

APPLICATION FOR GENERATOR PERMIT

Application Checklist

Permit Applications

- **Building Permit Application**
 - **Note if LP Gas (Propane) or Natural Gas.**
 - **Plumber Information (When required)**
- **Electrical Permit Application**

Worker's Compensation Certificates

Disability Insurance Certificates

Copy of Westchester County Licenses

- **Installation of new or upgrade of Propane Tanks requires Propane Company information and copy of County Home Improvement License.**
- **Electrician**
- **Plumber**

Survey and Site Plan showing location of Generator and Tanks

Installation Manual for Generator

Application and Permit Fees

Note: Additional information may be required. See attached.

Incomplete applications will be returned without review.

A standard one (1) week review is typical for all applications. Additional time is required based on the extent and scope of work proposed.

***** DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY *****

Y N

Wetland Permit

Environmental Inspection

Health Department Approval

Y N

Steep Slope Permit

Tree Removal Permit

TOWN OF CORTLANDT
DEPARTMENT OF TECHNICAL SERVICES

CODE ENFORCEMENT DIVISION

Town Hall, 1 Heady Street
Cortlandt Manor, NY 10567

914-734-1010 FAX 914-293-0991

<http://www.townofcortlandt.com> e-mail: code@townofcortlandt.com

Permit No. _____
Date: _____
SCA: _____

TOWN OF CORTLANDT
DEPARTMENT OF TECHNICAL SERVICES
Code Enforcement Division
Town Hall, 1 Heady Street, Cortlandt Manor, NY 10567
914-734-1010 FAX 914-788-0294

CO No. _____
CC No. _____
Date: _____

<http://www.townofcortlandt.com> e-mail: code@townofcortlandt.com

GENERATOR PERMIT APPLICATION

Application is hereby made to the Code Enforcement Division for the issuance of Permits pursuant to the Code of the Town of Cortlandt. The applicant agrees to comply with all applicable laws, ordinances and regulations. The applicant attests that the proposed work outlined in this application conforms to all provisions of the Code of the Town of Cortlandt and laws of New York State.

Permit type: ___ Residential ___ Commercial/Business

Site Data:

Section _____ Block _____ Lot _____ Zone: _____ Area of lot(s): _____

Street Address: _____

Project Description: _____

Construction Classification: Type: 1A/B [] 2A/B [] 3A/B [] 4 [] 5A/B []

Occupancy/Use: Detached 1 Family [] , Detached 2 Family [] , Townhouses [] , R-1 [] , R-2 [] , R-3 [] , R-4 []

A-1 [] , A-2 [] , A-3 [] , A-4 [] , A-5 [] , B [] , E [] , F-1 [] , F-2 [] , H-1 [] , H-2 [] , H-3 [] , H-4 [] , H-5 [] ,

I-1 [] , I-2 [] , I-3 [] , I-4 [] , M-1 [] , S-1 [] , S-2 [] , U []

Applicant:

Name: _____

Address: _____

Phone: _____ Mobile: _____

E-Mail: _____

Owner:

Name: _____

Address: _____

Phone: _____ Mobile: _____

E-Mail: _____

Lessee:

Name: _____

Address: _____

Phone: _____ Mobile: _____

E-mail: _____

Architect/Engineer:

Name: _____

Address: _____

Phone: _____ Mobile: _____

E-mail: _____

Name: _____

Address: _____

E-mail: _____

Phone: _____ Mobile: _____

Builder/Contractor/Developer:

Name: _____

Address: _____

Westchester County License #: _____

Phone: _____ Mobile: _____

Electrician:

Name: _____

Address: _____

Phone: _____ Mobile: _____

Westchester County License #: _____

Plumber:

Name: _____

Address: _____

Phone: _____ Mobile: _____

Westchester County License #: _____

Cost of Construction:

Cost of Construction \$ _____ (Cost for the work described in the Application for Building Permit, include the cost of all of the construction and other work done in connection therewith, exclusive of the cost of the land).

