

**TOWN OF SOUTHEAST BUILDING DEPARTMENT**  
**One Main Street Brewster, NY 10509 845-279-2123, fax 845-279-2971**

**RESIDENTIAL BUILDING PERMIT APPLICATION**

Building Permit # _____ Date Application Received _____ Permit Issue Date _____ Approved by Zoning _____, Bldg _____ <b>(office use only)</b>
--

**Property Address:** \_\_\_\_\_  
Tax Parcel Id: \_\_\_\_\_ Zoning District: \_\_\_\_\_

**Property Owner Name:** \_\_\_\_\_ Phone(s): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Builder Info:**  
Name \_\_\_\_\_ Phone(s): \_\_\_\_\_  
Address: Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Putnam County License # \_\_\_\_\_

**Architect/Eng Info:**  
Name \_\_\_\_\_ Phone(s): \_\_\_\_\_  
Address: Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Plumbing Contractor:**  
Name \_\_\_\_\_ Phone(s): \_\_\_\_\_  
Address: Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Putnam County License # \_\_\_\_\_

**HVAC Contractor:**  
Name \_\_\_\_\_ Phone(s): \_\_\_\_\_  
Address: Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Putnam County License # \_\_\_\_\_

**PROJECT DESCRIPTION** \_\_\_\_\_

Please Check all applicable: (any items checked must have applicable Town/County/State approvals)

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

**New Construction**

Sq. ft. of living area including basement:\_\_\_\_\_ Sq. Ft. of attached garages:\_\_\_\_\_
Sq. Ft. of attached decks:\_\_\_\_\_ #of Bedrooms:\_\_\_\_\_ # of Bathrooms:\_\_\_\_\_
Height of Building:\_\_\_\_\_ft. Stories:\_\_\_\_\_
Percent Lot Coverage:\_\_\_\_\_ Estimated Cost:\_\_\_\_\_

**Renovation/Addition**

Sq. Ft. of living area including basement:\_\_\_\_\_Sq. ft. of attached garages:\_\_\_\_\_
Sq. Ft. of attached decks:\_\_\_\_\_ # of Bedrooms:\_\_\_\_\_ # of Bathrooms:\_\_\_\_\_
Height of Building:\_\_\_\_\_ft. Stories:\_\_\_\_\_
Percent Lot Coverage:\_\_\_\_\_Estimated Cost:\_\_\_\_\_

If an addition, does addition increase the total number of bedrooms? Yes\_\_\_ No\_\_\_ If
yes, an approval letter from the Putnam County Department of Health will be required.

**Garage**

Attached\_\_\_\_\_ Detached\_\_\_\_\_ Size of Construction, sq. ft.\_\_\_\_\_# of Bays\_\_\_\_\_

**Deck**

Size of Construction, sq. ft.\_\_\_\_\_

**Shed**

Size of Construction, sq. ft.\_\_\_\_\_

**Swimming Pool**

In-Ground\_\_\_\_\_Above Ground\_\_\_\_\_ Size\_\_\_\_\_Construction/Heated\_\_\_\_\_

**Fence**

Size and
type\_\_\_\_\_Height\_\_\_\_\_Location\_\_\_\_\_

**Project Setbacks**

Front\_\_\_\_\_ft. Rear\_\_\_\_\_ft. Left Side\_\_\_\_\_ft. Right side\_\_\_\_\_ft.

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 \_\_\_\_\_
Equipment Installation Permit Fee \_\_\_\_\_
Gas Connection Permit Fee \_\_\_\_\_
Certificate of Occupancy Fees \_\_\_\_\_
Total Fees (check or money order payable to Town of Southeast) \_\_\_\_\_

**Town of Southeast Building Department  
Submittal Requirements for:**

**RESIDENTIAL BUILDING PERMITS**

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_  
Building 911 Address \_\_\_\_\_  
Parcel ID/Tax Map # \_\_\_\_\_

Your permit application will not be reviewed until your submittal is complete. Your complete submittal will include the following documents, as applicable:

1. Building Permit Application Completed and Signed
2. Putnam County Licenses are required for home improvement contractors, plumbers, heating and cooling contractors, electricians, and for propane and natural gas.
3. Owner consent Form Signed when Applicant is Not the Property Owner
4. Site Plan with boundary set backs for Proposed construction
5. Putnam County approval for installation of sanitary disposal system and/or water well
6. Driveway permit (Town, county, or state)
7. Workers Compensation and Liability Insurance; acceptable workers comp forms include CE-200, C105.2 (9/07) and U26.3. BP-1 (9-07) not accepted for New construction as house is not yet owner occupied and C of O has not been issued.
8. Stamped plans for construction valued over \$10,000; otherwise, submit a detailed sketch plan with proposed material list. For new construction and additions, plans must have original stamp/signature from Putnam County Department of Health and ARB stamp/signature.
9. Completed 911 Address Verification Form
10. Architectural Review Board Approval
11. Copy of P. C. License for all contractors
12. Application Fee (Check or Money Order Only) payable to the Town of Southeast

