VILLAGE OF STILLWATER, NEW YORK

662 Hudson Avenue P.O. Box 507 Stillwater NY, 12170-0507

COMMERCIAL BUILDING PERMIT APPLICATION

| DO | NOT FILL IN DEPARTMENT OF | F CODE ENFORCEMENT USE OF | NLY |
|---|-----------------------------|---------------------------------|--------------------|
| TAX PARCEL MAP # | BUILDING PERMIT # | ISSUE DATE | EXPIRATION DATE |
| | | | |
| | | | |
| | | | |
| 1. PROPERTY OWNERS' IN | FORMATION | | |
| Name: | | | |
| Address: | | | |
| | | | |
| Contact Number: () | | Email: | |
| PROPERTY OWNERS CONSE | NT TO CONDUCT THE CONSTR | UCTION AS DESCRIBED IN THIS | APPLICATION |
| Signature of Property Owner | · | | Date:/ |
| 2. GENERAL CONTRACTOR | S' INFORMATION | | |
| Name of Commonwe | | | |
| Name of Company: | | | |
| Name of Project Supervisor: | | | |
| | | | |
| Address: | | | |
| Contact Number: () | | Email: | |
| | PERFORMING CONSTRUCT | | |
| | | | |
| | | | |
| 3. PROPOSED BUILDING IN | IFORMATION | | |
| | | | |
| Address: | | Tax Map | <u>#:</u> _ |
| Type of Work: NEW | ADDITION ALTERATIO | N OTHER : | |
| New Building (Sq.Ft. |) Alteration area (Sq.Ft. |) OTHER | |
| B: 11 11 6 | <u> </u> | | |
| Primary Heating Source : A. FLOODPLAIN INFORMATION A. FLOODPLAIN | ON Is site in a flood plain | Type of Fuel: YES NO NO | |
| B. WETLAND INFORMATION | <u> </u> | | S NO D |
| C. DWELLING UNITS | · | will the building consist of: (|) NO [] |
| D. BUILDING OCCUPANCY | What is the proposed bu | | 1 |
| E. FOUNDATION | Peir Construction | <u> </u> | ock Precast |
| F. BASEMENT | Full Partial | crawl Pier | Slab on grade |
| G. DECK/PORCH | Open (Sq.Ft.) | Closed (Sq.Ft. | Enclosed (Sq.Ft.) |
| H. GARAGE | Attached Detach | | q.Ft.) None |

| I. UTILITIES | Electric | Gas | Other (| |) 🔲 | |
|---|---|--|---|--|---|--|
| J. TRUSS CONSTRUCTION | Type: I II | III IV | V Location: | Floor Roof | Both | None 🔲 |
| K. WATER CONNECTION | Yes 🗖 | No 🔲 | L. SEWER CON | | Yes | No 🔲 |
| M. SPRINKLERS SYSTEM | | No 🔲 | N. RADIO SIGN | | Yes 🔲 | No 🔲 |
| O. DUCT WORK FIRE DAMPERS | | No 🔲 | P. FIRE HYDRA | | Yes 🔲 | No 🔲 |
| Q. ACCESS GATES | | No 🔲 | | US ACCESS ROAD | | No 🔲 |
| P. EMPLOYEE(S) | Yes 🔲 | No 🔲 | Approximately | how many emplo | yees (|) |
| 4. BRIEF DESCRIPTION OF THE | NATURE, EXTEN | NT & SCOP | E OF WORK | | | |
| | | | | | | |
| 5. PROJECT COST DISCLOSURE | | | | | | |
| ESTIMATED CONSTRUCTION | COST : | | (Inclu | ding all electrica | l, plumbin | g & HVAC) |
| 6. CERTIFICATION | | | | | | |
| The applicant shall notify the de which the permit is in effect. A pe proposed work is determined to suspended or revoked if it is deter laws, or with any condition attack connection with the application for of a certificate of occupancy or coperiod, provided (1) the permit hinformation in the application is instructions and examined this ap this work will be compiled with will violate or cancel the provisions of Name of Applicant: Signature of Applicant: Signature of Applicant: | rmit will be issued conform to the remined that the wheel to such permit as not been revoup to date; and is polication and knowhether specified any other state or conformation and conformation | d only where equirement ork to which it, or if the high permit sever comes ked or suspection (3) any additional to a local law | n the application has its of all applicable con hit pertains is not progree has been a misrephall expire 12 months of first. The permit, uppended at the time the litional renewal fees to be true and correspond. The granting of a regulating construction. | been determined to odes, and local laws oceeding in conform resentation or falsif from the date of iss on request may be e renewal application are paid. I hereby oct, all provisions of the permit does not proportion or the performan | be complete. A building ance with application of a luance or upon renewed for on is made; (certify that I he codes and resume to give of constructe:/ | e and when the permit may be plicable codes, material fact in on the issuance one six-month 2) the relevant have read the dlaws covering we authority to action. |
| THIS APPLICATION MUST E | BE ACCOMPANIE | D BY ALL | CONSTRUCTION DO | | | WORKER |
| | FORMS, AND N | //ATERIAL | MANUFACTURER IN | ISTALLATION INST | RUCTIONS | |
| 7. VALIDATION This application is hereby Ap structure as set forth above. Reason for denial of permit: | | | | | ouilding and | l or accessory |
| Special conditions: | | | | | | |
| Date: Permit #: | | | | | | |

