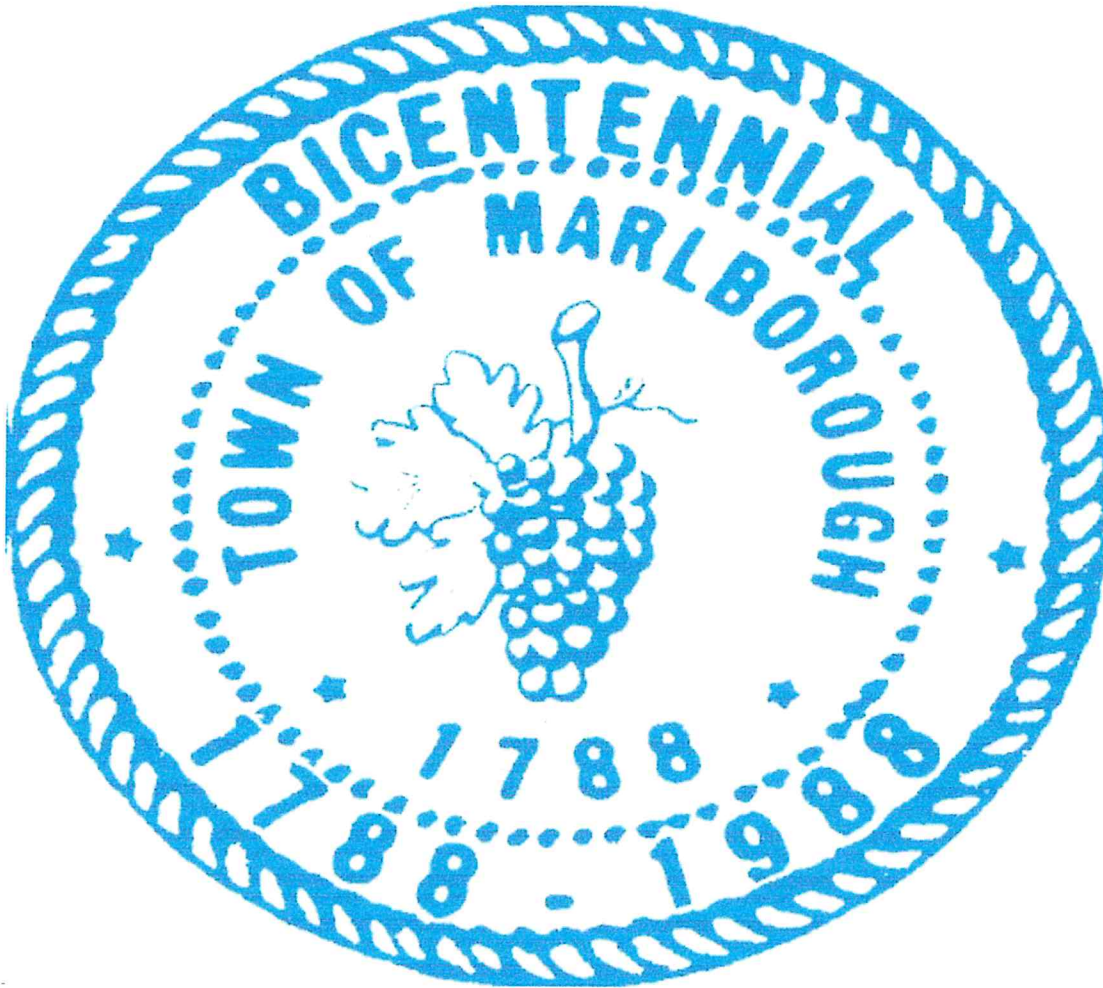


TOWN OF MARLBOROUGH

COMMERCIAL BUILDING PERMIT

21 MILTON TURNPIKE MILTON NY 12547

(845) 795-2406 Extension #7



THOMAS CORCORAN JR

Building Inspector

Code Enforcement Officer

Fire Inspector

tcorcoran@marlboroughny.us

PENNY CASHMAN

Building Department Secretary

Zoning Board Secretary

pcashman@marlboroughny.us

TOWN OF MARLBOROUGH

COMMERCIAL BUILDING PERMIT

21 Milton Turnpike Milton, N.Y. 12547

(845) 795-2406 Ext. # 7

APPLICATION FOR BUILDING PERMIT WILL TAKE APPROXIMATELY 10 DAYS OR MORE FOR PROCESSING.
NON-SUBMITTALL OF ALL REQUIRED FORMS AND/OR INFORMATION WILL DELAY PROCESSING.