**CHECK LIST FOR BUILDING PERMIT APPLICATION SUBMITTAL**

**SITE PLAN**

- \_\_\_ Drawn to scale with scale indicated (1"=20' for larger)
- \_\_\_ North arrow
- \_\_\_ Lot dimensions—all sides
- \_\_\_ Size and location of any easements or right-of-ways
- \_\_\_ Names and locations of all adjacent streets
- \_\_\_ Locations of proposed and existing structures
- \_\_\_ Setback dimensions: front, rear, and all sides
- \_\_\_ Outside building dimensions and distances between buildings on building site
- \_\_\_ Driveways, exterior stairs, landings, patios, and decks
- \_\_\_ Location, type, and elevation of any retaining walls
- \_\_\_ Proposed or existing septic system

**BUILDING PLANS (two complete sets required)**

- \_\_\_ Drawn to scale with scale indicated (1/4"=1' or larger)
- \_\_\_ Cross sections providing accurate representation of materials for the structure.

- \_\_\_ Floor plan layouts and use of all rooms including basement
- \_\_\_ Complete dimensions of all rooms, decks, porches, landings, stairs.
- \_\_\_ Note bearing walls, column locations, and cantilevers.
- \_\_\_ Provide Ceiling heights on all levels.
- \_\_\_ Provide Sizes and types of doors and windows (showing required safety glazing)
- \_\_\_ Light, ventilation and egress calculations for all rooms
- \_\_\_ Fire separation between house and garage
- \_\_\_ Stairway landings, rise, run, handrail, and headroom height for all interior and exterior stairs
- \_\_\_ Building elevations with finish grade line on all sides (exterior views)
- \_\_\_ Attic and crawl space ventilation and access
- \_\_\_ Typical footing size, depth, and reinforcement
- \_\_\_ Foundation wall height, thickness, and reinforcement. Sill and anchor bolt spec.
- \_\_\_ Wall materials, stud size and spacing, wall sheathing, interior finish, weather barrier and exterior finish.
- \_\_\_ Floor framing, sheathing, bridging, and solid blocking.
- \_\_\_ Roof framing details (rafter size, spacing, spans and/or truss layout/drawings), sheathing, and finish.
- \_\_\_ Size and material of all beams, headers, and columns
- \_\_\_ Grade and species of lumber
- \_\_\_ Joist size, spacing, and spans (engineered joists and/or beams require submittal of manufacturers specs)
- \_\_\_ Provide smoke detector and carbon monoxide detector locations

The construction drawings prepared by the design professional represent his/her responsibility for the structural integrity of the building and it is the responsibility of the contractor/builder to erect the structure in accordance with the drawings. If field conditions dictate that changes are necessary while construction is in progress, the contractor must notify both the design professional and the Building Department.

Furthermore, it shall be the responsibility of the contractor to furnish the Building Department with certification from the design professional of the changes. Contractors are advised that no Certificate of Occupancy will be issued until the Building Department receives the required certification.

**PLUMBING DETAILS (a separate plumbing permit will be required)**

- \_\_\_ Location of all plumbing fixtures including layout for future fixtures
- \_\_\_ Provide waste line diagram. Accurate, neatly drawn pencil or engineered submittals.

**MECHANICAL DETAILS (a separate heating permit will be required)**

- \_\_\_ Boiler or furnace location
- \_\_\_ Combustion Air description/location

## 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

- |   |   |
|---|---|
| <input type="checkbox"/> Board of Health Approval | <input type="checkbox"/> Rough Plumbing   |
| <input type="checkbox"/> Driveway                 | <input type="checkbox"/> Rough Electrical |
| <input type="checkbox"/> Staking                  | <input type="checkbox"/> Fire Caulk/Block |
| <input type="checkbox"/> Footings                 | <input type="checkbox"/> Insulation       |
| <input type="checkbox"/> Foundation               | <input type="checkbox"/> HVAC/Ductwork    |
| <input type="checkbox"/> Footing Drains           | <input type="checkbox"/> Final Plumbing   |
| <input type="checkbox"/> Framing                  | <input type="checkbox"/> Final Electric   |
| <input type="checkbox"/> Tyvek                    | <input type="checkbox"/> Final Driveway   |
| <input type="checkbox"/> Other: _____             | <input type="checkbox"/> 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. 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.
2. As-built survey
3. As-built septic system including compliance from Putnam county Department of Health for septic and septic guarantee.
4. Approval of Driveway/Curb Cut Installation by Town, county, or state
5. Signed and notarized affidavit as to final cost of construction
6. Electrical Underwriters Certificate
7. Fee for Residential Refuse District (new construction)
8. Certification for Plumbing, HVAC, Gas, and Sprinkler Installations, Notarized
9. Alarm Permit Application submitted to Fire Inspector
10. Other \_\_\_\_\_

Town of Southeast Building Department  
One Main Street, Brewster, NY 10509 845-279-2123, fax-845-279-2971

Owner Consent Form

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

Parcel Id # \_\_\_\_\_ Permit # \_\_\_\_\_

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.

\_\_\_\_\_ Date \_\_\_\_\_  
Owner (s) Signature(s)

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public