VILLAGE OF STILLWATER, NEW YORK

662 Hudson Avenue P.O. Box 507 Stillwater NY, 12170-0507

COMMERCIAL BUILDING PERMIT APPLICATION CHECKLIST

| Application is completely fill out, signed, and dated | |
|---|--|
| All construction documents have been included | |
| Truss construction form is filled out (where applicable) | |
| All liability insurance documents have been included (naming the Village of Stillwater, Village Hall 662 Hudson Avenue Stillwater NY 12170 as the certificate holder) | |
| All worker compensation documents have been included | |
| All material manufacturer installation instructions have been included | |
| 7 hard copies and one media copy of application and documents | |

Once all boxes have been checked, the residential building permit application is ready to be submitted. The application needs to be submitted to the Village Clerks office.

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REQUIRED CONSTRUCTION DOCUMENTS

- 1. Site Plan A plan (map) drawn to scale and drawn in accordance with an accurate boundary survey, showing the size and location of new construction and existing structures and appurtenances (including lighting) on the site; distances from lot lines; the established street grades and the proposed finished grades; and, as applicable, flood hazard areas, floodways, and design flood elevations.
- 2. Building Plans Plans showing the location, nature, extent, and scope of the proposed work; proposed structural, electrical, plumbing, mechanical, fire-protection, and other service systems of the building; structural information including but not limited to braced wall designs; the size, section, and relative locations of structural members; design loads; and other pertinent structural information; a representation of the building thermal envelope; the location, construction, size, and character of all portions of the means of egress, Insulation materials and their R-values, Fenestration U-factors, and solar heat gain coefficients (SHGCs), area-weighted U-factor and solar heat gain coefficient (SHGC) calculations, mechanical and service water heating systems and equipment types, sizes and efficiencies, economizer description, equipment and system controls, fan motor horsepower (hp) and controls, duct sealing, duct and pipe insulation and location, lighting fixture schedule with wattage and control narrative, location of daylight zones on floor plans, air sealing details and showing that the proposed work will conform to the applicable provisions of the Codes and design criteria as set by the Village of Stillwater, Department of Code Enforcement.
- **2A.** For buildings and structures located in whole or in part in flood hazard areas as established by Residential Code Of New York State, Table R301.2(1), construction documents shall include:
 - 1. Delineation of flood hazard areas, floodway boundaries and flood zones and the design flood elevation, as appropriate.
 - 2. The elevation of the proposed lowest floor, including basement; in areas of shallow flooding (AO Zones), the height of the proposed lowest floor, including basement, above the highest adjacent grade.
 - 3. The elevation of the bottom of the lowest horizontal structural member in coastal high-hazard areas (V Zones) and in Coastal A Zones where such zones are delineated on flood hazard maps identified in Table R301.2(1) or otherwise delineated by the jurisdiction.
 - 4. If design flood elevations are not included on the community's Flood Insurance Rate Map (FIRM), the building official and the applicant shall obtain and reasonably utilize any design flood elevation and floodway data available from other sources.
- **3.** Energy code compliance a written and signed statement indicating compliance with the Energy Code.
- **4. Truss ID Signage** A written and signed statement indicating what type and location of any trusses.
- **5.** Evidence that the documents were prepared by a licensed and registered architect in accordance with Article 147 of the New York State Education Law or a licensed and registered professional engineer in

