

TOWN OF UNION VALE

DIRECTOR OF CODE ENFORCEMENT
GEORGE A. KOLB JR.



BUILDING DEPARTMENT
249 DUNCAN ROAD
LAGRANGEVILLE, NY 12540
(845) 724-5953
FAX: (845) 724-3757
Building2@UnionValeNY.US

BUILDING PERMIT APPLICATION

DEMOLITION of STRUCTURE

***** THE FOLLOWING MUST BE SUBMITTED AT TIME OF APPLICATION *****

☐ APPLIC FORM COMPLETED ☐ INSURANCE SUBMITTED ☐ INSURANCE ON FILE ☐ CONSENT IF APPLIC

Section 3303.1 Construction documents. Construction documents and a schedule for demolition must be submitted when required by the code enforcement official. Where such information is required, no work shall be done until such construction documents or schedule, or both, are approved.

Section 3303.2 Pedestrian protection. The work of demolishing any building shall not be commenced until pedestrian protection is in place as required by this chapter.

Section 3303.4 Vacant lot. Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade or in accordance with the ordinances of the jurisdiction having authority.

Section 3303.6 Utility connections. Service utility connection shall be discontinued and capped in accordance with the approved rules and the requirements of the authority having jurisdiction.

All Applicants Please Note

- 1- CERTIFICATION LETTER FROM CENTRAL HUDSON GAS & ELECTRIC that all utilities have been disconnected for compliance.**
- 2- PROVIDE PLOT PLAN showing structure to be removed.**
- 3- SCHEDULE PRE-SITE INSPECTION with this office before work begins.**
- 4- PROVIDE the Building Department with all RECEIPTS FOR REMOVAL from appropriate carter and/or transfer station for the proper disposal of all material.**
- 5- SCHEDULE FINAL INSPECTION by Code Official for compliance of removal.**

APPLICATION FOR BUILDING PERMIT

****PLEASE NOTE TO ALL APPLICANTS: ALL INFORMATION IS TO BE COMPLETED IN FULL.
PLEASE TYPE OR PRINT LEGIBLY OR APPLICATION WILL BE RETURNED.****

APPLICATION TYPE: ☐ Residential ☐ New Construction ☐ Commercial ☐ Renovation/Alteration

APPLICANT: _____ DATE: _____

ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

NAME OWNER OF BUILDING/LAND: _____

PROJECT SITE ADDRESS: _____

MAILING ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

BUILDING/CONTRACTOR/ ARCHITECT OR ENGINEER IF REQ.

COMPANY NAME: _____

ADDRESS: _____

TEL #: _____ CELL: _____ FAX #: _____

EMAIL: _____

DESCRIPTION OF WORK: _____

ESTIMATE COST OF PROJECT: _____

→ **Signature of Applicant/ Date**

REV: 7/25/16

OFFICE USE ONLY

APPROVALS: Zoning/ Fire/ Building

☐ Approved ☐ Denied DATE: _____

Signature of Code Enforcement Officer

FEE DUE: \$ _____ PAID ON: _____

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OWNER'S AUTHORIZATION & CONSENT FORM

This form is to be signed **and notarized when required** by the owner of record of the property in which the work outlined on the building permit application has been applied for. Signing of this document gives permission for work to be commenced by the contractor designated. All insurance requirements are to be submitted to the parcel owner and this office. In addition any and all Engineering/ Attorney's fees associated with review of this application are the sole responsibility for reimbursement to the Town of Union Vale by the owner of record as per Sect. 105-12 of the Town of Union Vale Code before any Certificate of Occupancy is issued.

Date: _____

Parcel Location: _____

Contractor: _____

Owner Signature: _____ Print: _____

NOTARY STAMP:

