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

OFFICE OF MUNICIPAL DEVELOPMENT

807 Route 52, Fishkill, New York 12524-3110 website: www.fishkill-ny.gov

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



RENOVATION, REPAIR, ALTERATION, RECONSTRUCTION BUILDING PERMIT PACKAGE

- 1. **CONSTRUCTION DRAWINGS** Need to submit two (2) drawings showing existing spaces and the proposed area to be renovated or repaired which include:
- A floor plan for each floor showing all doors sizes, windows sizes, identify egress windows, % of light, ventilation and ceiling height in each room, dimensions of rooms and building, label use of rooms, smoke detectors, and heating equipment.
- Show a section view of the wall construction and fire separation construction. Identify on the plans new and existing
 construction.
- Stamp and signature by New York State Registered Architect or Professional Engineer may be required on plans and specifications for structural modifications.
- 2. **ENERGY CODE COMPLIANCE** R-Values for the walls, ceilings, floors, windows and doors. Energy Conservation Construction Code of New York State.
- 3. **WORKERS' COMPENSATION and CERTIFICATE OF LIABILITY** Proof of insurance must be submitted from the contractor and/or homeowner at the time of the application.
- Contractors MUST submit Certificate of Liability naming Town of Fishkill or homeowner of project as Certificate Holder.
- Contractors **MUST** submit Certificate of Workers Compensation (not acceptable on Accord forms) or Affidavit in lieu thereof---signed and stamped by Workers Compensation Board.
- Homeowners doing their own projects MUST fill out form BP-1 (included in packet) and have notarized.
- If contractor is applicant, the contractor MUST provide a letter from the homeowner authorizing him to file for Building Permit.
- 5. All applications MUST be complete before review by a Building Inspector.

BUILDING PERMIT APPLICATION

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

rederal, state or local laws.							
APPLICANT:							
ADDRESS:	PHONE:						
OWNER:							
ADDRESS:	PHONE:						
DI III DED.							
ADDRESS:	PHONE:						
DI III DING CITE I OCATION.							
			own, County, Sta	ate or Private)			
TAX GRID NUMBER: #06							
PROJECT:							
(Check all that apply.)		[□ p _o	ol - Above Gro	und: ci-	70		
☐ Construction of New Building☐ Demolition			ol - In-Ground:				
Factory Manufactured Home	_	_	rage, Attached	b			
☐ Conversion - Change in Use/C☐ Alteration)ccupancy		rage, Detache	d Storage Building	a (shed)		
Addition to Existing Building			ck/Porch	Storage Banany	g (Silcu)		
Repair to Existing Structure	avionant and Customs			g Device (wood	Istove, pellet s	stove, fireplace	
Installation/Replacement of EInstallation/Extension of Elect			gn her:				
Size of Structure (dimensions): _							
Height: N							
No. of Bedrooms:	No. of Bathrooms:		Fini	shed Basement	t?		
ZONING DISTRICT:		Fire D	istrict:				
Proposed Setback Minimums:							
Distance of structure from							
Road Frontage (feet):							
☐ Planning Approval - Site Plan, ☐ Town Variance (attach ZBA r	• •	_		Dept. of Health		Dlane	
State Variance (attach Board	Manufactured Home: Stamped and Signed PlansTrusses: Stamped and Signed Plans						
Driveway Permit - Town, Cou	ınty, State DOT	_		npliance Sheet			
	ais	_	ectrical inspect tached Plot Pla	ion Agency: A	pplication Fil	ea	
Flood Plain		□ IN	SURANCE / W	ORKERS COMI			
				OST OF PROJE	ECT:		
Zoning Dept. Use:		Bldg. Dep	t. Use:				
] FEE: Deposit:		Balance:			Total		
The undersigned applicant is respor nspections to be made by the Build							
professional to contact the Building D							
approved. It is understood that auth nspection any time prior to the issuar	· -	_	spector/Zoning A	Administrator to	enter premise	s for purposes	
All inspections are listed on Buildi		ωραιτο γ .					
All applications MUST be complete							
MINIMILIM 72 HOLIRG	EOD DEDMIT TO	A BE ICC	IIED				

SMOKE DETECTORS

§RR317.1.1 Alterations, repairs, additions and conversions. When interior alterations, repairs, additions or conversions requiring a permit occur, or when one or more sleeping rooms are added or created in existing dwellings, the individual dwelling unit shall be provided with smoke alarms located as required for new dwellings; the smoke alarms shall be interconnected and hard wired.