APPLICATIONS WILL NOT BE ACCEPTED UNLESS THE FOLLOWING CHECKLIST IS COMPLETED.

1. HAVE YOU COMPLETELY FILLED OUT YOUR APPLICATION AND SIGNED IN ALL NECESSARY SPACES. YES ___ NO ___
2. HAVE YOU SUBMITTED PROOF OF LAND OWNERSHIP? YES ___ NO ___
3. HAVE YOU SUBMITTED BOARD-OF-HEALTH APPROVALS AND/OR TOWN OF MARLBORO WATER AND SEWER PERMITS. YES ___ NO ___
4. HAVE YOU SUBMITTED COMPENSATION AND LIABILITIES INSURANCE OR NYS COMP WAIVER. WAIVER MUST BE COMPLETED AND RETURNED BEFORE PERMIT RELEASED. YES ___ NO ___
5. HAVE YOU SUBMITTED A CURRENT SURVEY OF THE PROPERTY OR COMPLETED THE PLOT PLAN PAGE IF A SURVEY IS NOT AVAILABLE. YES ___ NO ___
6. HAVE YOU SUBMITTED A LIST OF SUB-CONTRACTORS WITH NAMES, ADDRESSES AND PHONE NUMBERS. YES ___ NO ___
7. AN ENERGY CODE SHEET MUST BE SUBMITTED. YES ___ NO ___
8. THE REQUIRED FEE PAYABLE TO THE "TOWN OF MARLBOROUGH". YES ___ NO ___
9. HAS THE SITE INSPECTION BEEN DISCUSSED WITH THE BUILDING INSPECTOR? YES ___ NO ___
10. MANUFACTURED HOMES/MODULARS MUST BE NYS APPROVED AND HAVE A HUD STAMP WITH COMMISSIONER SIGNATURE. DATE ON THIS STAMP CANNOT BE MORE THAN 5 YEARS OLD. FOUNDATION PLANS MUST HAVE AN ARCHITECT OR ENGINEER SEAL WITH SIGNATURE. NAME OF MANUFATURER, MODULAR NUMBER AND MODEL MUST BE SUPPLIED. YES ___ NO ___
11. TWO SETS OF PLANS MUST BE SUBMITTED FOR ALL CONSTRUCTION. THESE PLANS MUST HAVE ENGINEER AND/OR ARCHITECT STAMP. UNDER NYS LAW SECTION 7307 AND 7209, PLANS REQUIRE THE SEAL AND SIGNATURE OF LICENSED ENGINEER OR ARCHITECT. YES ___ NO ___
12. SUBMISSION OF STORMWATER POLLUTION PREVENTION PLAN (SWPPP) YES ___ NO ___

CERTIFICATION BY APPLICANT

I HEREBY CERTIFY THAT I HAVE READ THE INSTRUCTIONS AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES COVERING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Applicants Name _____ Date _____

Applicants Signature _____

Town of Marborough

Commercial Building Permit

***THIS BUILDING PERMIT APPLICATION PERTAINS ONLY TO THE CONSTRUCTION
BEING PERFORMED AT THIS TIME***

PLEASE INCLUDE THE FOLLOWING WITH THIS APPLICATION

1. COPY OF DEED (PROOF OF OWNERSHIP)
2. COPY OF CURRENT TAX BILL (PROPERTY OR SCHOOL)
3. TWO COPIES OF CONSTRUCTION PLANS (ENGINEER STAMPED)
4. COMPLETED AND SIGNED APPLICATION
5. PROOF OF INSURANCE (LIABILITY & WORKERS COMPENSATION) WITH THE TOWN OF MARLBOROUGH LISTED AS THE ADDITIONAL INSURED / POLICY HOLDER
6. WATER AND SEWER PERMIT (ULSTER COUNTY BOARD OF HEALTH)
7. STORM WATER PREVENTION PLAN (SWPPP)
8. CURRENT SURVEY OR PLOT PLAN
9. HIGHWAY ROAD CUT PERMIT (TOWN, COUNTY OR STATE)
10. SITE PLAN APPROVAL
11. SURVEY MAP WITH ALL BUILDING AND SETBACKS PLOTTED

** THIS APPLICATION **MUST BE COMPLETED IN FULL**. IT IS NOT OUR RESPONSIBILITY TO FILL IN ANY BLANKS. ANY QUESTIONS PLEASE CONTACT OUR OFFICE.*

FAILURE TO COMPLETE APPLICATION IN FULL WILL DELAY PROCESSING

Building permits are issued for one year with the optional renewal of up to two 6 month extensions. The extension fee will be \$200.00 plus half the cost of the original permit.

