VILLAGE OF BAXTER ESTATES
315 MAIN STREET
PORT WASHINGTON, NY 11050
Telephone (516) 767-0096
Facsimile (516) 767-0058
Email: building@baxterestates.gov

VILLAGE OF BAXTER ESTATES
GUIDELINES FOR OBTAINING A BUILDING PERMIT

A building permit is required before any new construction or alteration work begins, whether interior or exterior. A building permit fee is charges based on the Village fee schedule.

- Two sets of stamped and signed plans by a professional architect or engineer are needed for the following: New construction; Interior alterations involving structural or plumbing changes; Additions; Exterior wooden decks 8 inches above adjoining grade; Central air conditioning, swimming pools, hot tubs, gazebos, tree houses, generators and retaining walls.
- Permission must be obtained by the Tree Commission to remove trees for space to build and a landscape plan must be submitted for the replacement of trees.
- All plans must contain the Architect's or Engineer's professional certification of compliance with the NYS Uniform Fire Prevention and Building Code and the NYS Energy Conservation Law.
- All plans should indicate zoning calculations providing the height of the structure, population density, building area (including floor area ratio) lot width requirements and front yard, side yard and rear yard requirements.
- A site plan should show existing structures, trees, proposed additions, basement height, and the elevations relative to adjacent curb heights.
- Window replacements if space is being reconfigured or a level 2 alteration require a plan showing all windows to be replaced and certification by the contractor that the windows conform to the NYS Fire prevention and Building Code and the NYS Energy Conservation Law.
- Provide a survey of the property showing all additions to date.
- Provide a copy of the contract between the property owner and the contractor.
- Provide a copy of the contractor's current Home Improvement License from Nassau County.
- Provide a certificate of insurance from the contractor showing coverage for General Liability, Workers Compensation and NYS Disability Insurance, listing the Village of Baxter Estates as the Certificate Holder and Additional Insured.
- Inspections are to be made by the Superintendent of Buildings as indicated on the schedule of inspections provided with the building permit.
- Work must commence within six months from the date of permit issuance. Permits are valid for one year.
- On completion of work, an Affidavit of Final Cost and Application for Certificate of Occupancy must be filed.
- Professional certification may be required to certify that all construction, alteration or repairs were completed in accordance with the approved plans and the building codes and energy conservation laws of NY State.
- An Underwriters Electrical Certificate is required for all new electrical work.
- A final survey showing all new additions and setbacks thereof must be submitted before the issuance of a Certificate of Occupancy.
- Any New Construction requires All requirements as above and in addition, a water availability letter from the Port Washington Water District is required.

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VILLAGE OF BAXTER ESTATES
BUILDING PERMIT APPLICATION CHECK LIST

Note: Deliver all of the following items *at the same time*. The Building Department cannot accept incomplete applications. Fees must be paid at time of submission.

_____One copy of the completed application, including notarized signatures, contractor's name, and license number.

_____The Nassau County Assessor's form filled in and signed by the applicant.

_____Shore Environmental Assessment Form

_____Two sets of complete drawings, disclosing all necessary details and specifications, signed, and sealed by a registered architect or a licensed engineer.

_____One copy of an original current survey of the property, prepared by a licensed surveyor, showing all structures on the property, and dimensions to the property lines and to each other.

_____Contractor's liability, property damage, and workers' compensation insurance certificates, listing the Village as certificate holder.
Liability Insurance – Accord form
Disability Insurance – DB120.1 form
Workers' Compensation – C-105.2 or U26.3 form
(If sole proprietor, can instead provide affidavit of exemption from workers' compensation insurance)

_____Building Permit fees

Demolition Permits

There are separate requirements for building permit applications for demolition. Please contact the Village Hall to obtain a listing of requirements to be submitted with the completed building permit application form.

