



**INCORPORATED VILLAGE OF MANORHAVEN**  
**"THE PEARL OF MANHASSET BAY"**

**33 Manorhaven Boulevard**  
**Port Washington, New York 11050**  
**Phone: (516) 883-7000; Fax: (516) 439-5574**

## **APPLICANT WORKSHEET FOR BUILDING PERMITS**

This worksheet is presented as a guide for your preparation of a complete building permit application. Please be careful to include all the documents and items required for the proposed work. Incomplete applications will not be accepted.

### **BASIC INFORMATION:**

- a. Tax Map #
- b. Property Location
- c. Existing use of premises
- d. Zoning
- e. Do FEMA zoning regulations apply? (yes or no)
- f. Do Coastal Zone regulations apply? (yes or no)
- g. Owner(s) of record and contact information
- h. Agent responsible for proposed work/construction
- i. Architect contact information
- j. Proposed work project details
- k. Owner's authorization (if the owner is being represented by an agent, an authorization must be signed & notarized)
- l. Zoning Board of Appeals Case # (if applicable)
- m. Architectural Review Board Case #

**NOTE:** *If an application is required for plan approval from the ZBA and/or ARB, the applicant is required to follow all directions, approvals, and agreements with one or both boards as applied. Any deviation(s) from approved plans will be resubmitted to applicable boards for additional approval.*

### **APPLICATION REQUIREMENTS:**

- a. Building Permit Application
- b. Construction plans: 2 sets for Residential and 2 sets for Commercial (1/4" scale ONLY)
- c. Two CURRENT Land Surveys
  - Shall show existing and proposed work footprints and lot coverage calculations
  - Shall show data pertinent to zoning and building code regulations
- d. FEMA Elevation Certificate for Flood Hazard Zones
- e. Photographs of building, property, and adjacent properties (\* SEE NOTE BELOW)
- f. Landscape Plan as approved per the ARB (Architectural Review Board)
- g. Certificate(s) of Occupancy and/or outstanding permit(s) – All issued
- h. Builder/Contractor Identification and Licenses – Must be received prior to issuance of building permit
- i. Certificate of Workman's Compensation – Must be received prior to issuance of a building permit
- j. Certificate of Liability listing the Village of Manorhaven must be received prior to issuance of a building permit
- k. Fees – to be determined on acceptance of building permit
- l. Letter of Approval from the Water District
- m. For Demolition Permits – please list carting company
- n. Soil test borings indicating level of water at high tide
- o. Signage – describe all information proposed on sign, type of sign, style of print and font size
- p. Notice of utilization of Truss type construction

### **ADDITIONAL DOCUMENTS AND/OR APPROVALS IF APPLICABLE:**

- a. Any application in flood plain areas will require ARB (Architectural Review Board) approval if FILL is brought onto the project site (per Chapter 72 of the Village Code)
- b. Nassau County Department of Health Services
- c. Nassau County Department of Public Works
- d. NYS Department of Environmental Conservation
- e. Village of Manorhaven Trustees (docks, bays, lakes, waterways, etc.)
- f. Fire Marshall – Business Multiple Dwellings (fuel tanks, fire alarms, fire suppression)
- g. ZBA – Zoning Board of Appeals decision
- h. ARB – Architectural Review Board approved site plan and approval resolution
- i. Board of Trustees Special Exception Determination



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## BUILDING PERMIT APPLICATION CHECKLIST

Date Received: \_\_\_\_\_

Project Section \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_ Application/Receipt # \_\_\_\_\_

Zoning: \_\_\_\_\_ Permit # \_\_\_\_\_ Permit Fee: \_\_\_\_\_

Fema:  YES  NO Coastal Zone:  YES  NO New Application: \_\_\_\_\_ Renewal: \_\_\_\_\_

### OWNER INFORMATION:

Property Location: \_\_\_\_\_

Owner of Record: \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### AGENT INFORMATION:

Agent Responsible for Proposed Work: \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### ARCHITECT INFORMATION:

Plans Prepared By: \_\_\_\_\_

New York State RA/PE License #: \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**PROPOSED WORK PROJECT DETAILS:**

Electrician Business Name: \_\_\_\_\_ Electrician's Name: \_\_\_\_\_

Village of Manorhaven Electrician's License # \_\_\_\_\_

Contractor Responsible for Proposed Work: \_\_\_\_\_

Nassau County Builder / Contractor License #: \_\_\_\_\_

Existing Use of Premises \_\_\_\_\_ CO # \_\_\_\_\_ Date Issued \_\_\_\_\_

Proposed Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is this project a new building:**  YES  NO

**If Yes:** Square Footage Details:

1st Floor \_\_\_\_\_ 2<sup>nd</sup> Floor \_\_\_\_\_ Mezzanine \_\_\_\_\_ Basement: \_\_\_\_\_