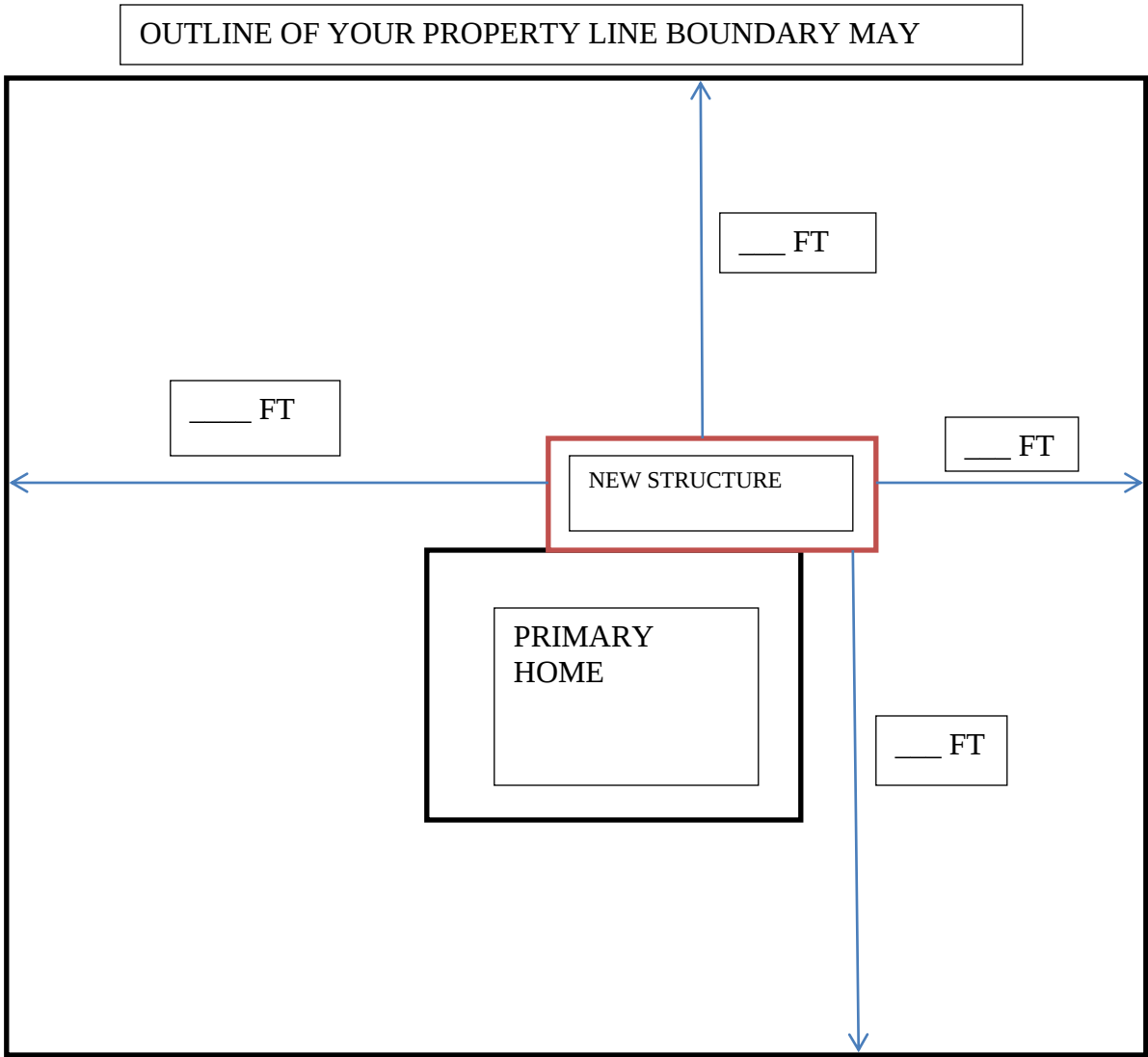
**(Req. New Home and/or any
application required to be reviewed
by the Town of Union Vale P.E.
and/ or Attorney)**



NOTICE TO APPLICANTS: 240-109 Certificate of Occupancy

It shall be unlawful for a building owner to use or permit the use of any building or premises or part thereof hereafter created, erected, changed, converted or enlarged, wholly or partly, in its use or structure until a Certificate of Occupancy shall have been issued by the Building Inspector and the Zoning Administrator.

SAMPLE ONLY PLEASE PROVIDE ACTUAL DEMENSIONS FROM YOUR PROPERTY LINES



STREET : # 249 DUNCAN ROAD _____



TOWN OF UNION VALE
Building Department

**LOCATION OF PROPOSED
STRUCTURE PLAN**

YOU ARE REQUIRED TO LOCATE THE PROPOSED STRUCTURE ON THE BELOW PLAN IN RELATION TO THE EXISTING HOME. PROVIDE ALL DISTANCES FROM ALL PROPERTY LINES TO NEW STRUCTURE AS WELL AS EXTERIOR DEMENSIONS. YOU MAY ALSO USE A COPY OF YOUR CURRENT PROPERTY SURVEY

***** SEE BACK FOR SAMPLE*****

NAME: _____ DATE: _____

GRID # _____ ADDRESS: _____

PRIMARY
HOME