



Town of Wallkill Building Dept  
99 Tower Dr., Bldg A  
Middletown, NY 10941  
845-692-7807  
[building@townofwallkill.com](mailto:building@townofwallkill.com)

Frank Leva, Building Inspector

## Indoor woodstove, pellet stove, gas fireplace/insert application

As of May 12, 2020 Applicable sections of the following codes:

- Title 19 (NYCRR)
- Uniform Fire Prevention and Building Code (Uniform Code)
- State Energy Conservation Construction Code (Energy Code)

### A.) Contractor *insurance* requirements:

*IF Homeowner* = contractor:

- 1.) provide a photocopy of your homeowner's declarations page proving insurance coverage for the address of this project.
- 2.) Fill out/notarize affidavit of insurance form-request at Building Dept.

---OR---

**Contractor** (paid contractor):

- 1.) Provide C105.2 or U26.3 NYS WC certificate made out to the Town of Wallkill
- OR-----
- 2.) Self-insured contractor's print exemption certificate from NYS WC website and provide with application submittal

### B.) *Stove or insert location*: Sketch of floor plan of where proposed stove or insert is to be located with measurements from stove to ALL windows and entrances/exits in the room

### C.) *Stove or insert specs, installation and clearance requirements*:

- 1.) Photocopy of stove manufacturer's *model specs* as per NY State Residential Code for *stove*
  - 2.) Photocopy of the stove manufacturer's *installation specs AND clearance* to combustibles for the *stove* to be used
  - 3.) Photocopy of the stove manufacturer's *installation specs AND clearance* to combustibles for the *chimney* to be used
- or
- 4.) Photocopy of *fireplace insert* manufacturer's model specs and installation instructions

**D.) Inspections** schedule inspections for your stove or insert and chimney project: (where applicable)

**Verify** inspections required for YOUR individual project

--email inspection requests **by 3pm for next business day**

--Inspections are performed between 9am-4pm.

--Please make sure **you are ready** for your inspection—failed/**not ready** surcharge = \$75fee. No one home at time of inspection is a failed not ready surcharge. Please be available during your confirmed inspection time window.

Possible inspections for your stove or insert project include:

- 1.) Stove, insert and/or chimney installation *before* enclosing
- 2.) Electrical-(any outlets or wiring for the stove project need rough-in and final electrical inspection from list of Town approved electrical inspectors provided on this application
- 3.) Rough plumbing gas pressure test for gas insert
- 4.) Submit completed final paperwork, notarized by contractor and final cost sheet
- 5.) **Final Inspection** --email [inspectionrequest@townofwallkill.com](mailto:inspectionrequest@townofwallkill.com) with permit # in subject line, request *date* and *morning or afternoon* 3 hr window. Reply email from *Building Dept* will confirm your inspection.

Town approved electrical inspectors:

Frank Schmaus ----- 845-800-6909  
Joe Swanson ----- 845-496-4443  
John Taylor ----- 845-597-5072  
Manny Zervakis --- 845-233-6711  
Ernie Bello ----- 845-569-1759  
John Wierl ----- 845-343-6934  
Jerry Caliendo ----- 845-294-7695  
John Hamilton ----- 845-459-0708

**Please call one** of the inspectors for your project (if applicable)

Provide the inspector with your permit #

\*There is a *fee* for the electrical inspection not included in your permit application fee

2020 May indoor stove, gas fireplace/insert application
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Application # PA- \_\_\_\_\_ Permit # BP- \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Date Examined \_\_\_\_\_ Date Approved \_\_\_\_\_ Date Disapproved \_\_\_\_\_

**\*\* \*\* \*ALL permits require INSPECTIONS or A VIOLATION will be served\* \*\* \*\***  
[inspectionrequest@townofwallkill.com](mailto:inspectionrequest@townofwallkill.com) (permit # in the subject line)

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

**Applicant** Type (Owner, Contractor, Designer, Agent, Tenant) **email** address: \_\_\_\_\_

Property Owner's Name \_\_\_\_\_

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

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

Location of Land/Project (# and Street) \_\_\_\_\_

**Permit Fee** \$85 for *each* stove or insert + \$40 C/C fee = Total fee due \_\_\_\_\_  
(min. fee. \$125)

**COST OF PROJECT CONSTRUCTION: \$** \_\_\_\_\_ **Intended Use** \_\_\_\_\_

NY State Design Professional \_\_\_\_\_ Phone Number \_\_\_\_\_

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

Contractor Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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

Orange Co. electrician: \_\_\_\_\_ Lic# \_\_\_\_\_ Exp. Date \_\_\_\_\_  
(if applicable)

**Town of Wallkill approved electrical inspector list:**

- Frank Schmaus ----- 845-800-6909
- Joe Swanson ----- 845-496-4443
- John Taylor ----- 845-597-5072
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Application # \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

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

**AFFIDAVIT OF 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

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(To be submitted upon completion of work)  
FINAL PAPERWORK pg1

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/Compliance is being sought, hereby certifies that the building constructed under Town of Wallkill Building Permit Number \_\_\_\_\_ 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/use.

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

Sworn to before me this

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

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

2020 May indoor stove, gas fireplace/insert application

(To be submitted upon completion of work)  
**FINAL PAPERWORK pg2**

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, deposes and says 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)

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