

TOWN OF WARWICK
MAJOR - BUILDING PERMIT APPLICATION
FEE: \$100 + \$1 PER SQ. FT

Payments accepted: Cash or Check (make payable to Town of Warwick)

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: _____

Street Location: _____

Section - Block - Lot: _____ - _____ - _____

****Did you purchase this property within the last 6 months – YES or NO *if yes, provide copy of Bargain & Sale deed**

___ New Construction or ___ Dwelling Rebuild

Number of Bedrooms: _____

Number of Bathrooms: Full _____ Half _____

Number of Stories: _____

Number of Kitchens: _____

Basement: Finished or Unfinished

ESTIMATED COST: \$ _____

SQUARE FOOTAGE: _____

FEES:

Application Fee: **\$ 100**

SQ. FT. @ \$1 + _____

Total Fee: = _____

PROJECT DESCRIPTION:

(ALL need to be checked prior to submission):

___ Site plan cover sheet with notes and approval block signed (if part of Subdivision)

___ NYS Stamped construction plans (one copy)

___ Driveway Entrance Permit with Bond (separate application)

___ Flood Zone Map FIRMette (8.5 x 11 Printout) Website: msc.fema.gov

___ New York State Workers' Compensation Certificate

___ Septic Design with Test Results & System Info - (3 sets to scale signed/sealed from NYS engineer)

___ Survey showing location of proposed dwelling, required minimum setbacks, building footprint with offsets, proposed well, septic & driveway, open space/easements, wetland locations & limits of disturbance – signed/sealed by a licensed land surveyor of NY State.

___ Approx. elevation of house location (topography) = _____ (nearest 10' contour).

___ Ridgeline Overlay District (elevation 600' or more) - Siding & Roofing document regarding Light Reflective Value of 0-60% must be shown)

___ Provide completed Affidavit of New Construction form

OWNER:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone : _____ Email: _____

ARCHITECT / ENGINEER:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

BUILDER/CONTRACTOR:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

AUTHORIZATION:

State of New York, County of, _____, _____, being duly sworn deposes and says (s)he 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

(In front of a notary)

Property Owner Signature: _____

this _____ day of _____

Print Name: _____

(owner waiver form needed if not the owner signing)

Notary Public: _____

Stamp:

FOR TOWN USE ONLY

FEE PAID: _____

CHECK #: _____

AMOUNT OF CHECK: _____

Comments: _____ Application #: _____

TOWN OF WARWICK

132 KINGS HIGHWAY
WARWICK, NEW YORK 10990



BUILDING DEPT (845) 986-1127 EXT. 258/260
Email: building@townofwarwick.org

Affidavit for New Construction

Date: _____

Owner Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

S-B-L: _____ - _____ - _____

Parcel Address: _____

I, _____, as the owner of the above-referenced parcel, hereby acknowledge and affirm that in the event of any field changes during the course of construction, a complete set of revised, stamped architectural plans will be submitted to the Town of Warwick Building Department prior to the issuance of a Certificate of Occupancy.

AUTHORIZATION AND AFFIRMATION

State of New York

County of _____, _____, being duly sworn, deposes and states that (s)he is the owner of the aforementioned property and is fully authorized to perform, or cause to be performed, the work described herein. Furthermore, (s)he affirms that all statements made in this affidavit are true to the best of his/her knowledge and belief, and that the construction will be completed in accordance with the submitted application, accompanying plans, and filed specifications.

Sworn to before me

(In front of a notary)

Property Owner Signature: _____

this _____ day of _____

Print Name: _____

Notary Public: _____

Stamp:

**TOWN OF WARWICK
DRIVEWAY ENTRANCE APPLICATION**

Date _____

Application #: **D** _____

Permit No. _____

Application is hereby made to the Building Department/Department of Public Works for the issuance of a Driveway Entrance permit pursuant to the Code of the Town of Warwick. The applicant agrees to comply with all applicable laws, ordinances and regulations. **Before a permit is issued:** this form must be completed and returned to the Building Department office with the correct fees & data then forwarded to the DPW for approvals.