**Is this an addition, alteration or renovation?**  YES  NO

Size of Existing Building \_\_\_\_\_ Size of Proposed \_\_\_\_\_

Present % of Lot \_\_\_\_\_ Proposed % of Lot \_\_\_\_\_

Front Setback: \_\_\_\_\_ Rear Setback \_\_\_\_\_ Right Side \_\_\_\_\_ Left Side \_\_\_\_\_

**Additional Information:** All measurements in square feet:

Pool \_\_\_\_\_ Deck \_\_\_\_\_ Patio \_\_\_\_\_ Fence \_\_\_\_\_ Garage \_\_\_\_\_

Shed \_\_\_\_\_ Other \_\_\_\_\_

**Is this project a demolition:**  YES  NO

Demolition of: \_\_\_\_\_ Name of Carter: \_\_\_\_\_

\*\* Will any FILL be brought onto this site?  YES  NO

\*\*\* Will the property be regarded to change the site contours?  YES  NO

**TOTAL ESTIMATED COST: \$** \_\_\_\_\_

**Silt Fencing / Hay Bales MUST be in place PRIOR to the issuance of a permit!!  
NO EXCEPTIONS - INSPECTION REQUIRED!!**

**PARTY: NOTARY PUBLIC:**

***Application is hereby made for Issuance of a Building Permit pursuant to the Code of the Village of Manorhaven and the building Code of the State of the State of New York, and all amendments thereto, for the work as described herein and in the described plans and specifications.***

STATE OF NEW YORK }

COUNTY \_\_\_\_\_ } SS: \_\_\_\_\_ being duly sworn  
PRINT NAME OF PERSON SIGNING APPLICATION

Deposes and says that he/she is the applicant as named above. He/she is the \_\_\_\_\_  
OWNER OR AGENT, CONTRACTOR, OFFICER

Of said Owner or Owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of her/his knowledge and belief; and that the work will be performed in the manner set forth in this application, plans and specifications file herewith.

Sworn to, before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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

\_\_\_\_\_  
Notary Signature

STAMP WITH EXPIRATION DATE

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**THIS SECTION TO BE COMPLETED BY BUILDING INSPECTOR**

Building Inspector Approval: \_\_\_\_\_

Date of Approval: \_\_\_\_\_



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### OWNER AUTHORIZATION

STATE OF NEW YORK }  
COUNTY OF NASSAU } SS:

I, \_\_\_\_\_

residing at \_\_\_\_\_  
OWNER ADDRESS

being the owner of premises \_\_\_\_\_  
PROPERTY LOCATION

also known as Nassau County Tax Map # \_\_\_\_\_

hereby authorize \_\_\_\_\_  
AGENT

whose mailing address is \_\_\_\_\_  
AGENT ADDRESS

to appear on my behalf before the \_\_\_\_\_

of the Village of Manorhaven, and to file any documents required with references to my application for :

\_\_\_\_\_

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by the Board as a condition of their approval.

\_\_\_\_\_  
OWNER SIGNATURE

\_\_\_\_\_  
DATE

Sworn to, before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Signature

STAMP WITH EXPIRATION DATE

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**NOTICE REGARDING EXPIRATION OF PERMITS**

**Superintendent of Buildings**  
**Patrick M. Abramski**

Permit # \_\_\_\_\_

Location: \_\_\_\_\_

Work detailed in permits shall commence within 6 months of issuance and shall; be completed within (1) year of issuance, or renewed prior to expiration according to the Manorhaven Code. A Certificate of Occupancy must be obtained prior to use or occupancy. This also applies to Certificates of Completion, and Certificates of Approval (Plumbing.)

Inspections:

The permit process includes a series of required inspections. The general contractor is responsible for making appointments for the required inspections. The applicant, the owner's agent, and the owner, are equally responsible for obtaining the proper inspections. The owner is ultimately responsible for obtaining the final Certificate of Occupancy/Completion Approval prior to use or occupancy.

**I am the** (*check one*)    OWNER    OWNER'S AGENT    GENERAL CONTRACTOR

Name (print): \_\_\_\_\_

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

\_\_\_\_\_

The approved permit and plans shall be at the premises at all times. NOTE: The owner, general contractor, architect, or agent must be present during inspections.

I have read the information above and understand it.

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

**STATE OF NEW YORK**  
**COUNTY OF NASSAU**

Sworn to me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Signed

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

**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,  
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER  
CONSTRUCTION IN RESIDENTIAL STRUCTURES**

(In accordance with Title 19 NYCRR PART 1265)

**INCORPORATED VILLAGE OF MANORHAVEN**

**OWNER OF PROPERTY:** \_\_\_\_\_

**SUBJECT PROPERTY (ADDRESS AND TAX MAP NUMBER):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*PLEASE AFFIX APPROPRIATE SIGN OR SYMBOL IN ACCORDANCE WITH TITLE 19 NYCRR 1265*

*SECTION 382-B OF THE EXECUTIVE LAW.*

**PLEASE TAKE NOTICE THAT THE (CHECK ALL THAT APPLY):**

- New Residential Structure
- Addition to Existing Residential Structure
- Rehabilitation to Existing Residential Structure

**TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE  
(check each applicable line):**

- Truss Type Construction (TT)
- Pre-Engineered Wood Construction (PW)
- Timber Construction (TC)

**IN THE FOLLOWING LOCATION(S) (CHECK APPLICABLE LINE):**

- Floor Framing, Including Girders and Beams (F)
- Roof Framing (R)
- Floor Framing and Roof Framing (FR)

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

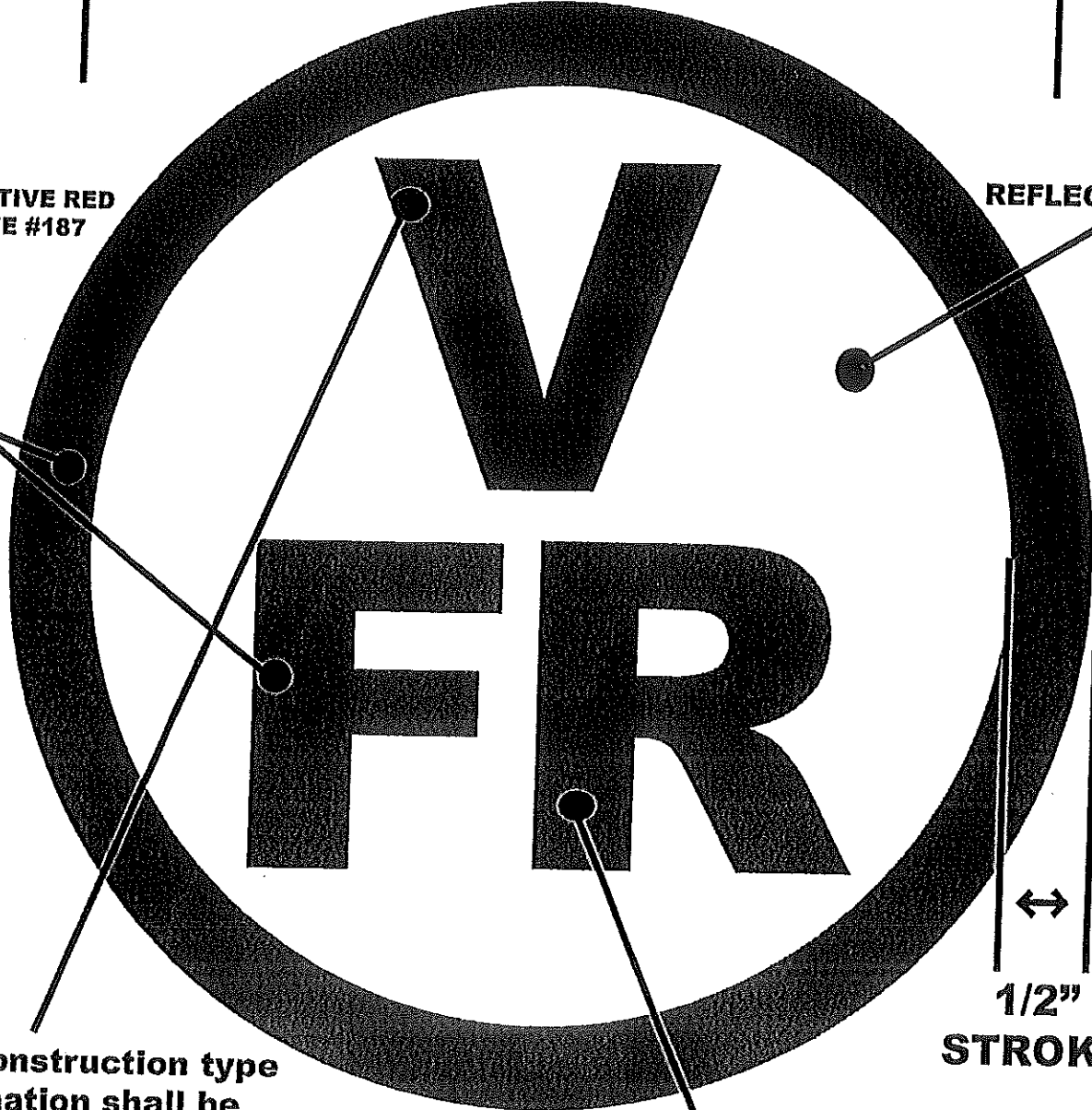
**PRINT NAME:** \_\_\_\_\_

**CAPACITY (Check One):**  Owner  Owner's Representative



REFLECTIVE RED  
PANTONE #187

REFLECTIVE WHITE



1/2"  
STROKE

The construction type designation shall be "I", "II", "III", "IV" or "V" to indicate the construction classification of the structure under section 602 of the BCNYS

**DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION**



"F"	FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS
"R"	ROOF FRAMING
"FR"	FLOOR AND ROOF FRAMING