

Building Permit Application v7/19/2024 RJW

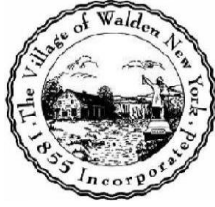
Date: _____

Permit Fee: _____

Reviewed by: _____ Date: _____

Date notified: _____

- Approved
- Revisions required: _____
- Denied reason: _____



Project Location:

_____ (No.) _____ (Street)

Project Type:

- New Construction
- Addition
- Alteration
- Repair/Replacement
- Demolition
- Deck/Porch Covered Uncovered
- Pool/Spa/Hot Tub
- Solar
- HVAC
- Fence
- Electrical
- Accessory Structure *(sheds, etc.)*
- Sign
- Roof Replacement Recover *Letter from engineer required*
- Other - Specify _____

Proposed Use:

- One Family Dwelling
- Multi-Family Dwelling - # of Units _____
- Garage Attached Detached
- Carport
- Other - Specify _____

Total Cost of Project: _____

Detail description of proposed project:

Details of existing dwelling

# of Stories _____	Exterior Dimensions: _____ X _____		_____ L _____ W
# Bathrooms: <i>(total)</i> _____	First fl. - sq.ft.: _____		
Full: _____	Second fl. - sq.ft.: _____		
half: _____	Third fl. - sq.ft.: _____		
# Bedrooms: _____	<input type="checkbox"/> Finished Basement - sq.ft.: _____	<input type="checkbox"/> Habitable	<input type="checkbox"/> Storage Only
# Kitchens: _____	<input type="checkbox"/> Finished Attic - sq.ft.: _____	<input type="checkbox"/> Habitable	<input type="checkbox"/> Storage Only
Total # rooms: _____			
Heating fuel type: _____	Gas / Oil / Electric / Other - Specify _____		

Permit No. _____
Project Address: _____
Date Issued _____
Exp. Date _____

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Property Owner:

Name(s) _____

Address _____
Street City State Zip Code

Phone # () Alt Phone # ()

email: _____

Applicant Same as property Owner Contractor

Name(s) _____

Address _____
Street City State Zip Code

Phone # () Alt Phone # ()

email: _____

* Electrical contractors must be licensed in **Orange County**. Electrician's License # _____

Insurance Requirements

Contractors:

1. Workers' Compensation (C-105.2) or Exemption form (CE-200) (Acord forms are not accepted)
2. General Liability Insurance Certificate (minimum limit \$1 Million) listing Village of Walden as "Additional Insured".
Liability Insurance must be primary and noncontributory, and include a waiver of subrogation.

Homeowners:

1. Homemowner's insurance Declarations page
2. Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance (BP-1)

AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNER'S BEHALF

I hereby authorize the following person(s) to act as my agent(s) to apply for, sign, and file the documents necessary to obtain a Building Permit for my project. Project Location or Address: _____

Scope of Construction Project (Description of Work): _____

Print Name of Authorized Agent: _____ Phone: () _____

Address of Authorized Agent: _____

I declare under penalty of perjury that I am the property owner for the address listed above and I personally filled out the above information and certify its accuracy.

Property Owner's Signature: _____ Date: _____

State of New York)
) s.s.
County of _____)
Sworn to before me this	
_____ day of _____, 20_____	

Notary Public	

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Building Department Use:			
Construction Type: I II III IV V	<input type="checkbox"/> SFR <input type="checkbox"/> MFR <input type="checkbox"/> Other _____	Tax Map ID: _____ (S-B-L)	
Lot size: X _____ _____		Zoning District: _____	Subdivision: _____
L _____ W _____ S.F. _____	<input type="checkbox"/> Corner Lot <input type="checkbox"/> Through Lot <input type="checkbox"/> Interior Lot <input type="checkbox"/> other _____	<input type="checkbox"/> 2020 RBCNYS _____ <input type="checkbox"/> 2020 BCNYS _____ <input type="checkbox"/> 2020 FCNYS _____ <input type="checkbox"/> 2020 ECCCNYS _____	<input type="checkbox"/> Zoning Code _____ <input type="checkbox"/> other _____
Setbacks: Front _____ Rear _____ Side _____			

Please draw a footprint (exterior dimensions) of your proposed construction as well as existing structures. It must show all distances from the property lines and the distance from all structures. A drawing of the proposed construction must be provided on a separate sheet of paper.

