



**TOWN OF OSSINING**  
**BUILDING DEPARTMENT**  
**OSSINING OPERATIONS CENTER**  
101 ROUTE 9A, P.O. Box 1166  
OSSINING, N. Y. 10562  
(914) 762-8419 FAX (914) 944-0195

*Requirements to Obtain A Building Permit and Certificate of Occupancy*

To file a Building Permit you must submit the following documentation:

- A completed, signed and notarized Building Permit application, and the Building Permit fee.
- Three (3) copies of sealed and stamped plans by a New York State Licensed Design Professional for work being performed. If the project involves an enlargement of a structure or construction of a new structure (including an accessory structure), all zoning setbacks, required and actual, must be on the plans.
- A copy of your property survey (if doing any type of enlargement to a structure or adding any Accessory Structure such as a Swimming Pool, Garage, Shed, etc.). The new construction must be drawn, to scale, on the survey to show setback requirements are met.
- Copy of your homeowners insurance (for any work other than a complete, new house) showing you have General Liability coverage.
- Copy of the General Contractors' *Westchester County Home Improvement Contractor License* as required by Westchester County, and the contractors Workman's Compensation Insurance as required by New York State. *Note: If you are going to be the General Contractor you must supply a copy of your Workman's Compensation Insurance unless you are doing the work yourself with no paid assistance by other persons. If that is the case we have a Waiver form that you will fill out when submitting the application.*
- Code 53 number if you will do any digging for footings/foundation. The number is 1-800-962-7962. They will advise you if there are any underground utility lines where you will be digging and supply you with a Code 53 reference number that you must write on the Building Permit application.

**REQUIRED INSPECTIONS:**

The following inspections are REQUIRED during construction. A Certificate of Occupancy WILL NOT be issued if the inspections are not conducted. It is the responsibility of the Building Permit Holder to insure the inspections are performed. Not all inspections listed may be part of your construction (interior alteration may not require footings/foundation or you may not be doing any plumbing, for example), but you MUST get the inspections that pertain to your project:

- Footings prior to pouring (when formed and with re-bar installed).
- Foundation – before backfilling and after footing drains are installed.
- Framing
- Plumbing, Electrical and Insulation.
- Final (when all work is completed)

**Requirements To Obtain A Certificate Of Occupancy:**

- All required inspections as indicated above.
- An As Built Survey if a new house or if required by this Office.
- The Red and White sticker from the NY Board of Fire Underwriters showing the final electrical inspection was conducted and the system passed.
- All Planning Board conditions met if project involved Planning Board approval.



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 914-762-8419 FAX 914-944-0195

APPROVED _____20__
BP# _____
FEE (inc. CO) _____

**Application for Building Permit**

CODE 53 # \_\_\_\_\_

**APPLICATIONS THAT ARE INCOMPLETE OR MISSING DOCUMENTATION WILL NOT BE ACCEPTED**

Location \_\_\_\_\_  
 (Give street number, and name, or Lot number)

Section \_\_\_\_\_ Plate \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the New York State Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Name of Applicant \_\_\_\_\_ Date Submitted \_\_\_\_\_

Address of Applicant \_\_\_\_\_

State whether applicant is owner, lessee, agent, architect, engineer or builder \_\_\_\_\_

Name and address of owner of premises \_\_\_\_\_

\_\_\_\_\_ Telephone No. \_\_\_\_\_

1. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy \_\_\_\_\_

b. Intended use and occupancy of proposed construction \_\_\_\_\_

2. Nature of work (check all applicable): New Building \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_

Repair \_\_\_\_\_ Removal \_\_\_\_\_ Demolition \_\_\_\_\_ Other \_\_\_\_\_

Description of Work \_\_\_\_\_

3. Estimated Cost\* \_\_\_\_\_ Fee \_\_\_\_\_

\*Cost for the work described in the Application for the Building Permit including the cost of all construction and other work done in connection therewith, exclusive of the cost of the land.