accordance with Article 145 of the New York State Education Law and practice guidelines, including but not limited to the design professional's seal which clearly and legibly shows both the design professional's name and license number and is signed by the design professional whose name appears on the seal in such a manner that neither the name nor the number is obscured in anyway, the design professional's registration expiration date, the design professional's firm name (if not a sole practitioner), and, if the documents are submitted by a professional engineering firm and not a sole practitioner professional engineer, the firm's Certificate of Authorization number.

- **6.** A written statement when plans or specifications bear the seal and signature of a registered design professional, such registered design professional shall also include a written statement that to the best of his or her knowledge, belief and professional judgment, such plans or specifications are in compliance with the Energy Code.
- **7.** Include any other information and documentation that the authority having jurisdiction may deem necessary to allow the authority having jurisdiction to determine that the proposed work conforms to the Codes.
- **8.** Include the State Environmental Quality Review Acts (SEQRA), Environmental Assessment Form (EAF) as required with new construction.

ACCESSORY STRUCTURE(S) & DECK(S)

For accessory structures (sheds, pools, splash pads, etc.) & decks, a Plot Plan will suffice in place of a Site Plan.

Only proposed structural and other service systems being installed need to be included for a Building Plan.

PLOT PLAN: plan (map) showing the boundaries of a parcel and all structures and important physical features on it, drawn to scale with accurate dimensions.

CONTACT NUMBERS

INSPECTION APPOINTMENTS (DEPARTMENT OF CODE ENFORCEMENT) – 518.522.5187

DEPARTMENT OF PUBLIC WORKS (MATT RIFENBURGH, FOREMAN) – 518.664.7781 OR 518.301.8955

DEPARTMENT OF HEALTH (WELL WATER & SEPTIC SYSTEMS) - 518.402.7500

ARMY CORP OF ENGINEERS (WETLANDS) - 518.270.0589

APPROVED ELECTRICAL INSPECTORS

Commonwealth Electrical Inspection Service Inc. – 518.238.2229 4 Westview Rd. Troy, NY 12182

Middle Department Inspection Agency – 518.273.0861 1741 Route 9 Clifton Park, NY 12065

New York AtlanOc-Inland, Inc. (Stan Matyka) – 518.692.9295 (cell) 518.796.5076 (office) 607.753.7118 997 McLean Rd. Cortland, NY 13045

The Inspector, LLC – 518.481.5300 5390 State Route 11 Burke, NY 12917

VILLAGE OF STILLWATER, NEW YORK

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REQUIRED WORKER COMPENSATION DOCUMENTS

Workers' Compensation Insurance Requirements

Businesses requesting permits, licenses, or contracts from a state or municipal entity must provide ONE of the following:

- Certificate of Workers' Compensation Insurance (C-105.2) The business' insurance carrier will send this form to the government entity upon request. Please note: The State Insurance Fund provides its own version of this form, the *U-26.3*; or
- <u>Certificate of Worker's Compensation Self-Insurance (SI-12)</u> Businesses that are self-insured in NYS for workers' compensation insurance should call the Workers' Compensation Board's Self-Insurance Office at (518) 402-0247 to obtain this form; or
- <u>Certificate of Group Worker's Compensation Self-Insurance (SIG-105.2)</u> The business' Group Self-Insurance Administrator will send this form to the government entity upon request; or
- <u>Certificate of Attestation of Exemption (CE-200)</u> The Certificate of Attestation of Exemption (CE-200) must only be used to show a government agency that the business is not required to obtain New York State workers' compensation and/or disability and Paid Family Leave benefits insurance. Form CE-200 may not be used to "prove exemption" from workers' compensation and/or disability and Paid Family Leave benefits insurance to another business or that business's insurance carrier.

