TOWN OF POUGHKEEPSIE NEW SINGLE FAMILY RESIDENTIAL ADDITION TO SINGLE FAMILY PLAN SUBMITTAL REQUIREMENTS

Name of Applicant	
Building Address or Lot #_	

In order to expedite your plan review, please check your plans and application to be sure the following information has been included. When each of the items has been checked by you, submit the form with your application, application fee, and two (2) sets of plans for Building Department review. NOTE: APPLICATIONS FOR BUILDING PERMITS CANNOT BE ACCEPTED FOR PLAN REVIEW UNTIL THE SUBMITTAL IS COMPLETE.

Applicable Codes: 2016 Uniform Code Supplement, International Residential Code, and 2016 Supplement to/and the NYS Energy Conservation Construction Code 2016 and NFPA/NEC

	Wind		Subject to Damage From						
Ground Snow	Speed	Seismic Design	Weathering	Frost line	Termite	Decay	Winter Design	Ice shield underlayment	Flood Hazards
Load	(mph)	Category	Weathering	depth	Termite	Decay	Temp	required	Hazaras
40	90	В	Severe	42"	Moderate to Heavy	Slight to Moderate	2	yes	Adopted 7/18/90 Current FIRM 9/8/99

BUILDING PERMIT APPLICATION __ Application must be fully completed Must be signed by owner or submitted with a letter of agency SITE PLAN ___ North arrow ___ Lot dimensions--all sides ____ Size and location of any easements or right-of-ways ___ Names and locations of all adjacent streets ___ Locations of proposed and existing structures ____ Setback dimensions--front, rear, and all sides ___ Outside building dimensions and distances between buildings on building site ____ Driveways, exterior stairs, landings, patios, and decks ____ Location, type, and elevation of any retaining walls BUILDING PLANS (two complete sets required) Cross sections drawn SPECIFICALLY for this structure with materials to be used. ____ Floor plan layouts and use of all rooms including basement (include future uses) ____ Complete dimensions of all rooms, decks, porches, landings, stairs, cantilevers, bearing walls, and column locations ___ Ceiling heights all levels Sizes and types of doors and windows (showing required safety glazing) ___ Light, ventilation and egress calculations and requirements for all rooms ___ Window well dimensions for emergency escape windows below grade ___ Fire separation between house and garage ____ Guardrail height and pattern Stairway landings, rise, run, handrail, and headroom heights for interior and exterior stairs

Building elevations with finish grade line on all sides(exterior views) Attic and crawl space ventilation and access Typical footing size, depth, and reinforcement Foundation wall height, thickness, and reinforcement Foundation sill and anchor bolts Wall material, stud size and spacing, wall sheathing, interior finish, weather barrier, exterior finish, and masonry veneer Floor sheathing Solid blocking Roofing material and sheathing Framing details Grade and species of lumber Size and material of all beams, headers, and columns Rafter size, spacing, spans, and ties and/or truss layout Joist size, spacing, and spans(engineered joists, beams, etc. must be specifically noted by manufacturer and model)
ELECTRICAL DETAILS (a separate electrical permit will be require) All light and fan locations GCFI's indicated Smoke detector locations Carbon monoxide detector location
PLUMBING DETAILS (a separate plumbing permit will be required) Location of all plumbing fixtures including layout for future fixtures Floor drains, water heater, clothes washer and dryer locations
MECHANICAL DETAILS (a separate heating permit will be required) Furnace location Combustion air location * Mechanical sizing information-use attached form
ENERGY CODE ANALYSIS * See Capter 11 of NYS Residential Code
DEPARTMENT APPROVALS Prior to review the Building Department will contact other town departments to verify building approvals. It is your responsibility to contact the applicable departments for approvals. The departments contacted are:
 Water Department, if connected to a town water system462-6535 Sewer Department, if connected to a town sewer system462-2280 If on a septic system a SAN 34 form will be sent to the County Health Dept for approval. Zoning Department485-3651 Planning Department485-3657 Engineering Department485-3638 Highway Department, if driveway enters a town road. (Phone # 452-1750) If the driveway connects to a state or county road a letter of approval for a curb cut permit must be submitted from the applicable department. Approved address form from Dutchess County 911 must be included.

NYS Codes are available online at --- http://publicecodes.citation.com/st/ny/st/index.htm

Town of Poughkeepsie New Single Family Home Addition to Single Family Home Building Permit Application

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Permit	#		
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Property Address: Street:	City:		Zip:	
Grid Number:	Zoning District:			
Owners Name:	Phone: (H)	(W) _		
Address: Street:	City:	State:	_ Zip:	
Builders Name:	Phone:			
Address: Street:	City:	State:	_ Zip:	
1) Attach Contractors workman comp. C105.2 or U26.3 or C	certificate of exempt and Dis	sability DB-120.1		
Arch/Eng Name:	Phone:			
Address: Street:	City:	State:	_ Zip:	
Electrician:	Phone:			
Address: Street:	City:	State:	Zip:	
Electrical Inspection Agency	(Attac	h Agency Applic	ation Form)	
Licensed Heating Contractor:	Phone:			
Address: Street:	City:	State:	_ Zip:	
Licensed Plumber:	Phone:			
Address: Street:		State:	_ Zip:	
Fire Alarm Installer:				
Address: Street:	City:	State:	_ Zip:	
Separate permits are required for electric, plumbing, heati			sidential interconnected	
smoke alarm needs a permit and to be installe Project Description:	•			
Is the property located in a flood zone? Yes \(\sigma\) No Are any wetlands located on the property? Yes \(\sigma\) No	* * * * *	aevetopment per	mu is requirea.	
Please contact the Planning and Engineering Departm		vatlands and flo	odnlains	
		-	-	
Square Footage of living area including basement: No. of B	_			
Height of Building:ft. Stories: Perc				
If Addition, does addition increase the total number of	_		Cost.	
If yes, an approval letter from the Dutchess County Health 1				
Please Check any applicable below: (Any items check		licable Town/Co	unty/State approvals)	
			County State Private	
The Owner/Applicant agrees to conform to all applicable la permit Building Department personnel to perform required	ws of this jurisdiction, adher		•	
Applicant's Name:	_		(attach letter of agency)	
Owner/Applicant Signature:				
**				
Square footage of living area including basement and	attached garages	sa ft X		
Square footage of attached decks		sq ft X		
Other fees:		•	-	
Receipt #			Total Fee	