SITE DATA:

Address Location: _____ Sec-Blk-Lot:: _____ - _____ - _____

Project Description: _____

OWNER:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phones: _____ Email: _____

NEW DRIVEWAY CUT

☐ Town Road

☐ Private Road – except Glenmere Homesites & Alexander Road

ALL DRIVEWAYS REQUIRE MINIMUM 25' PAVING FROM ROADWAY INCLUDING STATE & COUNTY

CHECKLIST: (ALL must be checked prior to submission)

____ Provide copy of proof of liability insurance in the amount of \$300,000 bodily and \$100,000 property coverage naming the Town of Warwick as additionally insured.

____ Provide cash or certified/bank check in the amount of \$1,500 (made to: Town of Warwick) to be refunded to the owner after satisfactory completion and DPW approval.

____ \$150 (for DPW inspection fee)

____ Provide copy of survey lot with driveway location on sheet *NO LARGER* than 8½ x 14.

____ Applicant **MUST** mark driveway entrance location with stakes & display address number.

POSTED BY: Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

(who the money will be returned to)

AUTHORIZATION:

State of New York,

County of _____, _____ being duly sworn deposes and says he 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 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____

Notary Public: _____

Owner Signature: _____

Print Name: _____

AMOUNT RECEIVED:

\$ _____ By: _____

FOR TOWN USE ONLY

Monies Bond Received By: _____ Amount: _____ Date: _____

DPW Initial Driveway Inspection: Pass: _____ Fail: _____ Inspector: _____ Date: _____

DPW Final Driveway Inspection: Pass: _____ Fail: _____ Inspector: _____ Date: _____

New Home Construction: ☐

Comments: _____

TO: **Town of Warwick**
Building Department
132 Kings Highway
Warwick, NY 10990

I hereby authorize; _____

To act on my behalf in matters before the Building and Planning Departments of
the Town of Warwick, including obtaining of all permits.

OWNER SIGNATURE: _____

OWNER NAME: (Print) _____

LEGAL ADDRESS: _____

DATE: _____

SECTION: _____ **BLOCK:** _____ **LOT:** _____

PROPERTY ADDRESS: _____

TOWN OF WARWICK



132 KINGS HIGHWAY
WARWICK, NEW YORK 10990

BUILDING & PLANNING DEPT (845) 986-1127
FAX NO. (845) 987-9644
BUILDING DEPT EXT. 258/260
PLANNING DEPT EXT. 261
ENGINEER EXT. 259

As of September 16, 2019

**Please be advised a
foundation location survey
(certified from a NYS land
surveyor) showing all
building setbacks, any
known easements & rights
of way must be provided
prior to the start of
framing for a new dwelling.**

ENERGY TESTING CONSULTANTS

Home Energy Consultants LLC.

Ron Samuelson
278 Freedom Rd. Pleasant Valley N.Y. 12569
ronsamuelson@SaveEnergyNY.com
Phone: 845-635-8302
Cell: 845-518-5192

Energy Efficiency Consultants LLC.

Allen K. Hicks
282 N. Route 303 Congers, N.Y. 10920
Ahicks6884@yahoo.com
Cell: 914-260-1214

TL Phillips Enterprise LLC

Tim Phillips
8 Ivy Cliff Rd. Campbell Hall, NY 10916
energy@tlphillips.com
Phone: 845-476-8570

Spruce Mountain Inc

P.O. Box 456 Bloomingburg, N.Y. 12721
Troyhodas@gmail.com
Phone 845-800-4371

Efficient Energy Services

Frank & Colleen Jackson
200 Lewis Landing Rd, Middletown, NY 10940
Phone: 845-672-4003

Brennan Brennan Inc.

Kevin Brennan
65 Pond St, Staten Island, NY 10309
brennanbrennaninc@gmail.com
Phone: 646-354-0892

It is recommended that the owner or builder get in touch with a business such as one of the above for guidance on the insulation of the new house so the house will pass the 2020 Energy Code requirement of 3 air exchanges per hour.