

# TOWN OF WARWICK MINOR - BUILDING PERMIT APPLICATION

### FEES:

**\$100 APPLICATION + \$10 PER \$1000 OF COST (ROUND UP TO NEAREST THOUSAND)  
OR \$100 + \$1 PER SQ. FT. (FOR ADDITIONS)**

**Payments accepted: Cash or Check. Make Checks Payable to: Town of Warwick  
PAYMENT DUE WITH APPLICATION SUBMISSION!**

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the Code of the Town of Warwick. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Date \_\_\_\_\_

**CHECKLIST: All must be checked prior to submitting permit to Building Department!!**

\_\_\_\_\_ APPLICATION NOTARIZED                      \_\_\_\_\_ PROJECT DESCRIPTION IN DETAIL  
\_\_\_\_\_ SURVEY SHOWING SETBACKS              \_\_\_\_\_ INSURANCE (WAIVER OR CERTIFICATE)

**\*IF YOU HAVE PURCHASED THIS PROPERTY WITHIN LAST 6 MONTHS – PROVIDE DOCUMENTATION\***

**SITE DATA:**

Section - Block – Lot: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

**PROJECT:**

- \_\_\_\_\_ New
- \_\_\_\_\_ Existing (on property already – additional money owed)
- \_\_\_\_\_ Accessory Building (shed, barn, garage, etc)
- \_\_\_\_\_ Fence
- \_\_\_\_\_ Swimming Pool/Hot Tub
- \_\_\_\_\_ Open Deck/Porch – (provide detailed sketch)
- \_\_\_\_\_ Finish Basement – (provide layout sketch)
- \_\_\_\_\_ Addition – (provide NYS stamped plans)
- \_\_\_\_\_ Renovations – (provide scope of work in detail)
- \_\_\_\_\_ Solar Panels (Roof Mount or Ground Mount)
- \_\_\_\_\_ Woodstove/Pellet Stove/Fireplace
- \_\_\_\_\_ Roof Replacement (re-roof)
- \_\_\_\_\_ Windows
- \_\_\_\_\_ Renewal of Permit #: \_\_\_\_\_
- \_\_\_\_\_ Other: \_\_\_\_\_

**DESCRIPTION:**

**SIZE:**

_____	_____	X
_____	_____	X
ABOVE ___ INGR ___	_____	X
_____	_____	X
_____	_____	X
_____	_____	X
# of Panels _____	kW= _____	_____

<b>ESTIMATED COST:</b> \$ _____
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**PROVIDE FOLLOWING (if applicable):**

Planning Board Approval (if required)  
If yes, Date approved: \_\_\_\_\_

ZBA Variance or Special Use Granted (If any):  
If yes, Date approved: \_\_\_\_\_

<b>APPLICATION FEE:</b> \$ <u>  \$100  </u>
<b>BUILDING FEE:</b> + \$ _____
<b>TOTAL FEE:</b> = \$ _____
(*see fee schedule at top of page to calculate cost)

**OWNER:**

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

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

Phones: \_\_\_\_\_ Mobile: \_\_\_\_\_

**ARCHITECT / ENGINEER**

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

**CONTRACTOR:**

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

**INSURANCE (check one):** (MUST be provided if having a builder do any work on your property)

- Builder / Contractor / Developer - New York State Insurance Certificate (*Workers Compensation*) (U-26.3 or C-105 are the ONLY FORMS ACCEPTED! – ACORD FORMS ARE NOT VALID PROOF!)  
Town of Warwick must be listed as certificate holder.
- CE-200 Form: Certificate of Attestation of Exemption. To be filled out on [www.wcb.ny.gov](http://www.wcb.ny.gov) website.
- WC/DB BP-1 certificate: Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance.

**AUTHORIZATION (NOTARY):**

State of New York, County of \_\_\_\_\_, \_\_\_\_\_, being duly sworn deposes and says he/she is the owner and is duly authorized to perform or have performed said work and to make and file this application; that all statements are true and to the best of his/her 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

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

(In front of a notary!)

**Owner Signature:** \_\_\_\_\_

**NOTARY PUBLIC:** \_\_\_\_\_

Print Name: \_\_\_\_\_

Stamp:



*Owner waiver letter (needed if not the home owner)*

**FOR TOWN USE ONLY**

FEE PAID: \_\_\_\_\_ CHECK #: \_\_\_\_\_ CASH                      AMOUNT OF CHECK: \_\_\_\_\_

Comments: \_\_\_\_\_ Application #: \_\_\_\_\_