New Construction

_____Water availability letter from PWWD

Village of Baxter Estates
315 Main Street
Port Washington, NY 11050
Tel: (516) 767-0096

Building Permit Application

Application No: _____

New Building ☐ Alteration ☐ Addition ☐ Demolition ☐ Structure ☐ Generator ☐ A/C ☐ Other ☐

Application must be submitted with a current property survey prepared by a licensed land surveyor, and two sets of plans showing in detail all proposed structural, mechanical, electrical and plumbing work; and a plot plan drawn to scale showing location, size, shape and dimensions of property, setbacks from property lines, size of existing and proposed building and/or additions.

The approved copy of plans must be kept on the job at all times, until a Certificate of Occupancy/Completion has been issued, and must be available to the Superintendent of Buildings for inspections. The Building Permit must be displayed at all times.

The applicant agrees to comply with all provisions of the Code of the Village of Baxter Estates and the International Building Code in effect as of this date. Work must be completed within one year from the date of permit issuance; or an extension must be obtained from the Building Department.

Address _____

Section_____ Block_____ Lot(s) _____ Building Zone _____

Description of Work _____

_____

_____

Estimated Cost of Construction $ _____ Area of Work (Square Feet) _____

Current Building Area _____ Proposed Building Area _____

Variance(s) required _____

Name and address of owner _____ Telephone _____

_____ Email _____

Name and address of architect _____ Telephone _____

_____ Email _____

Name and address of contractor _____ Telephone _____

_____ Email _____

Contact Name _____ Mobile _____

Nassau County Home Improvement License No. _____

FOR BUILDING DEPARTMENT USE	FOR OFFICE USE
Permit No.	Permit Fee _____ Certificate Fee _____ Amount Received _____ Date _____

STATE OF NEW YORK)
COUNTY OF NASSAU)

_____ being duly sworn says that he/she is the owner/agent of the property above described. That all statements made in this application are true to the best of his/her knowledge and belief.

I, the undersigned am authorized to execute this affidavit as follows: ( ) As sole owner of the above premises; ( ) Both on behalf of myself and on behalf of my spouse; ( ) Principal of Corporation, Firm or Company of Partnership

Sworn to before me this_____ day of _____, 20__. _____

(PRINT) Name of Applicant

_____ _____

Notary Signature of Applicant

I hereby authorize the Superintendent, Building Inspector and/or Code Enforcement Official to enter upon and inspect my property and structure(s) on the property prior to the Building Department rendering a determination with regard to this Building Permit application, and as may be necessary to administer the permit during construction.

OWNER'S AUTHORIZATION

I, _____ owner of the above described premises, situated within the

Incorporated Village of Baxter Estates, New York; hereby authorize _____

having a place of business at _____ to obtain a building permit and related permits in connection with the construction activities at the above referred location.

Sworn to before me this_____ day of _____, 20__. _____

(PRINT) Name of Owner

_____ _____

Notary Signature of Owner

As per Section 136-3 of the Code of the Village of Baxter Estates: "The erection, including excavating, demolition, alteration or repair, of any building" may ONLY occur between 8:30 a.m. and 6:00 p.m. on Monday through Friday, and 9:00 a.m. and 6:00 p.m. on Saturdays.

GENERAL CONTRACTOR'S AUTHORIZATION

STATE OF NEW YORK)
COUNTY OF NASSAU)

_____ being duly sworn says that he/she shall be the sole General Contractor of the construction project at the property above described and agrees to fully comply with all Village Laws, New York State Workers Compensation Insurance Laws and the International Building Codes; and further, shall be responsible for compliance by all subcontractors and construction workers at this property throughout the course of construction.

_____ _____

(PRINT) Name of General Contractor's Business (PRINT) Name of General Contractor

That all statements made in this application are true to the best of his/her knowledge and belief.

Sworn to before me this_____ day of _____, 20__.