CARBON MONOXIDE DETECTORS

Section 1228.3 Carbon monoxide alarms.

Single and multiple station carbon monoxide alarms shall be installed and maintained in newly constructed dwelling units and multiple dwellings and in dwelling units and multiple dwellings offered for sale, as provided in this section.

- (a) Where required:
- (1) one- and two-family dwellings and multiple single family dwellings (townhouses) that are constructed or offered for sale after July 30, 2002;
- (2) dwelling units in buildings owned as condominiums or cooperatives that are constructed or offered for sale after July 30, 2002; and
- (3) multiple dwellings (as defined in subdivision (f) of this section) that are constructed or offered for sale after August 9, 2005.

However, a carbon monoxide alarm shall not be required in a dwelling unit if no fuel-fired appliance, no fuel-fired equipment, no solid-fuel burning appliance, no solid-fuel burning equipment, no wood stove, no fireplace, no other appliance or device that runs on or uses flammable or combustible fuel, no system that runs on or uses flammable or combustible fuel, no attached garage, and no other motor-vehicle related occupancy, is located in, or attached to, such dwelling unit or the structure in which such dwelling unit is located.

(b) Location of carbon monoxide alarms.

- (1) In the case of a building that contains at least one dwelling unit (as defined in subdivision (f) of this section), at least one carbon monoxide alarm shall be provided in each such dwelling unit. The required carbon monoxide alarm shall be installed in the immediate vicinity of bedroom(s) on the lowest floor level of the dwelling unit containing bedroom(s).
- (2) In the case of a building that contains at least one sleeping unit (as defined in subdivision (f) of this section), at least one carbon monoxide alarm shall be provided on each floor level containing sleeping unit(s). The required carbon monoxide alarm shall be installed in the immediate vicinity of such sleeping units(s). In addition, at least one carbon monoxide alarm shall be provided inside each sleeping unit that contains any fuel-fired appliance, fuel-fired equipment, solid-fuel burning appliance, solid-fuel burning equipment, wood stove, fireplace, any other appliance or device that runs on or uses flammable or combustible fuel, or any system that runs on or uses flammable or combustible fuel.
- (3) In the case of a building that contains at least one dwelling unit (as defined in subdivision (f) of this section) and at least one sleeping unit (as defined in subdivision (f) of this section), compliance with paragraph (1) and paragraph (2) of this subdivision shall be required.
- (c) **Equipment and installation.** Carbon monoxide alarms shall be listed and labeled as complying with UL 2034-2002 (Single and Multiple Station Carbon Monoxide Alarms, Second Edition, October 29, 1996 with revisions through and including June 28, 2002, published by Underwriters Laboratories, Inc.), shall be installed, used and maintained in accordance with the manufacturer's installation instructions, and shall conform with paragraphs (1) and (2) of this subdivision. This subdivision shall not preclude the installation of listed combination smoke/carbon monoxide alarms.
- (1) **Power source.** Carbon monoxide alarms are permitted to be permanently connected to the building wiring system, connected by cord or plug to the wiring system, or battery operated. Where carbon monoxide alarms are permanently installed, they shall receive their primary power from a lighting circuit of the building wiring system, provided that such wiring system is served from a commercial source. Wiring shall be permanent and without a disconnecting switch other than as required for overcurrent protection.

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
Of
Certificate Holder

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

This form cannot be used to waive the workers' compensation rights or obligations of any party.

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box): I am performing all the work for which the building permit was issued. I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work. I have a homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued. I also agree to either: acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a CE-200 exemption form; OR have the general contractor, performing the work on the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit. (Date Signed) (Signature of Homeowner) Home Telephone Number (Homeowner's Name Printed) Property Address that requires the building permit: (County Clerk or Notary Public)

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

BP-1 (12/08) NY-WCB

LAWS OF NEW YORK, 1998 CHAPTER 439

The general municipal law is amended by adding a new section 125 to read as follows:

- 125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:
- 1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR
- 2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

Implementing Section 125 of the General Municipal Law

1. General Contractors -- Business Owners and Certain Homeowners

For **businesses and certain homeowners listed as the general contractors on building permits,** proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is **ONE** of the following forms that indicate that they are:

- ♦ insured (C-105.2 or U-26.3),
- ♦ self-insured (SI-12), or
- ♦ are exempt (CE-200),

under the mandatory coverage provisions of the WCL. Any residence that is not a **1, 2, 3 or 4 Family, Owner-occupied Residence** is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

2. Owner-occupied Residences

For homeowners of a **1, 2, 3 or 4 Family, <u>Owner-occupied</u> Residence,** proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file form BP-1 (12/08).