Authorization:

State of New York, County of Westchester, _____ being duly sworn deposes and says they are the owner or authorized representative by **attached completed proxy statement** and are duly authorized to perform or have performed said work and to make and file this application: that all statements are true to the best of their knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me _____ Owner or Authorized Representative Signature: _____
this _____ day of _____ Print Name: _____
Notary Public: _____

Confirmation All Taxes Paid: _____ Date: _____

***** DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY *****

Fee:	Building Permit	\$ _____	Driveway Permit	\$ _____
	Environ. Insp.	\$ _____	Steep Slope Permit	\$ _____
	Plumbing Permit	\$ _____	Wetland Permit	\$ _____
	C of O fee	\$ _____	Tree Removal Permit	\$ _____
			Total	\$ _____

Wetlands/Steep Slope: Out _____ Return _____ Engineering: Out _____ Return _____
Planning Board: ___No ___Yes _____Date Open Building Permit ___No ___Yes # _____
ARB: ___No ___Yes ___Date Open Space Committee: ___No ___Yes ___Date

Fill out all spaces on the permit application. All information is essential and no application for permit will be reviewed until all the required items are provided.

No building permit application will be accepted or issued after 3:30 PM

DATED 10/2014

INFORMATION TO BE SUPPLIED WITH EVERY GENERATOR PERMIT APPLICATION

1. Application with non-refundable Application fee (check or cash).
2. Copy of survey of the property by a licensed land surveyor (TO SCALE).
3. Site plan showing relationship of proposed activity or construction to the property lines and existing structures. *The basis for this can be taken from the survey, but the survey itself cannot be altered (NYS Education Law).*
4. Copy of the Worker's Compensation Form BP-1 and homeowner's insurance declarations page if the owner is acting as the contractor or copy of Contractor's Westchester County License, Worker's Comp. policy and Disability policy on New York State approved forms (C105.2, DB 120.1 or other).
5. Confirmation that the taxes have been paid on property (Receiver of Taxes signature on application form.)
6. The name, address and Westchester County license number of plumber and electrician.
7. If the applicant for any permit is not the owner of the property where the work will be performed, a completed Proxy Statement must be submitted for any type of work. No Exceptions.
8. Estimated Cost of Construction, including materials and labor.

Most Permit Applications require a pre-site inspection prior to the issuance of a permit. This inspection could be scheduled at the time of filing the Permit Application.

Every Permit Application requires a Wetlands, Steep Slope, Tree Removal inspection before the issuance of a Building Permit. Inspections are generated by this office.

Please Note: Permits are valid for one (1) year and may be extended for up to two (2) years if approved.

NO APPLICATIONS WILL BE ACCEPTED BY MAIL.

TOWN OF CORTLANDT

DEPARTMENT OF TECHNICAL SERVICES

Code Enforcement Division

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914-734-1011 FAX 914-293-0991

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PROXY STATEMENT

_____ is the owner of the property located at
_____ and has authorized _____
to make the attached application for _____ and to represent
them at all Board meetings.

Signature of Owner

NOTARY:

Sworn to before me

this _____ day of _____

Notary Public: _____

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Plumbing Information for Building Permit

Licensed Plumber complete this page and Plumbing Fixture Table (on back of this sheet) to be submitted with application for a Building Permit.

Application No. _____

Building Permit No. _____

Plumbing Contractor: _____

Address: _____

Westchester County License No.: _____ Phone No.: _____

Owner: _____

Property Address: _____

Nature of Work: _____

Licensed Plumber's Certification

I hereby certify that the work will be completed in compliance with the New York State Uniform Fire Prevention and Building Code.

Plumber's Signature

Date

Note:

As of October 1, 1987, all modular houses must have all fixtures disconnected to enable a water test of the waste lines through the roof vents.

As of April 1, 1998, Plumber's Certificate must be accompanied by a Xerox copy of Plumber's License.