At completion, and prior to the issuance of a Certificate of Occupancy, there will be a Certificate fee.

PLEASE NOTE THE FOLLOWING

The applicant shall notify the building department of any and all changes in the information contained in the application during the period for which the permit is in effect. A permit will be issued when the application has been determined to be complete and when the proposed work is determined to conform to the requirements of the building residential code of New York State. The authority conferred by such permit may be limited by conditions.

The building permit may be suspended or revoked if it is determined that the work to which it pertains is not proceeding in conformance with the building and residential code of New York State or with and condition attached to such permit, or if there has been a misrepresentation or falsification of a material fact in connection with the application for the permit.

Upon approval of this application, the building inspector will issue a building permit to the applicant, such permit and approval plans and specifications shall be kept on the premises and available for inspection throughout the process of the work.

TOWN OF MARLBOROUGH

COMMERCIAL BUILDING PERMIT

21 Milton Turnpike Milton , N.Y. 12547

(845) 795-2406 Ext. # 7

MEMORANDUM OF UNDERSTANDING

1. Prior to application for Certificate of Occupancy, I understand I will have to submit a Certified Survey “ **AS BUILT** “ stamped by a New York State licensed Land Surveyor, Licensed professional Engineer or Registered Architect.
On that survey I will plot all building and all construction (with all setbacks) including the well and septic tank with fields (if applicable)
2. I understand and acknowledge that the State and Local Laws prohibit
“ **ANY TYPE OF OCCUPANCY** “ without a Certificate being issued by the town.
3. I have read and understand the instructions on the Building permit application.

Applicants Name _____ **Date** _____

Applicants Signature _____

**TOWN OF MARLBOROUGH
COMMERCIAL BUILDING PERMIT APPLICATION**

Date _____

TYPE OF BUILDING : _____

Owner : _____ **Phone :** () _____
Address: _____ **Cell :** () _____
_____ **Email :** _____

Builder : _____ **Phone :** () _____
Address: _____ **Cell :** () _____
_____ **Email :** _____

Tax Map : Section _____ Block _____ Lot _____

Address of Building Permit: _____

Nature of Work : _____

Name of Architect / Engineer : _____

Address : _____

PERMIT USE : Group A Assembly Group B Business Group E Education Group F Factory

Group I Industrial Group M Mercantile Group R Residential Group S Storage

BASEMENT : Full Finished Full Unfinished Slab Crawl Space

CONSTRUCTION : Steel Wood Concrete Block Brick Other _____

FOUNDATION : Concrete Block Stone Brick Piers Other _____

ROOFING : Asphalt Metal Tile Wood Other _____

EXTERIOR WALLS : Wood Concrete Brick Block Other _____

PORCHES & DECKS : Front _____ Rear _____ Side _____

HEAT : Oil Gas (Propane / Natural) Electric Solar Other _____

WATER : Public Private **SEWER :** Public Private

ESTIMATED COST : \$ _____

DIMENSIONS : Length _____ Width _____ Height _____

FIRE PROTECTION : Fire Alarm with Central Station YES - NO **Sprinklers :** WET - DRY

