

Building Permit Application Checklist

Dear Applicant: This checklist is presented as a guide for preparation of a complete building permit application. For this application to be processed efficiently, please be sure to include all documents and items required for the proposed work.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Permit expires one (1) year from date of issuance

1. Two (2) fully completed signed and notarized permit applications w/appropriate fee.
2. Contractor's license and proof of Workers' Compensation, Disability & Liability Insurance.
3. Three (3) sets of plans and specifications and **one (1) set of digital plans**, all sheets must be numbered consecutively, three (3) sets of plans must be signed and stamped on each sheet or page by a NYS licensed architect or professional engineer showing:
 - a. All structural and plumbing details
 - b. Foundation (piling plan) pursuant to FEMA regulations and Local Law 6 of 1998 showing sizes and types of materials
 - c. Floor plan (for each planned building floor) and square footage of living space indicating Room layout, headers, floors, side walls and ceiling materials and sizes & decks, walkways and square footage
 - d. At least three (3) elevation views showing exterior of the building, a cross section of the building indicating all materials as to size and type
 - e. 60 Degree Pyramid Analysis clearly delineated on all three elevation views
 - f. Drainage and vent system detail showing all plumbing connections and piping in the building
 - g. Drawings shall be clear and accurate and drawn to 1/4" to foot scale.
 - h. Mechanical and electrical details, elevated above BFE.
 - i. NYS energy code calculations.
 - j. Details of exterior steps, stairways, railings, driveways, terraces and patios on grade, type of materials for exterior.
 - k. All construction below BFE must be certified by architect or engineer as breakaway construction as per FEMA & Local Law #6 of 1998 (V zone only).
4. Affidavit of Energy Compliance, 3rd party testing form (manual J & blower door)
5. A valid Certificate of Occupancy or certified abstract of single and separate ownership
6. REScheck Form, **Manual J, Manual S**
7. Propane Tank Permit Application (No fee new home)
8. Two (2) current surveys, showing FEMA zone, all existing and proposed structures, their setbacks to all property lines, square footage of each and percentage of lot coverage of existing and proposed structures in relation to the lot area (lot area equals total parcel area minus wetlands, if any). Must have location of gas tank. One corner monument per lot required on Final Survey. Must be drawn to scale. Survey must be signed and stamped by a NYS Licensed Surveyor Oceanfront Property must show Coastal Erosion Hazard Line (ocean only)
8. A copy of the Suffolk County Health Department approval for cesspool and well installations (new construction) and modifications to existing buildings where the existing cesspool and well systems are being modified. (Health Dept: 852-2100); NOTE: No structure can be built within the 25-yard setback on ocean side properties
9. DEC approval (work within 300 feet from wetlands) or DEC letter of non-jurisdiction
10. The Village Flood Damage Prevention Code requires (Local Law #6 of 1998):
 - a. The elevating of all structures whenever cumulatively and/or substantially improved more than 50% of replacement value.
 - b. that the area below the BFE is constructed of Breakaway Walls in V zones only
11. Any change in field plans are to be resubmitted and approved by the Building Inspector.

*** No Certificate of Occupancy will be issued until the following documentation is submitted to the Building Inspector for Final Approval**

- _____ Piling Certificate – **Original**
- _____ Elevation Certificate – **Original**
- _____ Pre-engineered Affidavit
- _____ Electrical Inspection Certificate – **Original**
- _____ Solder & Anti-Scald Certificate
- _____ Gas line certification forms- **Original**
- _____ Free of Obstruction Certification (V zone only) – **Original**
- _____ Affidavit of final cost
- _____ Affidavit of Energy Compliance Form-REScheck - **Original**
- _____ Survey w/Department of Health Approval – Stamped w/Green Ink or Orange Inspection Card- **Original**
- _____ 120 MPH Glass/Shutters with placement map
- _____ Address Numbers on the house required to be 4 inches tall by ½ inch thick stroke.
- _____ Stamped Sprinkler System Plans & Letter of Compliance of NFPA-13R – **Original**
- _____ Blower door test- 3 ACH or less
- _____ Duct leakage test if applicable
- _____ Propane permit- certification of completion from propane company
- _____ “As Built” Survey Reflecting the CEHA Line (ocean only) – 1 **Original**
 - Total square footage for all living spaces, decks & pools etc.
 - Lot coverage (maximum 20%)
 - Building height (lowest structural member to top of highest ridge maximum 32’)
 - Location of one required roadside corner monument (non-roadside any corner)
 - Location of gas tanksNote: Exterior lighting must comply with chapter 560-38.1 of the Village code, requiring shielded exterior lighting