Effective Dec. 1, 2000 Mercury gauges are not to be used for Gas Testing in the Town of Cortlandt. An Air test (1 1/2 times the working pressure for a minimum of 30 minutes) or testing procedures as outlined in FGCNYS or NFPA 54, Chapter 4, are acceptable as long as the gauge does not contain Mercury.

Plumbing Fixture Table	Fixture Location and Number of Fixtures (Table of fixtures to include fixtures reset on existing roughing.)																
	Exterior	Basement	First Floor	Second Floor	Third Floor	Fourth Floor	Fifth Floor	Attic or Roof	Fixture Type	Exterior	Basement	First Floor	Second Floor	Third Floor	Fourth Floor	Fifth Floor	Attic or Roof
Fixture Type									Fixture Type								
AIR CONDITIONER									HOSE BIB/ HYDRANT								
BAR SINK									HUMIDIFIER								
BASIN/LAVATORY									ICE MAKER								
BATH TUB									OTHER FIXTURES								
BEVERAGE DISPENSER									RPZ/CHECK VALVE								
BIDET									ROOF DRAIN								
COFFEE URN/MAKER									SERVICE/MOP SINK								
CONDENSATE DRAIN									SEWER EJECT PUMP								
DENTAL CHAIR/UNIT									SHAMPOO BASIN								
DISHWASHER									SHOWER								
DISPOSAL									SINK								
DRINKING FOUNTAIN									SLOP-SINKS								
FLOOR DRAIN									STEAM TABLE								
FLOOR SINK/O.S.D.									SUMP PUMP								
GAS BOILER									SWIMMING POOL								
GAS DRYER									TUB/WHIRL POOL								
GAS FRYER									URINAL								
GAS FURNACE									VACUUM SYSTEM								
GAS GENERATOR									WASH TRAY								
GAS GRILL									WASH-BASINS								
GAS MISCELLANEOUS									WASHING MACHINE								
GAS OVEN/BROILER									WATER BOOSTER PUMP								
GAS POOL/HOT TUB HTR									WATER CLOSET								
GAS RANGE/WOK									WATER HEATER								
GAS ROOF TOP UNIT																	
GAS SPACE HEATER																	
GAS STOVE																	
GAS WATER HEATER																	

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ELECTRICAL PERMIT APPLICATION

Application is hereby made to the code Enforcement Division for the issuance of Permits pursuant to the Code of the Town of Cortlandt. The applicant agrees to comply with all applicable laws, ordinances and regulations. The applicant attests that the proposed work outlined in this application conforms to all provisions of the Code of the Town of Cortlandt and laws of New York State. It is further agreed that the premises will not be occupied until a Certificate of Occupancy has been issued and all fees are paid in full.

Site Data:

Section _____ Block _____ Lot _____ Building Permit _____

Application for a permit is hereby made to cover electrical installations as stated below. Work on same will be commenced on or about _____, 20____.

Street Address: _____

Existing Use & Occupancy _____ Proposed Use & Occupancy _____

Owner:

Name: _____

Address: _____

Phone: _____ Mobile: _____

Lessee:

Name: _____

Address: _____

Phone: _____ Mobile: _____

Electrician:

Name: _____ Westchester County License #: _____

Address: _____ Phone: _____ Mobile: _____

Description of Work: _____

It is hereby agreed that all work shall be done to conform to the rules, regulations and ordinances of the Town of Cortlandt, State of New York, and in compliance with the requirements of the National Electrical Code governing such installations.

Electrical Inspection Service _____

Electrical Inspector shall be licensed by Westchester County and prominently display their license while performing inspections and comply with all other County requirements.

Notarization:

State of New York, County of Westchester: _____ being duly sworn deposes and says that he is the person who signed this instrument and duly acknowledged that he executed the same for the purposes therein contained.

Sworn to before me this _____

Electrician's Signature: _____

day of _____, 20____

Print Name: _____

Notary Public: _____

Rev. 6/2021