SQUARE FOOTAGE : _____ **NUMBER OF STORIES :** _____

TOWN OF MARLBOROUGH
COMMERCIAL BUILDING PERMIT
PLOT PLAN

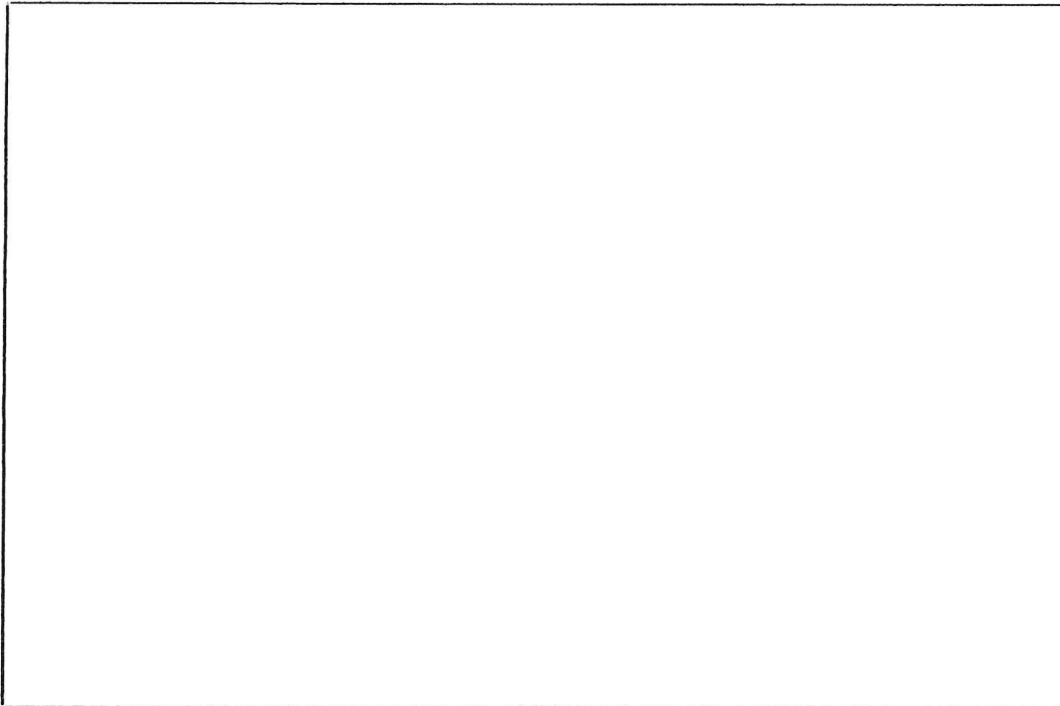
SECTION _____ BLOCK _____ LOT _____

Address : _____

SHOW THE FOLLOWING ON THE PLOT PLAN :

** THE OUTSIDE LINES ARE THE PROPERTY LINES*

- 1) Show ALL the buildings on the property
- 2) Show the **new construction** on the property and **ALL** setbacks (distance in feet from the property lines)
- 3) Show ALL roads and driveways
- 4) Show septic leech field and well
- 5) Attach survey to application



Applicants Signature _____

*** This application must meet the Code of the Town of Marlborough**

Section 155 - Schedule 1 - Lot, Yard and Height Regulations

Owners Name _____

Site Location _____

Telephone : Home _____ Work _____ Cell _____

Section _____ Block _____ Lot _____

FOR BUILDING DEPARTMENTS USE ONLY

Type of Inspections :

- 1. SETBACKS**
- 2. FOOTING BEFORE POURING**
- 3. FOUNDATION WALLS**
- 4. SLAB BEFORE POURING**
- 5. PERIMETER DRAINS**
- 6. FRAMING**
- 7. ELECTRIC BEFORE ENCLOSING**
- 8. PLUMBING BEFORE ENCLOSING & TEST SYSTEM**
- 9. FIRE BLOCKING / AIR INFILTRATION BEFORE INSULATION**
- 10. INSULATION BEFORE ENCLOSING**
- 11. CHIMNEY & WOOD STOVE**
- 12. HEATING APPARATUS**
- 13. WATER / SEWER FINAL**
- 14. ENERGY CODE CERTIFICATION**
- 15. FINAL ELECTRIC**
- 16. CERTIFIED “ AS BUILT “**
- 17. 911 ADDRESS NUMBERS**
- 18. GAS CERTIFICATION**
- 19. WATER TEST**
- 20. FINAL COMPLETION**

INSPECTOR'S COMMENTS _____

TOWN OF MARLBOROUGH BUILDING DEPARTMENT
#21 MILTON TURNPIKE, PO BOX 305, MILTON, NEW YORK 12547
PHONE #(845)795-2406 FAX #(845)795-6171
ext 7

