

# APPLICATION FOR GENERATOR PERMIT

## Application Checklist

- Permit Applications**
  - **Building Permit Application**
    - **Note if LP Gas (Propane) or Natural Gas.**
    - **Plumber Information (When required)**
  - **Electrical Permit Application**
- Worker's Compensation Certificates**
- Disability Insurance Certificates**
- Copy of Westchester County Licenses**
  - **Installation of new or upgrade of Propane Tanks requires Propane Company information and copy of County Home Improvement License.**
  - **Electrician**
  - **Plumber**
- Survey and Site Plan showing location of Generator and Tanks**
- Installation Manual for Generator**
- Application and Permit Fees**

**Note: Additional information may be required. See attached.**

**Incomplete applications will be returned without review.**

**A standard one (1) week review is typical for all applications. Additional time is required based on the extent and scope of work proposed.**

\*\*\*\*\* DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY \*\*\*\*\*

Y N

Wetland Permit

Environmental Inspection

Health Department Approval

Y N

Steep Slope Permit

Tree Removal Permit

**TOWN OF CORTLANDT**  
DEPARTMENT OF TECHNICAL SERVICES  
CODE ENFORCEMENT DIVISION  
Town Hall, 1 Heady Street  
Cortlandt Manor, NY 10567

914-734-1010 FAX 914-293-0991

<http://www.townofcortlandt.com> e-mail: [code@townofcortlandt.com](mailto:code@townofcortlandt.com)

Permit No. \_\_\_\_\_  
Date: \_\_\_\_\_  
SCA: \_\_\_\_\_

**TOWN OF CORTLANDT**  
DEPARTMENT OF TECHNICAL SERVICES  
Code Enforcement Division  
Town Hall, 1 Heady Street, Cortlandt Manor, NY 10567  
914-734-1010 FAX 914-788-0294

CO No. \_\_\_\_\_  
CC No. \_\_\_\_\_  
Date: \_\_\_\_\_

<http://www.townofcortlandt.com> e-mail: [code@townofcortlandt.com](mailto:code@townofcortlandt.com)

**BUILDING PERMIT APPLICATION**

Application is hereby made to the Code Enforcement Division for the issuance of Permits pursuant to the Code of the Town of Cortlandt. The applicant agrees to comply with all applicable laws, ordinances and regulations. The applicant attests that the proposed work outlined in this application conforms to all provisions of the Code of the Town of Cortlandt and laws of New York State. It is further agreed that the premises will not be occupied until a Certificate of Occupancy has been issued and all fees are paid in full.

**Permit type:**     Residential (new)     Residential (addition/alteration)     Accessory Structure  
                   Commercial/Business     Assembly (includes restaurants)     Industrial  
                   Demolition     Pools and Decks     Sign  
                   Topographic Alteration     Wetlands     Other \_\_\_\_\_

**Site Data:**  
Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_    Zone: \_\_\_\_\_    Area of lot(s): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sewer: \_\_\_\_\_ Septic: \_\_\_\_\_ WCDH File #: \_\_\_\_\_    No. of approved Bedrooms: \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_    Filed Map No. \_\_\_\_\_    Dated Filed \_\_\_\_\_  
Total Square Footage of Project: \_\_\_\_\_  
Floor Area (Provide Square Footage): Existing \_\_\_\_\_    Proposed \_\_\_\_\_  
Construction Classification: Type: 1A/B [ ]    2A/B [ ]    3A/B [ ]    4 [ ]    5A/B [ ]  
Occupancy/Use: Detached 1 Family [ ], Detached 2 Family [ ], Townhouses [ ], R-1 [ ], R-2 [ ], R-3 [ ], R-4 [ ]  
A-1 [ ], A-2 [ ], A-3 [ ], A-4 [ ], A-5 [ ], B [ ], E [ ], F-1 [ ], F-2 [ ], H-1 [ ], H-2 [ ], H-3 [ ], H-4 [ ], H-5 [ ],  
I-1 [ ], I-2 [ ], I-3 [ ], I-4 [ ], M-1 [ ], S-1 [ ], S-2 [ ], U [ ]