- Form BP-1shall be filed if the homeowner of a **1, 2, 3 or 4 Family**, **Owner-occupied Residence** is listed as the general contractor on the building permit, and the homeowner:
 - ♦ is performing all the work for which the building permit was issued him/herself,
 - is not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping the homeowner perform such work, or
 - has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- ♦ If the homeowner of a 1, 2, 3 or 4 Family, <u>Owner-occupied</u> Residence is hiring or paying individuals a total of 40 hours or MORE in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" form, BP-1(12/08), but shall either:
 - ♦ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit (the C-105.2 or U-26.3 form), OR
 - have the general contractor, (performing the work on the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit) provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit.

BP-1 (12/08) Reverse www.wcb.ny.gov

LIST OF ELECTRICAL INSPECTION AGENCIES

<u>Commonwealth Electrical Inspection Service, Inc.</u> <u>Local Inspector</u>(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)

(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) 544-2180 Fax: (845) 544-7257 9AM to 6PM Local Inspector(s):

Lou Ambrosia (845) 986-6514 9AM to 6PM, Vincent Ambrosio (845) 544-4481 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

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.	ψ10.00
New Home Construction (per \$1000 of estimated construction cost less land value):	\$12.00/\$1K
Additions:	\$0.40/sq.ft.
New finished areas including, but not limited to, living areas, kitchens, bathrooms,	
bedrooms, closets, etc.	
Interior Alterations:	\$0.30/sq.ft.
Existing finished areas including, but not limited to, living areas, kitchens, bathrooms,	
bedrooms, closets, etc.	
Garages:	
Attached:	\$0.40/sq.ft.
Detached:	\$0.40/sq.ft.
Storage Buildings (sheds):	
Up to 400 square feet:	\$75.00
Decks/Porches/Patios:	
Open or with roof cover only:	\$0.30/ sq.ft.
Enclosed:	\$0.40/sq.ft.
Patios (impervious):	\$0.20/sq.ft.
Plumbing installations (alterations not included):	ФОО ОО I
Kitchens:	\$20.00 each
Half bath (two fixtures):	\$20.00 each \$20.00 each
Full bath (three fixtures): Future rough-in:	\$20.00 each
Pools:	\$10.00 each
Above ground (deck, platform or patio not included):	\$75.00 each
In ground (deck, platform or patio not included):	\$75.00 each
Conversions:	φ/ 0.00 00011
Extended one-family use (alterations not included):	\$125.00 each
Accessory apartment use (alterations not included):	\$125.00 each
Heating/Cooling Equipment (Furnaces, Boilers, Woodstoves, Pellet Stoves,	¥ 1.2000 00000
Fireplaces, Central Air, etc.):	
New installations (alterations not included):	\$75.00 each
Replacements (alterations not included):	\$75.00 each
MISCELLANEOUS FEES - RESIDENTIAL	
Retroactive Work (in additional to above fees for each occurrence):	\$250.00 <u>PLUS</u>
Addit ional fee required to submit a Building Permit application or 10% of the	ne Cost of construction
amendment to a Building Permit for work commenced or completed	
prior to approval of such Building Permit or amendment	
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	•
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.)	φ100.00 Cασπ
Landscaping or Driveway Bond - administration fee (nonrefundable - notes 4 & 5):	\$100 each
(Bond amount shall be equal to cost of seeding or paving.)	y
Building and/or Structural Demolition:	
Minimum Fee (includes work covering up to and including 250 square feet):	\$75.00
Add to minimum foo for each square foot, or fraction thereof, exceeding 250 square foot:	0.10/sq.ft

Add to minimum fee for each square foot, or fraction thereof, exceeding 250 square feet:

0.10/sq.ft.