4. If dwelling, number of dwelling units \_\_\_\_\_ Number of dwelling units on each floor \_\_\_\_\_

If garage, number of cars \_\_\_\_\_

5. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_

6. Dimensions of existing structures, if any: Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_

Number of Stories \_\_\_\_\_

Dimensions of same structure with alterations or additions: Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_

Height \_\_\_\_\_ Number of Stories \_\_\_\_\_

7. Dimensions of entire new construction: Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_

8. Size of Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Number of Stories \_\_\_\_\_

**YOU MUST ANSWER THE FOLLOWING FOUR QUESTIONS OR APPLICATION WILL NOT BE PROCESSED:**

9. Does proposed construction violate any Zoning Law, ordinance or regulation? \_\_\_\_\_

9A. Does proposed construction fall under the Steep Slopes Ordinance of the Town? \_\_\_\_\_

9B. Does proposed construction fall under the Freshwater Wetlands Ordinance of the Town? \_\_\_\_\_

9C. Does proposed construction fall under the Tree Protection Ordinance of the Town? \_\_\_\_\_

10. Name of Compensation Insurance Carrier \_\_\_\_\_  
 Number of Policy \_\_\_\_\_ Date of Expiration \_\_\_\_\_
11. Name of Architect \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ Phone No. \_\_\_\_\_
12. Name of Contractor \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ Phone No. \_\_\_\_\_
13. Name of Electrician \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ Phone No. \_\_\_\_\_
14. Name of Plumber \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_ Phone No. \_\_\_\_\_

STATE OF NEW YORK }  
 COUNTY OF WESTCHESTER} SS:

\_\_\_\_\_  
 Name of Applicant

being duly sworn, deposes and says: That they reside at \_\_\_\_\_  
 and is duly authorized as representative of the owner or (lessee) of the land herein described to make application for  
 permit to perform the work specified in said owner's (or lessee's) behalf; and that the statements contained herein  
 are true to the best of his knowledge and belief.

\_\_\_\_\_  
 Signature of Applicant

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

Sworn to before me this \_\_\_\_\_ }  
 \_\_\_\_\_ }  
 Day of \_\_\_\_\_, 20\_\_\_\_ }  
 \_\_\_\_\_

This application for a permit to perform the proposed work as herein described and as shown on the approved plans  
 is hereby APPROVED subject to collection of all fees associated with this application:

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Building Inspector

**WORK CANNOT BEGIN UNTIL THE BUILDING PERMIT IS ISSUED (INCLUDING PLUMBING AND/OR ELECTRICAL WORK).**

APPLICATION SHALL BE SUBMITTED IN TRIPLICATE.

SUBMIT **THREE SETS OF PLANS** WITH THE APPLICATION **INCLUDING A PLOT PLAN** AND ALL SPECIFICATIONS. SUBMIT **A SURVEY SHOWING NEW CONSTRUCTION TO SCALE** IF APPLICABLE.

APPROVED BUILDING PERMIT AND PLANS MUST BE KEPT AT THE CONSTRUCTION SITE AND AVAILABLE FOR INSPECTION THROUGHOUT THE ENTIRE PROJECT.

THE AREA UNDER THE JURISDICTION OF THE PERMIT **MAY NOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY IS ISSUED BY THIS AGENCY.**

THE **GENERAL CONTRACTOR SHALL SUBMIT A COPY OF HIS CURRENT WESTCHESTER COUNTY HOME IMPROVEMENT CONTRACTOR LICENSE** WITH THIS APPLICATION ALONG WITH A **COPY OF HIS WORKERS' COMPENSATION INSURANCE.**

ELECTRICAL AND PLUMBING WORK (IF APPLICABLE) SHALL BE PERFORMED BY WESTCHESTER COUNTY LICENSED TRADESMAN WITH A TOWN OF OSSINING ELECTRICAL AND/OR PLUMBING PERMIT.

ALL FEES DUE SHALL BE MADE BY CHECK OR MONEY ORDER MADE PAYABLE TO THE **"TOWN OF OSSINING"**.

SEE ATTACHED INSTRUCTION SHEET FOR ADDITIONAL INFORMATION NECESSARY TO APPLY.

**FOR OFFICE USE ONLY**