**Applicant:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_    Mobile: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Owner:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_    Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Lessee:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_    Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Architect/Engineer:**  
Name: \_\_\_\_\_    E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_    Phone: \_\_\_\_\_    Mobile: \_\_\_\_\_

**Builder/Contractor/Developer:**

Name: \_\_\_\_\_ Westchester County License #: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Electrician:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Westchester County License #: \_\_\_\_\_

**Plumber:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Westchester County License #: \_\_\_\_\_

**Cost of Construction:**

Cost of Construction \$ \_\_\_\_\_ (Cost for the work described in the Application for Building Permit, include the cost of all of the construction and other work done in connection therewith, exclusive of the cost of the land).

**All residential work shall have smoke detectors that comply with R317 of the Residential Code (in each sleeping room, outside of each separate sleeping area in the immediate vicinity of the bedrooms and on each additional story of the dwelling).** Signature: \_\_\_\_\_

**Authorization:**

State of New York, County of Westchester, \_\_\_\_\_ being duly sworn deposes and says they are the owner or authorized representative by **attached completed proxy statement** and are duly authorized to perform or have performed said work and to make and file this application: that all statements are true to the best of their knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me \_\_\_\_\_ Owner or Authorized Representative Signature: \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_ Print Name: \_\_\_\_\_  
Notary Public: \_\_\_\_\_

Confirmation All Taxes Paid: \_\_\_\_\_ Date: \_\_\_\_\_

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Fee:	Building Permit	\$ _____	Driveway Permit	\$ _____
	Environ. Insp.	\$ _____	Steep Slope Permit	\$ _____
	Plumbing Permit	\$ _____	Wetland Permit	\$ _____
	C of O fee	\$ _____	Tree Removal Permit	\$ _____
			Total	\$ _____

Wetlands/Steep Slope: Out \_\_\_\_\_ Return \_\_\_\_\_ Engineering: Out \_\_\_\_\_ Return \_\_\_\_\_  
Planning Board: \_\_\_ No \_\_\_ Yes \_\_\_\_\_ Date Open Building Permit \_\_\_ No \_\_\_ Yes # \_\_\_\_\_  
ARB: \_\_\_ No \_\_\_ Yes \_\_\_\_\_ Date Open Space Committee: \_\_\_ No \_\_\_ Yes \_\_\_\_\_ Date

**Fill out all spaces on the permit application. All information is essential and no application for permit will be reviewed until all the required items are provided.**

**No building permit application will be accepted or issued after 3:30 PM**

# TOWN OF CORTLANDT

## DEPARTMENT OF TECHNICAL SERVICES

Code Enforcement Division

Town Hall, 1 Heady Street, Cortlandt Manor, NY 10567

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### Plumbing Information for Building Permit

Licensed Plumber complete this page and Plumbing Fixture Table (on back of this sheet) to be submitted with application for a Building Permit.

Application No. \_\_\_\_\_

Building Permit No. \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Westchester County License No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Owner: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

Nature of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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### Licensed Plumber's Certification

I hereby certify that the work will be completed in compliance with the New York State Uniform Fire Prevention and Building Code.

\_\_\_\_\_  
Plumber's Signature

\_\_\_\_\_  
Date

#### Note:

**As of October 1, 1987, all modular houses must have all fixtures disconnected to enable a water test of the waste lines through the roof vents.**

**As of April 1, 1998, Plumber's Certificate must be accompanied by a Xerox copy of Plumber's License.**

**Effective Dec. 1, 2000 Mercury gauges are not to be used for Gas Testing in the Town of Cortlandt. An Air test (1 1/2 times the working pressure for a minimum of 30 minutes) or testing procedures as outlined in FGCNYS or NFPA 54, Chapter 4, are acceptable as long as the gauge does not contain Mercury.**