Building Department Fees

Building Permit	-2% of first \$1,000,000 of construction cost PLUS
	- 1% of remaining construction cost OR
	-\$5.00 per square foot, whichever is greater PLUS
	-\$200 administrative fee
	-\$750 minimum all permits
	-\$500 permit renewal
Demolition	-Under 1,000 square feet \$500
	-Over 1,000 square feet \$750

AFFIDAVIT OF FINAL COST

STATE OF NEW YORK}

COUNTY OF SUFFOLK}ss:

_____, being duly sworn, deposes and says: the actual cost, to him/her
(owner, tenant, leaseholder)

for work:

Which permit No. _____ was issued to Contractor(s)_____

At the premises known as SCTM# 0907-____-____-____ and address:_____

To be the sum of \$_____

COST – The term “cost” means the actual value of all services, labor, materials, construction, equipment, rental and service equipment installations: but not including cost of such interior surface level finishing: including paint, wallpaper, fabric, furniture, lighting, and accessories to transform an existing room, without altering the structural layout or any architectural element.

SWORN TO ME THIS

Print name:_____

_____ DAY OF _____ 20_____

Notary Public

Signature of Owner, Tenant or Leaseholder

Office use only	
Additional fee due:_____	Yes _____ No
Amount:_____	Paid on:_____

Building Permit Application

Application is hereby made for a:

- () Building Permit
() Other _____

Permit No.: _____
Date Issued: _____
(By Building Inspector)

1. Name of Owner: _____ Location of property: _____ SCTM
No.: 0907- _____ - _____ - _____
Mailing address: _____
Home Phone: _____ Cell Phone: _____ Work phone: _____
2. Contractor Responsible for Proposed Work: _____
Copy of Contractor’s License: _____
Proof of Workers Compensation, Disability & Liability Insurance: _____ (copy)
Description of Proposed Work:
_____ New Building _____ Addition _____ Alteration _____ Repair

3. Size of Property: _____ x _____ = _____ sq. ft.
4. Percentage of lot occupied: _____ Total area: _____ (not to exceed 20%)

5. Accessory Structures:
Percentage of rear yard occupied: _____
Setback from rear lot line: _____
Setback from side yard line (a): _____
(b): _____
6. Are there any property covenants or conditions of special permits which would affect the development of this property: _____
If yes, please explain:

7. Name of Architect _____
Address: _____
Work Phone: _____ Cell Phone: _____
Email Address: _____

The owner grants the Building Inspector permission to enter the property at any reasonable hour, without prior notice to assure compliance with construction, zoning, or any Village Ordinance

****For demolition permits a letter of certification that gas and electric have been disconnected and a copy of the contractor’s license and insurance****

NO ACTION WILL BE TAKEN ON INCOMPLETE APPLICATIONS

Department of Building and Zoning
914 Dune Road/PO Box 728 Westhampton Beach, NY 11978
(631) 288-6571/ bldginsp@whdunes.gov

Building Inspector

STATE OF NEW YORK:

SS.:

COUNTY OF _____:

I, _____, being duly sworn deposes and says that he/she is
(PRINT) NAME OF INDIVIDUAL SIGNING APPLICATION
the applicant above named. He/She is the _____

OWNER OR AGENT/CONTRACTOR

of said owner or owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief; and that the work will be performed in the manner set forth this application, plans and specifications filed herewith. That in effect, are all required insurance, including workers compensation insurance, and that I presently possess a valid Village of West Hampton Dunes Contractor license, if applicable.

