

Permit Application No - PA \_\_\_\_\_

PERMIT NO. \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Date examined \_\_\_\_\_ Date Approved \_\_\_\_\_ Date Disapproved \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Type (Owner, Builder, Engineer, Architect, Agent, Tenant) \_\_\_\_\_

Property Owner's Name \_\_\_\_\_ Phone# \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Location of Land (Street, Road) \_\_\_\_\_

Water District: **Yes or No?** \_\_\_\_\_ Type of Occupancy \_\_\_\_\_

Permit Type (New, Addition, Structural Alteration, Other) \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_ Total Sq. footage of Entire Bldg \_\_\_\_\_ Acreage \_\_\_\_\_

**NEW//ADDITION to Single Family Residence**

Total Sq. Feet \_\_\_\_\_ X \$0.75 = \_\_\_\_\_ = Subtotal Permit Fee\* **\*(min. subtotal fee \$80)**

**NEW//ADDITION to Multi-Family Residence**

Total Sq. Feet \_\_\_\_\_ X \$0.85 = \_\_\_\_\_ = Subtotal Permit Fee\*

**Interior/Exterior Alterations** Total Sq. Feet \_\_\_\_\_ X \$0.40 = \_\_\_\_\_ = Subtotal Permit Fee\*

**\*(min. subtotal fee \$80)**

\*Subtotal Permit Fee \$ \_\_\_\_\_ + Certificate of Occupancy Fee = **\$40** = Total Fee \$ \_\_\_\_\_

**COST OF CONSTRUCTION:** \_\_\_\_\_

**LOT SIZE:**

Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Front Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_ Side Yards \_\_\_\_\_

CORNER LOT (Y/N) \_\_\_\_\_ **ZONE IN WHICH PREMISES ARE LOCATED** \_\_\_\_\_

Architect/Engineer Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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

\*\*General Contractor Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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

\*\*GENERAL CONTRACTOR named on this application to provide NY State Workers' Compensation Certificate form **C-105.2** or **U-26.3 certificate** made out to the Town of Wallkill. Self-employed contractors can obtain and submit an **exemption** form issued by NYS Workers' Comp. Board from website: [www.wcb.ny.gov](http://www.wcb.ny.gov)

\*\*\*Electrical Contractor: \_\_\_\_\_ O.C. License # \_\_\_\_\_ Expiration date: \_\_\_\_\_

\*\*\*Provide copy of Orange County License\* If electrician has their license on file with us already, ask them to send to [inspectionrequest@townofwallkill.com](mailto:inspectionrequest@townofwallkill.com) email subject = project name and address

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**TOWN OF WALLKILL  
COUNTY OF ORANGE  
OFFICE OF THE BUILDING INSPECTOR**

**AFFIDAVIT OF PROPERTY OWNER**

Premises \_\_\_\_\_

\_\_\_\_\_ Being duly sworn, deposes and says that he/she is  
(Name of Property Owner)

the owner above named.

He/She is the **OWNER** and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief and that the work will be performed in the manner set forth in the application and in the plans and specification filed therewith.

Deponent alleges that 1) the provisions of the Worker's Compensation Law does not apply in this case in that he/she will do all required work on the premises and will imply no labor thereat, OR 2) owner alleges that contractor performing work, will provide required NYS Worker's Compensation Insurance wherefore, deponent requests approval of said plan and application and issuance of a PERMIT to commence work.

Signed \_\_\_\_\_  
(Signature of Property Owner)

Sworn to before me this

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

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

2017 April

**Final Paperwork** (To be filed upon completion of work)

PERMIT # \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**TOWN OF WALLKILL  
COUNTY OF ORANGE  
OFFICE OF THE BUILDING INSPECTOR  
AFFIDAVIT OF SUPERINTENDENT**

I, \_\_\_\_\_, the person observed the work for which a Certificate of Occupancy is being sought, hereby certifies that the building constructed under Town of Wallkill Building Permit Number BP-\_\_\_\_\_ has been constructed as per plans and specifications accepted for the Building Permit, and that all work and materials meet the standards and specifications for which they were designed and that the building is safe for human occupancy.

Signed \_\_\_\_\_  
Superintendent (General Contractor)

Sworn to me before this

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

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

**Final Paperwork** (To be filed upon completion of work)

PERMIT # \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**TOWN OF WALLKILL  
COUNTY OF ORANGE  
OFFICE OF THE BUILDING INSPECTOR  
AFFIDAVIT OF FINAL COST OF CONSTRUCTION**

I, \_\_\_\_\_ being duly sworn, depose and say he/she is the applicant/agent named in the Building Permit dated \_\_\_\_\_, 20\_\_\_\_ relating to construction or other work having been performed in the Town of Wallkill.

Filed Cost of Construction \_\_\_\_\_

Final Cost of Construction \_\_\_\_\_

Permit Fee Paid \_\_\_\_\_

Additional Fee Due \_\_\_\_\_

(Costs for the work described in the application for building permit include the cost of all the construction and other work done in connection therewith, exclusive of the cost of land. If the final cost is less than the estimated cost on the application, there will be no portions refunded.)