Plumbing Fixture Table	Fixture Location and Number of Fixtures (Table of fixtures to include fixtures reset on existing roughing.)																
	Exterior	Basement	First Floor	Second Floor	Third Floor	Fourth Floor	Fifth Floor	Attic or Roof	Fixture Type	Exterior	Basement	First Floor	Second Floor	Third Floor	Fourth Floor	Fifth Floor	Attic or Roof
AIR CONDITIONER									HOSE BIB/ HYDRANT								
BAR SINK									HUMIDIFIER								
BASIN/LAVATORY									ICE MAKER								
BATH TUB									OTHER FIXTURES								
BEVERAGE DISPENSER									RPZ/CHECK VALVE								
BIDET									ROOF DRAIN								
COFFEE URN/MAKER									SERVICE/MOP SINK								
CONDENSATE DRAIN									SEWER EJECT PUMP								
DENTAL CHAIR/UNIT									SHAMPOO BASIN								
DISHWASHER									SHOWER								
DISPOSAL									SINK								
DRINKING FOUNTAIN									SLOP-SINKS								
FLOOR DRAIN									STEAM TABLE								
FLOOR SINK/O.S.D.									SUMP PUMP								
GAS BOILER									SWIMMING POOL								
GAS DRYER									TUB/WHIRL POOL								
GAS FRYER									URINAL								
GAS FURNACE									VACUUM SYSTEM								
GAS GENERATOR									WASH TRAY								
GAS GRILL									WASH-BASINS								
GAS MISCELLANEOUS									WASHING MACHINE								
GAS OVEN/BROILER									WATER BOOSTER PUMP								
GAS POOL/HOT TUB HTR									WATER CLOSET								
GAS RANGE/WOK									WATER HEATER								
GAS ROOF TOP UNIT																	
GAS SPACE HEATER																	
GAS STOVE																	
GAS WATER HEATER																	

**INFORMATION TO BE SUPPLIED WITH EVERY BUILDING PERMIT APPLICATION**

1. Building Permit Application with a \$50 non-refundable application fee (check or cash).
2. Two copies of construction documents of the proposed work signed and sealed by a Registered Architect or Licensed Engineer. The documents should show how the structure is to be built and location of project.
3. Copy of survey of the property by a licensed land surveyor (TO SCALE).
4. Location plan or plot plan showing relationship of proposed activity or construction to the property lines and existing structures. *The basis for this can be taken from the survey, but the survey itself cannot be altered (NYS Education Law).*
5. Copy of the Worker's Compensation Form BP-1 and homeowner's insurance declarations page if the owner is acting as the contractor or copy of Contractor's Westchester County License, Worker's Comp. policy and Disability policy on New York State approved forms (C105.2, DB 120.1 or other).
6. Confirmation that the taxes have been paid on property (Receiver of Taxes signature on application form.)
7. If plumbing and/or electrical systems are involved, the name, address and Westchester County license number of plumber or electrician.
8. If an addition or alteration adds to the bedroom count, re-locates bedrooms, or is a major expansion of gross floor area greater than 1,000 square feet or 100% of the exiting dwelling, the Westchester County Department of Health must sign off on the floor plans before a Building Permit can be issued.
9. If the applicant for any permit is not the owner of the property where the work will be performed, a completed Proxy Statement must be submitted for any type of work. No Exceptions.
10. Estimated Cost of Construction, including materials and labor.
11. Climatic and Geographic Design Criteria – required to be on all construction documents submitted for building permit.

Table R301.2 (1)

Ground Snow Load – 30

Wind (Speed mph) – 90

Seismic Design Category – C

Subject to Damage From Weathering – Severe

Frost line depth – 42”

Termite – Moderate to Heavy

Weathering – Severe

Winter Design Temp – 7

Climate Zone 4

Ice Shield Underlayment required – Yes

Flood Hazards – State if applicable (refer to maps in Engineering Dept. to determine)

**Most Building Permit Applications require a pre-site inspection prior to the issuance of a building permit. This inspection could be scheduled at the time of filing the Building Permit Application.**

**Every Building Permit Application for enlargement of the footprint of the structure, in-ground pool, or the construction of a new structure requires a Wetlands, Steep Slope, Tree Removal inspection before the issuance of a Building Permit. Inspections are generated by this office.**

**Additional information to be submitted for a new residence.**

1. Separate Sewage Disposal System Permit from the Westchester County Department of Health, unless connected to a public sewer, then sewer permit is required from Water Department.
2. Two copies of Sites Development Plan in accordance with DOTS “Minimum Information for Site Plan for One & Two Family Dwelling” and approved by the Director of DOTS or his representative.
3. Driveway permit application. Applications available in this office, approval by Director of DOTS or his representative.
4. Tree Removal application.
5. New residential 1 and 2 family Building Permit checklist signed by Design Professional.
6. Title report for property.
7. Required street openings.

