



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 _____ 2nd 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

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

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 and is responsible for making appointments for inspections noted on the building permit placard.**

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

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Date: _____

Building Permit # _____

Location: _____

Approved By: _____

PERMIT TRACKING REPORT

Project Section _____ **Block** _____ **Lot(s)** _____ **Date Submitted:** _____

OWNER'S NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ BUSINESS PHONE: _____

EMAIL ADDRESS: _____

Plumbing License # _____ **Date:** _____

Demolition : _____

Rough Plumbing: _____

Excavation: _____

Mercury Test: _____

Footings: _____

Drywells: _____

Foundation: _____

Fireplace: _____

Foundation Survey: _____

Insulation: _____

Damp proofing: _____

Final Inspection: _____

Framing: _____

Site Work: _____

Building: _____

Variance: _____

ARB: _____

Plumbing: _____

Access: _____

Court: _____

Need Drawings: _____

Need Fees: _____

Title Search: _____

Notes: _____

Permit Description: _____

**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):

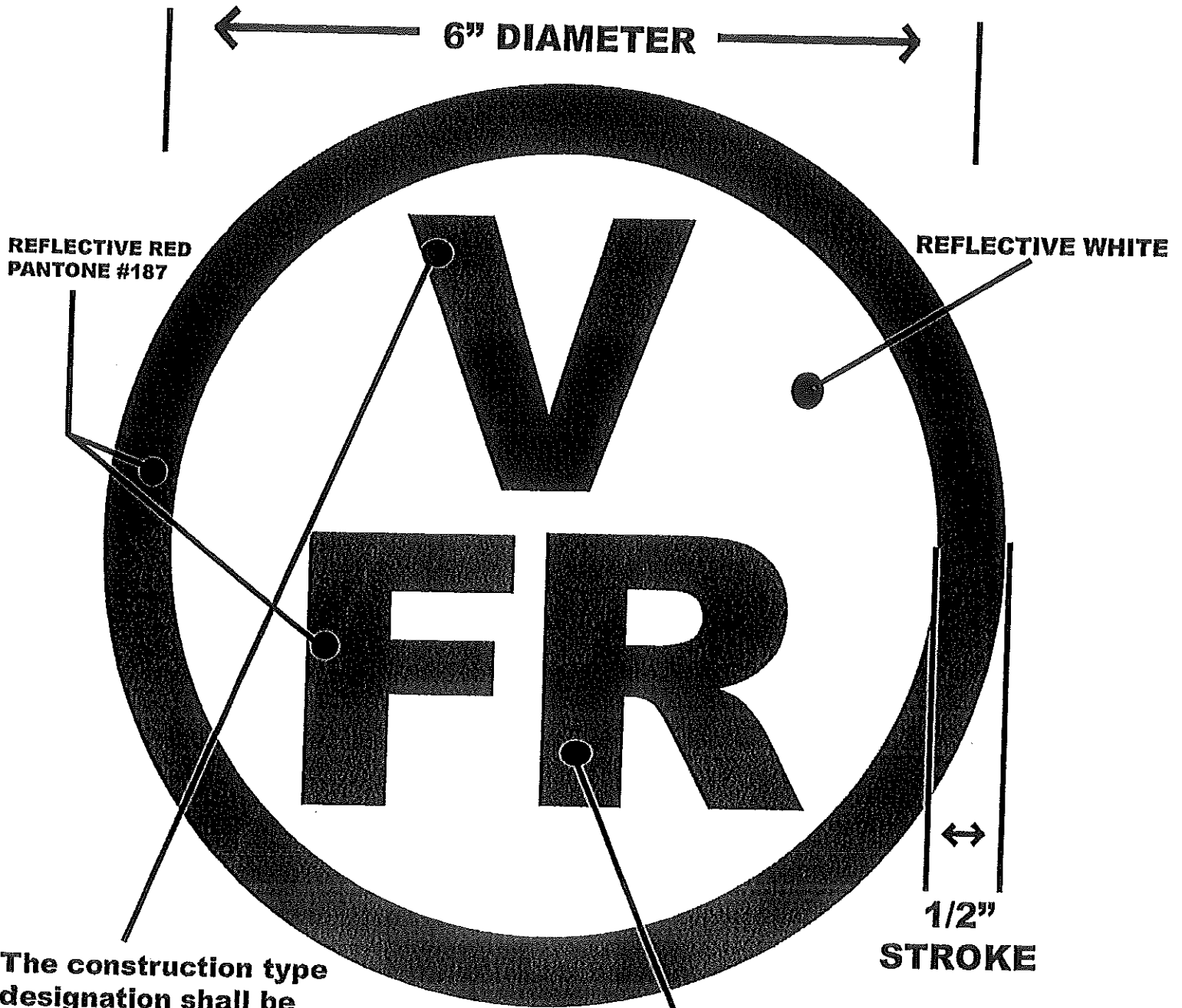
- ☐ Floor Framing, Including Girders and Beams (F)
- ☐ Roof Framing (R)
- ☐ Floor Framing and Roof Framing (FR)

SIGNATURE: _____

DATE: _____

PRINT NAME: _____

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



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

