible for exemption from the above requirements. Please ask us for a homeowner's exemption form.

If you are a business of one or two persons, with no full-time employees, you may be eligible for exemption from the above requirements. Please acquire form #CE-200 from your local office of the Workers Compensation Board.

***We also require***

**CERTIFICATE OF LIABILITY  
Naming Town of Fishkill additionally insured  
or  
Certificate Holder**

## LIST OF ELECTRICAL INSPECTION AGENCIES

### Commonwealth Electrical Inspection Service, Inc.

CEIS Inc., 176 Doe Run Road, Manheim, PA 17545

**(800)801-0309 Fax: (315)736-0461**

**Local Inspector(s): Ron Henry (845) 541-1871 (voicemail 24/7)**

**(845)562-8429 Office and Fax**

2 Mallard Drive, Newburgh, NY 12550

### Z3CONSULTANTS, Inc.

PO Box 363, LaGrangeville, NY 12540

**(845) 471-9370 Fax (845) 625-1479 Gary Beck, Jim Greaves**

### Atlantic-Inland, Inc.

997 McLean Road, Cortland, NY 13045

**(845)876-8794 or (800)758-4340**

**William Jacox (845)876-8794**

12 Ackert Hook Rd., Rhinebeck, NY 12572

### Electrical Underwriters of NY, LLC

PO Box 4089, New Windsor, NY 12553

**(845) 569-1759 OR (866) 475-1759 (phone hours 7AM - 8:30 AM)—(office hours 9AM-3PM)**

**Ernie C. Bello, Jr., John W. Taylor**

### Electrical Inspections by New York Board

PO Box 1558, Wappingers Falls, NY 12590

**845-298-6792 Pat Decina**

### Middle Department Inspection Agency, Inc.

142 Troy-Schenectady Rd., Watervliet, NY 12189

**(518) 273-0861 or (800) 873-6342 Fax: (518) 273-1202**

**David J. Williams (800) 479-4504**

### Tri-State Inspection Agency

PO Box 1034, Warwick, NY 10990

**(845) 986-6514 or (800) 847-6264 Fax: (845) 986-0535 9AM to 6PM**

Local Inspector(s):

**Lou Ambrosia (845) 986-6514 9AM to 6PM, Mike Gromwaldt (845) 223-6793**

**Bob Stumbo (845) 656-9693, Nick DiFusco (914) 438-6776**

### New York Electrical Inspections

PO Box 384, Amenia, NY 12501

**(845) 373-7308 Fax: (845) 373-7309**

### New York Electrical Inspection Services, Inc.

150 White Plains Road, Tarrytown, NY 10591

**(914) 347-4390 Fax: (914) 347-4394**

### The Inspector, LLC

7063 State Route 374, Chateaugay, NY 12920-0000

**(518) 481-5300**

### Swanson Consulting, Inc.

PO Box 1361, Northville, NY 12134 **(845) 496-4443**

### NY Electrical Inspections & Consulting LLC

93 Beattie Avenue, Middletown, NY 10940

**(845) 343-6934 Fax: (845) 343-4834**

### State Wide Inspection Services

21 Old Main St #203, Fishkill, NY 12524 **(845) 202-7224**

**Frank Farina cell: (646) 208-2017**

### New York Certified Electrical Inspectors LLC

203 Purgatory Road, Campbell Hall, NY 10916

**Jerry Caliendo (845) 294-7695**

**\*\*\*IMPORTANT\*\*\***

All new electrical work requires inspection(s) by one of the approved electrical Inspection agencies listed above. Connection of electrical work without proper Inspection is a violation of the Code of the Town of Fishkill and subject to fines.

## **ABBREVIATED SUMMARY OF PERMIT FEES - RESIDENTIAL**

### **TOWN OF FISHKILL, COUNTY OF DUTCHESS, NEW YORK**

#### **RESIDENTIAL BUILDING PERMITS**

Minimum Fee (or minimum fee required to submit an application):	\$75.00
See miscellaneous fees for retroactive work, electrical only work, etc.	
<b>New Home Construction</b> (per \$1000 of estimated construction cost less land value):	\$12.00/\$1K
<b>Additions:</b>	\$0.40/sq.ft.
New finished areas including, but not limited to, living areas, kitchens, bathrooms, bedrooms, closets, etc.	
<b>Interior Alterations:</b>	\$0.30/sq.ft.
Existing finished areas including, but not limited to, living areas, kitchens, bathrooms, bedrooms, closets, etc.	
<b>Garages:</b>	
Attached:	\$0.40/sq.ft.
Detached:	\$0.40/sq.ft.
<b>Storage Buildings (sheds):</b>	
Up to 400 square feet:	\$75.00
<b>Decks/Porches/Patios:</b>	
Open or with roof cover only:	\$0.30/ sq.ft.
Enclosed:	\$0.40/sq.ft.
Patios (impervious):	\$0.20/sq.ft.
<b>Plumbing installations (alterations not included):</b>	
Kitchens:	\$20.00 each
Half bath (two fixtures):	\$20.00 each
Full bath (three fixtures):	\$20.00 each
Future rough-in:	\$10.00 each
<b>Pools:</b>	
Above ground (deck, platform or patio not included):	\$75.00 each
In ground (deck, platform or patio not included):	\$75.00 each
<b>Conversions:</b>	
Extended one-family use (alterations not included):	\$125.00 each
Accessory apartment use (alterations not included):	\$125.00 each
<b>Heating/Cooling Equipment (Furnaces, Boilers, Woodstoves, Pellet Stoves, Fireplaces, Central Air, etc.):</b>	
New installations (alterations not included):	\$75.00 each
Replacements (alterations not included):	\$75.00 each
<b>MISCELLANEOUS FEES - RESIDENTIAL</b>	
Retroactive Work (in additional to above fees for each occurrence):	\$250.00 <u>PLUS</u>
Additional fee required to submit a Building Permit application or amendment to a Building Permit for work commenced or completed prior to approval of such Building Permit or amendment	10% of the Cost of construction
Electrical Work Only:	\$75.00 each
Temporary Construction/Office Trailer (requires Planning Board approval):	\$125.00/year
Sign - New Construction/ Installation/Electric- (separate Zoning Permit is also required):	\$150.00 each
Re-inspection Fee (for re-scheduling of inspections, assessed at the discretion of the Building Inspector):	\$75.00 each
Municipal Files Searches (transcript of records only):	\$175.00 each
Additional fee for an on-site verification inspection:	\$125.00 each
Land Development Permit (Chapter 78):	\$100.00 each
(Fee applies only to applications that are not connected to site plan, subdivision , special use permit or building permit applications.)	
Top Soil and Excavation Permit (Chapter 128-5A):	\$100.00 each
(Fee applies only to applications that are covered under Chapter 128-5A.)	
Landscaping or Driveway Bond - administration fee (nonrefundable - notes 4 & 5):	\$100 each
(Bond amount shall be equal to cost of seeding or paving.)	
<b>Building and/or Structural Demolition:</b>	
Minimum Fee (includes work covering up to and including 250 square feet):	\$75.00
Add to minimum fee for each square foot, or fraction thereof, exceeding 250 square feet:	0.10/sq.ft.