**Note:**

*Construction beyond the foundation may not continue until an “As-Built” foundation survey, which includes the top of foundation elevation is submitted and approved.*

*Rough grading for the driveway must be completed and spot elevations for same shown on said “As-Built” and approved by the Department of Technical Services before work can continue.*

***\*\*\*\*The installation of Factory Manufactured Homes must be certified by an Architect or Engineer to ensure that there is no damage to the structural integrity during transit or during installation and the home has been installed correctly.***

**Information required to obtain Certificate of Occupancy:**

1. A Final Inspection that is approved by a Code Enforcement Official.
2. An approved final Electrical Inspection Certificate, if applicable.
3. Plumber’s certification, if applicable and Water Meter Installed.
4. Health Department “Certificate of Construction Compliance”, if applicable.
5. “As-Built” plans must be submitted for any changes during construction from original documents. Plans must be signed and sealed by a design professional.
6. Design professional certification.
7. “As-Built” final survey by a licensed land surveyor, if required.

**Additional information required for a new residence**

1. “As-Built” final survey by a licensed land surveyor showing pertinent features and elevations and as required by approvals.

***Please Note: Building permits are valid for one (1) year and may be extended for up to two (2) years if approved.***

**NO APPLICATIONS WILL BE ACCEPTED BY MAIL.**

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## PROXY STATEMENT

\_\_\_\_\_ is the owner of the property located at

\_\_\_\_\_ and has authorized \_\_\_\_\_

to make the attached application for \_\_\_\_\_ and to represent

them at all Board meetings.

\_\_\_\_\_

Signature of Owner

### NOTARY:

Sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_

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

Permit No. \_\_\_\_\_  
Date: \_\_\_\_\_  
SCA: \_\_\_\_\_

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### ELECTRICAL PERMIT APPLICATION

Application is hereby made to the code Enforcement Division for the issuance of Permits pursuant to the Code of the Town of Cortlandt. The applicant agrees to comply with all applicable laws, ordinances and regulations. The applicant attests that the proposed work outlined in this application conforms to all provisions of the Code of the Town of Cortlandt and laws of New York State. It is further agreed that the premises will not be occupied until a Certificate of Occupancy has been issued and all fees are paid in full.

#### Site Data:

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Building Permit \_\_\_\_\_

Application for a permit is hereby made to cover electrical installations as stated below. Work on same will be commenced on or about \_\_\_\_\_, 20\_\_\_\_.

Street Address: \_\_\_\_\_

Existing Use & Occupancy \_\_\_\_\_ Proposed Use & Occupancy \_\_\_\_\_

#### Owner:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

#### Lessee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

#### Electrician:

Name: \_\_\_\_\_ Westchester County License #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

#### Equipment:

Switch Outlets \_\_\_\_\_ Receptacle Outlets \_\_\_\_\_ Fixture Outlets \_\_\_\_\_ Outlet for pendants \_\_\_\_\_

Arc lamps \_\_\_\_\_ Inc. lamps \_\_\_\_\_ Fans \_\_\_\_\_ Motors \_\_\_\_\_ Total HP \_\_\_\_\_

Used for \_\_\_\_\_ Other Equipment \_\_\_\_\_

It is hereby agreed that all work shall be done to conform to the rules, regulations and ordinances of the Town of Cortlandt, State of New York, and in compliance with the requirements of the National Electrical Code governing such installations.

Check one:  NY Electrical Inspection Service (NYEIS)  Statewide Inspection Services (SWIS)

#### Notarization:

State of New York, County of Westchester: \_\_\_\_\_ being duly sworn deposes and says that he is the person who signed this instrument and duly acknowledged that he executed the same for the purposes therein contained.

Sworn to before me this \_\_\_\_\_

day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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