_____ _____

Notary Signature of Applicant

Agency Use Only [If applicable]

Project:	
Date:	

Short Environmental Assessment Form
Part 2 - Impact Assessment

Part 2 is to be completed by the Lead Agency.
Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	**Moderate to large impact may occur**
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	☐	☐
2. Will the proposed action result in a change in the use or intensity of use of land?	☐	☐
3. Will the proposed action impair the character or quality of the existing community?	☐	☐
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	☐	☐
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	☐	☐
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	☐	☐
7. Will the proposed action impact existing: a. public / private water supplies?	☐	☐
b. public / private wastewater treatment utilities?	☐	☐
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	☐	☐
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	☐	☐
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	☐	☐
11. Will the proposed action create a hazard to environmental resources or human health?	☐	☐
12. Is the potentially affected disadvantaged community identified as having comparatively higher burdens or vulnerabilities by the Disadvantaged Community Assessment Tool?	☐	☐
13. Will the proposed action cause or increase a pollution burden within a disadvantaged community?	☐	☐

Agency Use Only [If applicable]

Project:

Date:

Short Environmental Assessment FormPart 3 Determination of Significance

For every question in Part 2 that was answered "moderate to large impact may occur," or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation,that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation,that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer in Lead Agency
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

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VILLAGE OF BAXTER ESTATES
HOMEOWNER AUTHORIZATION

I _____hereby authorize the members of the Board of Zoning Appeals, the members of the Planning Board, the Village of Baxter Estates Superintendent of Buildings, and/or his/her designees, and the Village Attorney and his/her designees to enter upon and inspect my property described above prior to such Village Board rendering a determination with regard to the pending application to such Board relating to my property.

I understand that my permit will expire one (1) year after issuance if a permit extension is needed, it is my responsibility to request said extension 30 days prior to the permit expiration. I acknowledge that it is my responsibility to ensure the permit is properly closed out. I understand that a permit extension is valid for a nine (9) month period and cannot be renewed further. I understand that if more time is required to complete the work, that I will have to apply for a new permit.

_____
Signature

OWNER _____

ADDRESS_____

_____

PHONE Office _____Fax_____

APPLICANT _____

ADDRESS_____

_____

PHONE Office _____Fax_____

ATTORNEY _____

ADDRESS_____

_____

PHONE Office _____Fax_____

ARCHITECT _____

ADDRESS_____

_____

PHONE Office _____Fax_____

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VILLAGE OF BAXTER ESTATES
CONSTRUCTION SITE MAINTENANCE REGULATIONS AND GUIDELINES

Suitable fencing, landscaping and/or other appropriate screening along the property line facing the road or along a contiguous property may be required in order to mitigate the impact of the construction site and activities upon neighboring properties, traffic, and roadways.

Dumpsters and other containers for rubble or debris must be covered at the end of each workday. (Must have an approved VBE Dumpster Permit.)

Rubble and debris must be removed from dumpsters or other similar containers at least once every 30 days.

All apparatus, materials, supplies, and equipment utilized at a construction site shall be stored and maintained in a neat and orderly fashion.

The construction site shall be cleaned frequently of all refuse, rubbish, scrap materials and debris caused by the construction site operation, so that the site shall always present a neat and orderly appearance.

All reasonable precautions and measures shall be taken to ensure that there is no run-off of water, sand, dirt or other materials onto roadways or adjoining properties.

With regard to silt fences, hay bales or other erosion-control substances, such structures shall be regularly maintained and inspected, and any sediment which may form behind such structures shall be removed on at least a weekly basis.

The construction, erection, demolition, alteration or repair of any building, is only permitted Monday to Friday from 8:30AM to 6:00PM, and on Saturday from 9:00AM to 6:00PM.

These regulations and guidelines are not intended to limit any conditions the Zoning Board of Appeals may impose and shall be construed to be in addition or complementary to any conditions imposed by the Zoning Board of Appeals in its granting of either a site plan approval or variance.