Name of Property Owner

Name of Contractor

Signature of Property Owner

Signature of Contractor

Sworn to before me this

Sworn to before me this

day of _____, 20____

day of _____, 20____

Notary Public

Notary Public

****For Official Use Only – To Be Completed by the Building Inspector of West Hampton Dunes****

The following action has been taken for this Building Permit Application:

Application has been APPROVED, Building Permit # _____ has been issued

Date Issued: _____, 20____

Application has been DENIED do to the following reasons:

Date Denied: _____, 20____

John McAlary, Building Inspector

AFFIDAVIT OF ENERGY COMPLIANCE, 3RD-PARTY TESTING

[illegible]

I, _____, being duly sworn and depose, state that the undersigned company, is BPI or HERS certified, has been hired to perform the required testing and documentation of energy compliance, as defined within the IRC for new constructions and 2017 Uniform Code Supplements, for the addition(s)/alteration(s)/conversion(s) to be constructed at:

Property address _____, West Hampton Dunes

Owners Name (printed) _____, Initials: _____,

Suffolk County Tax Map No.: 907-_____-_____-_____
Section Block Lot

Please be informed:

____ I have review the plans for construction

_____ I will oversee insulation installation and air sealing measures being performed by the contractor

_____ I will provide a Certified Blower Door Test and duct leakage test if applicable

_____ I will work with the homeowner and the contractor until compliance is achieved

Company name: _____

Company address: _____

Telephone number: _____ email address: _____

(Signature of Affiant)

Personally appeared before me the above named _____ personally known to me, who being

duly sworn, deposes and says that he/she executed the above instrument and that the statement and answers contained therein are true and correct to the best of his/her knowledge and belief.

Subscribed and sworn to before me this _____
day of _____, 20____

Effective January 1, 2015
Truss type, pre-engineered wood or timber construction in Residential Structures

Executive Law § 382-b, as added by Chapter 353 of the Laws of 2014, provides that any person utilizing truss type, pre-engineered wood or timber construction for the erection of any new residential structure, for any addition to an existing residential structure, or for any rehabilitation of an existing residential structure must (1) notify the local government that will issue the building permit that truss type, pre-engineered wood or timber construction is being utilized and (2) affix a sign or symbol to the electric box, if any, on the exterior of the structure indicating that truss type, pre-engineered wood or timber construction has been used. A new Part 1265 to Title 19 of the New York Codes, Rules and Regulations (NYCRR) has been adopted. The new Part 1265 prescribes (1) the form to be used to notify code enforcement officials that truss type, pre-engineered wood or timber construction is to be used in a residential structure; (2) the sign or symbol to be affixed to the exterior of a residential structure that has been constructed, added to or rehabilitated using truss type, pre-engineered wood or timber construction.

NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION, PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION

To: _____
[NAME OF AUTHORITY HAVING JURISDICTION]

Owner: _____
[INSERT NAME OF OWNER OF THE SUBJECT PROPERTY]

SubjectProperty:
[INSERT STREET NAME ADDRESS AND TAX MAP NUMBER, IF ANY, OF THE SUBJECT PROPERTY]

Please take notice that the (Check Applicable Line):

_____ New Residential Structure _____ Addition to Existing
Residential Structure
_____ Rehabilitation to Existing Residential Structure

To be constructed or performed at the subject property referenced above will utilize (check each applicable line):

☐ Truss Type Construction (TT)

☐ Pre-Engineered Wood Construction (PW)

☐ Timber Construction (TC)

In the following location(s) (check applicable line):

☐	Floor framing, including girders and beams (F)
☐	Roof framing (R)
☐	Floor framing and roof framing (FR)

Signature: _____ Date: _____

Capacity:

[OWNER, OWNER'S REPRESENTATIVE, AGENT]

SOLDER AND ANTI-SCALD CERTIFICATION

Date: _____
Building Permit #: _____
Owner: _____
Plumber: _____

I certify that the solder used in the water supply system contains less than 2/10 of 1% lead as per P2904.11 of the Residential Code of the State of New York and 605.15.3 of the Plumbing Code of the State of New York.