THOMAS CORCORAN
BUILDING/FIRE INSPECTOR
CODE ENFORCEMENT OFFICER

***ALL INSPECTIONS REQUIRE A 24 HOUR NOTIFICATION (NO EXCEPTIONS)**

***\$50.00 PENALTY WILL BE ASSESSED FOR WORK NOT READY AT INSPECTION**

***UNDER NO CIRCUMSTANCE WILL CONCRETE BE POURED WITHOUT INSPECTION**

***NO ONE IS PERMITTED TO OCCUPY ANY BUILDING CONSTRUCTED UNDER A BUILDING PERMIT WITHOUT A CERTIFICATE OF OCCUPANCY**

<u>INSPECTIONS</u>	<u>WHEN</u>
1) SETBACKS & FOOTINGS	BEFORE POURING ANY FOOTINGS
2) FOUNDATION/SLAB	BEFORE POURING
3) PERIMETER DRAINS, PAVING AND WATERPROOFING	BEFORE BACKFILL
4) FRAMING	BEFORE COVERINGS (IE: TYVEK)
5) ROUGH ELECTRIC	BEFORE INSULATION/ENCLOSING
6) ROUGH PLUMBING	BEFORE INSULATION TO INCLUDE TEST OF WASTE AND DOMESTIC WATER.
7) FIRE BLOCKING	BEFORE INSULATION
8) INSULATION	BEFORE ENCLOSING WALLS
9) CHIMNEY	BEFORE ENCLOSING WALLS
10) HEATING APPARATUS	UPON COMPLETION TO INCLUDE BACK FLOW PREVENTER, LOW WATER CUT OFF & FRESH AIR INTAKE PER CODE.
11) CERTIFIED SURVEY "AS BUILT" TO INCLUDE SEPTIC LOCATION	ANYTIME BEFORE FINAL
12) 911 ADDRESS NUMBERS	CONTACT INSPECTOR
13) FINAL	AT CONSTRUCTION COMPLETION INCLUDE: FINAL ELECTRIC CERTIFICATE FINAL BOARD OF HEALTH

NOTE: OTHER INSPECTIONS MAY BE REQUIRED AT THE DISCRETION OF THE BUILDING INSPECTOR. (IE: DECK FOOTINGS & FRAMING, STEEL, WELDING, CONCRETE)

INSPECTION AGENCIES
APPROVED BY THE TOWN OF MARLBOROUGH

Electrical Underwriter	Ernie Bello Nicholas Romano	569-1759
NY Certified Electrical Inspectors LLC	Jerry Caliendo	294-7695
Tri State	Lou Ambrosia Vinny Ambrosia Al Shauger	544-2180
Commonwealth	Ron Henry	562-8429
NY Electrical Inspectors	Greg Murod	586-2430
Middle Department (MDIA)	Pete Jennings	518-610-8133
Z3 Consultants Inc.	Gary Beck	471-9370
Swanson Consulting	Joe Swanson	496-4443
NY Electrical Inspections & Consulting	John Wierl	343-6934 551-8466
New York Board	Pat Decina	298-6792
CP Certified Electrical	Chris Peone	853-3202
LM Electrical & Consulting Corp.	Logan Millington	202-2651
SAS Electrical Inspections	Yuri Badovich	801-2172
Inspections On Time	Maria Mendez	233-6711

ANY OTHER INSPECTOR'S OTHER THAN THOSE LISTED ABOVE DO NOT HAVE AUTHORIZATION TO DO INSPECTIONS IN THE TOWN OF MARLBOROUGH

* No Area Code Listed Defaults to 845

TOWN OF MARLBOROUGH
PO Box 305 Milton NY 12547
"Heart Of the Hudson Valley Fruit Section"
MILTON, ULSTER COUNTY, NEW YORK 12547
DEPARTMENT OF BUILDINGS

TEL NO. 795-2406 Ext. # 7
FAX NO. 795-6171

THOMAS CORCORAN JR.
BUILDING INSPECTOR
CODE ENFORCER
FIRE INSPECTOR

Third Party Energy Code Certification Inspectors

HOME ENERGY CONSULTANTS - RON SAMUELSON ***(845) 635-8302***

CERTINSPECTORS - SCOTT SASO ***(845) 849-5696***

*** This is a MANDATORY Inspection**

*** Any CERTIFIED third party inspector is acceptable. These are the only two that have submitted paperwork to the building department as of the date of this printing.**

Dig Safely. New York

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800-962-7962

www.digsafelynewyork.com



What You Should Know Before Getting In Too Deep

If Someone is Planning To Dig On Your Property, Or You Are Doing The Excavation . . . Please Do Your Part!

Look For:

- Pad Mounted Electric Transformers
- Utility Service Wires (Cables attached to the side of the utility pole and entering the ground.)
- Telephone Or Cable Television Pedestals
- Water Valves Or Hydrants
- Regulator Stations, Gas Meters, Valves or Test Stations
- Warning Signs Or Markers
- Manhole Rings and Covers

When you call, please have the following information available:

- Municipality – county, city or township
- Location – street address
- Nearest intersection of streets and roads
- Extent of work ■ Type of work
- Start date and time excavation is scheduled to begin
- Caller's name
- Excavator/contact person and phone number

Even When All Precaution Are Taken, Accidents Can Still Happen. If An Underground Facility Is Hit Or Even Scratched, Please Notify The Facility Operator.

Dig Safely. New York

- Call Before You Dig
- Wait The Required Time
- Confirm Utility Response
- Respect The Marks
- Dig With Care

800-962-7962

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