BUILDING PERMIT
RESIDENTIAL PROPERTY
DEPARTMENT OF ASSESSMENT
NASSAU COUNTY
240 Old Country Road, Mineola, NY 11501

TOWN - CITY - VILLAGE OF: _____

NBHD# (ASSESSOR USE ONLY)

DATE REC'D (ASSESSOR USE ONLY)

SECTION	BLOCK	LOT (S)	SCH DIST #	PERMIT #	SPECIFIC ZONING DESIGNATION

Location of Building — N.E.S.W. SIDE OF (OR CORNER OF)

N.E.S.W. SIDE OF

ADDRESS OF PROPERTY

CITY, TOWN, VILLAGE — ZIP

ESTIMATED COST OF CONSTRUCTION:

Check one

☐ OWNER OR ☐ LESSEE

NAME OF BUSINESS

CONTACT PERSON/OWNER

ADDRESS

CITY, STATE, ZIP

PHONE

EMAIL

WORK MUST BEGIN BY

PERMIT EXP DATE

LOT SIZE S.F.

BLDGS ON LOT

PRINCIPLE TYPE OF CONSTRUCTION

☐ STEEL ☐ MASONRY ☐ FRAME

IF YOU WISH TO GROUP OR APPORTION LOTS

PLEASE CALL 516-571-1500 FOR FURTHER INFORMATION

DETAILED DESCRIPTION OF WORK (PLEASE PRINT CLEARLY)

***INCLUDING, BUT NOT LIMITED TO: LOCATION, TYPE AND DIMENSIONS OF IMPROVEMENT**

PERMIT TYPE - CHECK ALL ITEMS THAT APPLY

- ☐ NEW BUILDING
- ☐ ADDITION (CHANGE IN S.F.)
- ☐ DEMOLITION
- ☐ ALTERATION (NO CHANGE IN S.F.)
- ☐ MAINTAIN (PRE-EXISTING)
- ☐ RECONSTRUCTION
- ☐ DECK, TERRACE, PORCH, CARPORT
- ☐ DORMERS
- ☐ OTHER _____
- ☐ FIRE DAMAGE
- ☐ GARAGE/ OUT BUILDING
- ☐ HVAC
- ☐ PLUMBING
- ☐ RELOCATION
- ☐ REPLACEMENT
- ☐ SWIMMING POOL
- ☐ TENNIS COURT
- ☐ CHANGE IN USE

DOES RESIDENCE HAVE THE FOLLOWING

CENTRAL AIR YES ☐ NO ☐

FINISHED ATTIC YES ☐ NO ☐

BASEMENT FINISH

1/4 ☐ 1/2 ☐ 3/4 ☐ FULL ☐

PROPOSED TOTAL PLUMBING FIXTURES

FLOOR/FIXTURE	BASEMENT	1ST FLOOR	2ND FLOOR	3RD FLOOR
BATHROOM SINK				
TOILET				
BATHTUB				
STALL SHOWER				
BIDET				
KITCHEN SINK				
WET BAR				

NUMBER OF EXISTING AND PROPOSED BATHS

NUMBER OF EXISTING FULL BATHS		NUMBER OF PROPOSED FULL BATHS	
NUMBER OF EXISTING HALF BATHS		NUMBER OF PROPOSED HALF BATHS	

HALF BATH EQUALS TWO FIXTURES, FULL BATH EQUALS THREE OR MORE FIXTURES

NEW C/O NEEDED	YES ☐	NO ☐
VARIANCE OBTAINED	YES ☐	NO ☐
CONSTRUCTION/RENOVATION IN EXCESS OF 50%	YES ☐	NO ☐
SURVEY ENCLOSED	YES ☐	NO ☐

PLEASE ATTACH ALL PERMITS & SURVEY IF AVAILABLE

DATE OF GRANTING OF PERMIT _____

_____
Signature of Applicant/Contact Person - Sign & Print

SEPARATE APPLICATION SHALL BE MADE FOR EACH BUILDING

_____
Address of Applicant/Contact Person Telephone

FIELD REPORT ON REVERSE

Rev 08

TOWN
SCHOOL DISTRICT
SECTION
BLOCK
LOT(S)
CA # OR BLDG #
UNIT #
DATE