Please note: Certificate of Attestation of Exemption (CE-200) may be filed by **out-of-state employers** for a NYS workers' compensation exemption only if all work for the permit, license or contract is done outside of New York and no employees of the out-of-state business work in the state.

Disability and Paid Family Leave Benefits Insurance Requirements

Businesses requesting permits, licenses, or contracts from a state or municipal entity must provide **ONE** of the following:

- <u>Certificate of NYS Disability and Paid Family Leave Benefits Insurance (Form DB-120.1)</u> The business' statutory
 disability and Paid Family Leave benefits carrier will send this form to the government entity upon request.
- <u>Certificate of NYS Disability and Paid Family Leave Benefits Self-Insurance (Form DB-155)</u> Businesses that are self-insured in New York State for disability and/or Paid Family Leave benefits insurance should call the Workers' Compensation Board's Self-Insurance Office at (518) 402-0247 to obtain this form.
- <u>Certificate of Attestation of Exemption (CE-200)</u> To be eligible for a disability and Paid Family Leave benefits exemption using *Certificate of Attestation of Exemption (Form CE-200)*, an employer must not have one or more persons in employment on each of at least 30 days in a calendar year in New York State.

(Independent contractors are not considered to be employees under the Disability and Paid Family Leave Benefits Law.)

VILLAGE OF STILLWATER, NEW YORK

PLOT PLAN SUBMISSION FOR A BUILDING PERMIT

| ADDRESS: | TAX PARCEL ID #: |
|----------|------------------|
| | |

REQUIRED ELEMENTS OF A PLOT PLAN

DEPARTMENT OF CODE ENFORCEMENT USE ONLY

DATE: / /

PLOT PLAN: ACCEPTED / DENIED

- *Proposed Building Foot Print/ Dimensions *Lot Dimension/Distance From Structure to Property Line *Lot Width At Building Line
- *Utility Layout/Locations * Driveway Access? Road Cut Location *Wet Features Including Ponds , Streams, or other Water Courses
- *Septic Location (Distance to well) * Well Location (Distance To All Septic Components) *Area of Excessive Grades (Over 8%)
- * Foot Print location Of Existing Structures *Army Corp Of Engineers/ DEC Protected Wetlands

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CEO:



BUREAU OF FIRE SERVICES

VILLAGE OF STILLWATER, NEW YORK

662 Hudson Avenue P.O. Box 507 Stillwater NY, 12170-0507

NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION FOR RESIDENTIAL STRUCTURES PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION

| Α | DDRESS: | | | | | | | | | | | | |
|-----|---|-------------------------|--------|---------------|----|----------------------|--------|-----------------------------|-----|--|--|--|--|
| | TAX PA | ARCEL MAP ID #: | | | | | | | | | | | |
| | | OWNER: | | | | | | | | | | | |
| Α | UTHORIZED | REPRESENTIVE: | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Ple | ease take notice t | hat the (check applicab | e line | e): | | | | | | | | | |
| | The new residential structure to be constructed at the subject property referenced above will utilize: | | | | | | | | | | | | |
| | The new residential structure addition to be constructed at the subject property referenced above will utilize: | | | | | | | | | | | | |
| | The existing residential structure rehabilitation to be constructed or performed at the subject property referenced above will utilize: | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| (C | check each ap | plicable section): | | | | | | | | | | | |
| | Truss type cons | struction (TT) | e-eng | gineered wo | od | construction (PW) | Tin | nber construction (T | ·C) | | | | |
| In | the following | g location(s) (check | арр | olicable): | | | | | | | | | |
| | Floor framing, | including girders and b | eam | ns (F) | | Floor and roof frami | ng (FR | 3) | | | | | |
| | Roof framing (| (R) | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | NAM | | DATE | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | SIGNATURE: | | | | | | | | | | | | |
| | | OWNER: | | | | OWNER. | R'S RF | PRESENTATIVE: | | | | | |
| | | OWNER. | | | | OWNER | , J IL | I KLJLIVIATIVE. | | | | | |