I also certify that I installed an anti-scald and/or thermal shock preventing device at all bathing and/or showering fixtures in conformance with Section P2903 of the Residential Code of New York State to mitigate the potential hazards due to shower valves that allowed surges of high temperature water to flow from the shower head.

Plumber or Homeowner Signature

Please Check One:
_____ I certify that I am the licensed plumber (License # _____) that installed all plumbing on the above-referenced premises.
_____ I certify that I am the homeowner and I personally installed all the plumbing on my above referenced premises.

Plumber or Homeowner Signature

Sworn to before me this _____ day of _____, 20____
_____ Notary Public

GAS SUPPLY LINE INSTALLATION CERTIFICATION

Date: _____
 Building Permit No. _____
 Owner: _____
 (Please Print)
 Plumber: _____
 (Please Print)

I certify that the Gas supply lines have been installed and tested in accordance with the National Fuel Code as per Section 406 of the Fuel Gas Code of New York State. Installation:

Residential Installation

Commercial Installation

Please Check Combustion Appliance Installed:

Heating Equipment _____ Hot Water Heater _____ Fireplace/Stove _____ Other: _____

Test Pressure

Test Duration: _____

Results: _____

I certify I am the licensed plumber (License # _____) that installed all Gas supply lines on the above referenced premises.

Plumbers Signature

Sworn to me this _____ day of _____, 20 _____
Notary Public, _____ County

Notary Public

OWNER’S DESIGNATION OF AGENT

The undersigned owner of the property located in the Village of West Hampton Dunes known as

(address)_____

SCTM#_____

(the “Property”) hereby appoints:

As the lawful agent of the undersigned in connection with all matters relating to the application for a building or other permit at this Property, including the right to complete and execute an Application for Building Department Permit. The undersigned owner agrees to be bound by all the statements and undertakings of such agent with the same effect as if made personally by the undersigned.

This designation may be revoked only by a written instrument delivered by the undersigned to the Building Department.

Name(s)_____

Signature(s)_____

Name(s)_____

Signature(s)_____

(All record owners must sign)

Certification – Free-of-Obstruction Requirements (Zone V)

I, the undersigned Registered Design Professional, hereby certify that I have reviewed the proposed design, plans, and site layout for this project and that the project complies with the “free-of-obstruction” requirements for construction in Coastal High Hazard Areas (Zone V), as described in FEMA/NFIP Technical Bulletin 5, the New York State Uniform Code, and all applicable regulations of the Village of West Hampton Dunes.

1. Site Elements Outside the Building Footprint:

All site elements, appurtenant structures, and construction features located outside the building footprint have been evaluated and are designed, detailed, or positioned so they will not create harmful obstructions or increase flood, wave, or debris forces on this structure or adjacent structures.

2. Elements Below the Required Elevation:

Any elements located below the required design elevation—including, where applicable, swimming pools and associated components—are designed or placed such that they:

- do not depend on human intervention to remain compliant.
- will not act as damaging debris during flooding; and
- where breakaway construction is used, can detach without creating debris capable of causing structural damage.

3. Maintenance of Free-of-Obstruction Conditions:

The design preserves the intent and requirements of NFIP Technical Bulletin 5 by ensuring that areas below and around the elevated structure remain free of permanent or semi-permanent features that could obstruct floodwaters, redirect wave action, or generate damaging debris.

I certify that these conclusions are based on my professional review of the project plans and applicable state and local regulations, including those of the Village of West Hampton Dunes.

Registered Design Professional Information/Seal

Name: _____

NYS License Number: _____

Signature: _____

Date: _____

