

TOWN OF SOUTHEAST BUILDING DEPARTMENT
One Main Street Brewster, NY 10509 845-279-2123

COMMERCIAL BUILDING PERMIT APPLICATION

Building Permit # _____	Date Application _____
Received _____	
Permit Issue Date _____	Approved by Zoning _____, Bldg _____
(office use only)	

Property Address: _____
Tax Parcel Id: _____ Zoning District: _____

Property Owner Name: _____ Phone(s): _____
Street Address: _____
City _____ State _____ Zip Code _____ email _____

Tenant Info:
Business Name _____ Phone(s): _____
Business Owner _____ Phone(s): _____
Owner's Address: Street _____
City _____ State _____ Zip Code _____ email _____

Builder Info: Name _____ Phone(s): _____
Address: Street _____ City _____
State _____ Zip Code _____ email _____
Putnam County License # _____

Architect/Eng Info: Name _____ Phone(s): _____
Address: Street _____
City _____ State _____ Zip Code _____ email _____

Plumbing Contractor: Name _____ Phone(s): _____
Address: Street _____ City _____
State _____ Zip Code _____ email _____
Putnam County License # _____

HVAC Contractor: Name _____ Phone(s): _____
Address: Street _____ City _____
State _____ Zip Code _____ email _____
Putnam County License # _____

PROJECT

DESCRIPTION _____

Estimated cost of construction _____ Height of Building _____ ft.
Stories _____ Sq. ft. of Improvement _____ % of lot coverage _____
(A final cost affidavit may be required at the end of the project before a Certificate is issued.)

TENT:

Event for which tent is required: _____
Event Start Date _____ End Date _____ Sq. Ft. _____

Project Setbacks

Front _____ ft. Rear _____ ft. Left Side _____ ft. Right side _____ ft.

Any applicable items must have applicable Town/County/State approvals:

Utilities: Town Water ☐ or Sewer ☐ Private Septic ☐ Well ☐
Road: Town ☐ County ☐ State ☐ Private ☐

*****Use and Occupancy for which the work is proposed must be completed below and must be accompanied by required construction documents.**

Occupancy Classification

Assembly ☐ Business ☐ Educational ☐ Factory Industrial ☐ High Hazard ☐

Institutional ☐ Mercantile ☐ Residential ☐ Storage ☐

Construction Classification

Type I ☐
Type II ☐
Type III ☐
Type IV ☐
Type V ☐

*****WHAT IS THE AREA OF DISTURBANCE IN SQUARE FEET _____*****

Any land disturbance greater than 5,000 sq. ft. requires an *MS-4 permit*. Failure to comply with this requirement will result in a STOP WORK ORDER and NOTICE OF VIOLATION.

New Construction , Addition to Existing Structure or Change of Use

Application shall include:

- One copy of Planning Board approved site plan
- For Both Proposed and Existing Projects - Two copies of a Plot Plan, Site Plan or Survey drawn to scale with the following Information:
 - (1) The area of the lot and the dimensions and angles or bearings of all boundaries of the lot and of any easements, encroachment lines, building lines and open space reservations upon the lot.
 - (2) The location, setbacks, dimensions, height, use, floor area and ground coverage of all buildings and other structures.
 - (3) The location, number, area and dimensions of off-street parking and loading spaces, any construction, including paved areas proposed in connection therewith, and the means of access to such spaces.
 - (4) The location of any water supply well site and any private sewage disposal system.
 - (5) The location of watercourses, water bodies and wetlands.
 - (6) The location, area and dimensions of any signs.
 - (7) Such additional information as may be necessary to determine compliance with the provisions of this chapter.
- One copy of detailed drawings stamped and certified by a Professional Engineer or NYS Licensed Architect- ***The plans or specifications sealed and signed by the registered design professional shall also include a written statement that to the best of his or her knowledge, belief and professional judgement, such plans or specifications are in compliance with the Energy Code.***
- One copy of Putnam County Department of Health approval for septic system
- Workers Compensation, Disability and Liability Insurance Documentation; acceptable workers comp forms include CE-200, C105.2 (9/07) and U26.3. Both with the Town of Southeast listed as certificate holder and additionally insured.

Existing Structure-Tenant Space

Application shall include:

- One set of detailed drawings including type of tenant occupancy, type of construction, and proposed location of tenant space(s).
- Owners are advised that permit applications must be filed whenever a new tenant proposes to occupy a vacated space.

The Owner/Applicant agrees to comply with all applicable laws of this jurisdiction, adhere to the plans and specifications submitted and permit Building Department personnel to perform required inspections.

Applicant's Name _____ (attach owner consent form)
Owner/Applicant Signature: _____ Date _____

Application Fees

Building Fee (based on estimated construction cost)	_____
Plumbing Installation Permit Fee	_____
HVAC Installation Permit Fee	_____
Gas Connection Permit Fee	_____
Equipment Installation Permit Fee	_____
Sprinkler Installation Permit Fee	_____
Certificate of Occupancy Fees	_____
 Total Fees (check or money order payable to Town of Southeast)	 _____

Town of Southeast Building Department

Certificate of Occupancy Requirements

Prior to the issuance of a Certificate of Occupancy, the applicant shall schedule the following inspections for approval by the building department:

INSPECTIONS: Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approval of the code official. The permit holder shall notify the code official when work has progressed to the point where the next required inspection can be made. Any portions of work that do not comply shall be corrected and such portion shall not be covered or concealed until authorized by the code official.

INSPECTIONS

___ Board of Health Approval	___ Rough Plumbing
___ Driveway	___ Rough Electrical
___ Staking	___ Fire Caulk/Block
___ Footings	___ Insulation
___ Foundation	___ HVAC/Ductwork
___ Footing Drains	___ Final Plumbing
___ Framing	___ Final Electric
___ Tyvek	___ Final Driveway
___ Other: _____	___ Final/C of O

Following approval of the required inspections, submittal of the following documentation will be required to obtain the Certificate of Occupancy:

- 1) The building shall not be occupied until approved. The final inspection shall include verification of the installation and proper operation of all required building controls, and documentation verifying associated with required building commissioning.
- 2) HVAC Systems certification. A registered design professional shall provide a compliance report verifying the efficiency and proper operation of the HVAC system and shall indicate that the HVAC calibration and functionality test have been performed and all such systems are working as designed.
- 3) The code official is permitted to accept inspection of and reports by approved inspection agencies.
- 4) As-built construction plans required for construction not built in accordance with approved plans; submit in advance of application for CO as review of the plans is required.
- 5) As-built survey
- 6) As-built septic system including compliance from Putnam county Department of Health for septic and septic guarantee.
- 7) Approval of Driveway/Curb Cut Installation by Town, county, or state
- 8) Signed and notarized affidavit as to final cost of construction
- 9) Electrical Underwriters Certificate
- 10) Certification for Plumbing, HVAC, Gas, and Sprinkler Installations, Notarized
- 11) Alarm Permit Application submitted to Fire Inspector
- 12) Other _____

10/20/2025

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Owner Consent Form

- Completion of this form is required when the applicant is not the property owner

Parcel Id # _____ Address _____

Name of Applicant: _____ Phone _____

Project Description: _____

I/We, _____, owners(s) of the above property
hereby give my/our permission to _____
(applicant name) to submit the above identified building permit application on my/our behalf and to
represent me/us in all proceedings concerning the referenced application.

Owner (s) Signature(s) Date _____

Sworn to before me this _____ day of
_____, _____.

Notary Public