

**Town of Southeast Building Department
One Main Street, Brewster, NY 10509
845-279-2123 Fax 845-279-3137**

SMALL PROJECT BUILDING PERMIT APPLICATION

Building Permit # _____	Date _____
Application Received _____	
Permit Issue Date _____	Approved by Zoning _____, Bldg _____
(Office use only)	

Property Owner's Name _____ Telephone _____

Address _____ Tax ID # _____

Contractor Name _____ License # _____

Address _____ Telephone _____

Street

City, State, Zip Code

Owner's Email _____ Contractor's Email _____

What type of work are you doing?

- Deck/Porch* Size _____
 - Shed Size _____
 - Above Ground Pool Size _____
 - In Ground Pool* Size _____
 - Fence Height _____ Length _____ Type _____
 - Window Replacement Total # to be replaced _____ Total # in Building _____
 - Roofing Size _____
 - Garage* Size _____ Detached or Attached #of Bays _____
- Circle One

Note: Projects with an asterisk (*) may require construction plans stamped by a licensed professional engineer or NYS registered architect under provisions of Article 147 7307.5.2 New York State Education Law.

What is the value of your project? - \$ _____

(A final cost affidavit may be required at the end of your project before a Certificate is Issued.)

*****WHAT IS THE AREA OF DISTURBANCE IN SQUARE FEET_____.*****

Any land disturbance greater than 5,000 sq. ft. requires an *MS-4 permit*. Failure to comply with this requirement will result in a *STOP WORK ORDER* and *NOTICE OF VIOLATION*.

Please provide the following with your application:

1. Construction Plans or Documentation for Improvement.
2. Completed "Notice of Utilization of Truss Type Construction, etc." form. Page 4-6.
3. Site Plan providing setbacks to existing buildings and property boundaries.
4. Copy of Contractor's License Issued by Putnam County.
5. Notarized Owner Consent Form if application is submitted by anyone other than the property owner.
6. Insurance Certificates- Liability and Workers' Compensation Forms both with the Town of Southeast listed as Certificate Holder and Additionally Insured. **Acceptable Workers' Comp. forms are:** C105.2 (9-07), U-26.3 and CE 200. **OR** When the homeowner is performing the work- A copy of the Declaration page of the Homeowner's Liability Insurance and Notarized W.C. Exemption Waiver Form # BP-1(12-08).
7. Driveway Permit, if driveway is being installed or modified.
8. Application Fee. Check or money order payable to the Town of Southeast.

Applicant/Owner's Name _____
Please Print

Applicant/Owner's Signature _____ Date _____

Office Use Only

Building Permit Fee \$ _____

Certificate of Occupancy/Compliance Fee \$ _____

Total \$ _____

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Owner Consent Form

- Completion of this form is required when the applicant is not the property owner

Parcel Id # _____ Property Address _____

Name of Applicant: _____ Phone _____

Project Description: _____

I/We, _____, owners(s) of the above property hereby give my/our permission to _____ (applicant's name) to submit the above identified building permit application on my/our behalf and to represent me/us in all proceedings concerning the referenced application.

_____ Date _____

Owner (s) Signature(s)

Sworn to before me this _____ day of _____, _____.

Notary Public