

**TOWN OF POUGHKEEPSIE
RENOVATION TO COMMERCIAL BUILDING
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 REVIEWED UNTIL THE SUBMITTAL IS COMPLETE.

Applicable Codes: *2010 NYS Building, Fire, Plumbing, Mechanical and Energy Conservation Codes*

Ground Snow Load	Wind	Seismic Design Category	Subject to Damage From				Winter Design Temp	Ice shield underlayment required	Flood Hazards
	Speed (mph)		Weathering	Frost line depth	Termite	Decay			
40	90	B	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

KEY PLAN

- ___ Specific types of work, as indicated by Appendix K of the NYS Building Code must be clearly identified

BUILDING PLANS

- ___ Two complete sets required
- ___ Original stamp and signature of a NYS architect or Professional Engineer on each set.

CODE ANALYSIS

- ___ Plan review checklist forms are available on Town Website (<http://www.townofpoughkeepsie.com/building/permits.htm>)

SPECIAL INSPECTIONS

- ___ As required per the NYS Code Chapter 17 shall be listed on the plans and on a separate submittal sheet

ENERGY REVIEW: See Section 104 of the NYS Energy Conservation Code for compliance documentation.

DEPARTMENT APPROVALS

Prior to review the Building Department will contact other town departments to verify building permit approvals. It is your responsibility to contact the applicable departments for approvals. The departments contacted are:

- ___ Water Department, if connected to a town water system845-462-6535
- ___ Sewer Department, if connected to a town sewer system.....845-462-2280
- ___ Zoning Department.....845-485-3651
- ___ Planning Department.....845-485-3657
- ___ Engineering Department.....845-485-3638
- ___ 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. See web site below for form (<http://www.townofpoughkeepsie.com/building/permits.htm>)
- ___ Septic System. An approval letter from the Dutchess County Health Department must be submitted with application....Phone # 845-486-3404

PERMIT FEE DISCRPTION

Level I Alterations – include the removal and replacement or the covering of existing materials, elements, equipment, or fixtures using new materials, elements, equipment, or fixtures that serve the same purpose.

Level II Alterations – include the reconfiguration of space, the addition or elimination of any door or window, the reconfiguration or extension of any system, or the installation of any additional equipment.

Level III Alterations – apply where the work area exceeds 50 percent of the aggregate area of the building.

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

**Town of Poughkeepsie
Renovation to Commercial Building
(Includes R Occupancies)
Building Permit Application**

Received:

Permit # _____

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: _____

Arch/Eng Name: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Electrician : _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Electrical Inspection Agency _____ (Attach Agency Application Form)

Licensed Heating Contractor: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Licensed Plumber: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Fire Alarm Installer: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Separate permits are required for plumbing, heating, electric and fire alarm installations

1) Attach Contractors workman comp. C105.2 or U26.3 2) Attach Contactor List Form for all additional Contractors

Project Description: _____

Square Footage including basement and garages: _____ Height of Building: _____ ft. Stories: _____

Percent Lot Coverage: _____ Estimated Cost: _____ Type of Construction: _____ Occupancy Class: _____

Please Check any applicable below: (Any items checked below must have applicable Town/County/State approvals)

Town Water Town Sewer Septic Well Septic Road: Town County State Private

The Owner/Applicant agrees to conform to all applicable laws of this jurisdiction, adhere to the plans and specifications affixed hereto and permit Building Department personnel to perform required inspections.

Applicant's Name: _____ (attach letter of agency)

Owner/Applicant Signature: _____ Date _____

Application fee: _____ \$ 200.00

Level I Alterations .20 per sq. foot = _____

Level II Alterations .25 per sq. foot = _____

Level III Alterations .30 per sq. foot = _____

Other fees: _____ = _____

Receipt # _____ Total Fee _____



TOWN OF POUGHKEEPSIE POLICE DEPARTMENT

Confidential Business Contact Form

19 Tucker Drive, Poughkeepsie, New York 12603
 (845) 485-3666 H.Q. (845)486-7864 Fax

BUSINESS INFORMATION			
Business Name	Type of Business	Phone Number () -	
Street Address		Business E-Mail Address	
City	State	Zip Code	

PRIMARY CONTACT PERSON			
Name			Title (Owner, Manager, etc.)
Street Address			Apartment/Lot Number
City	State	Zip Code	
Home Phone Number () -	Cell Phone Number () -	Work Phone Number () -	E-Mail Address

ALTERNATE CONTACT PERSON			
Name			Title (Owner, Manager, etc.)
Street Address			Apartment/Lot Number
City	State	Zip Code	
Home Phone Number () -	Cell Phone Number () -	Work Phone Number () -	E-Mail Address

BUILDING OWNER INFORMATION			
Name			
Street Address			Apartment/Lot Number
City	State	Zip Code	
Home Phone Number () -	Cell Phone Number () -	Work Phone Number () -	E-Mail Address

Do you object to any of the above information being released to the public? <input type="checkbox"/> Yes <input type="checkbox"/> No
Authorized Signature:
Print Name:
Position/Title:
Date:

In the event of any change in the above information immediately contact the Town of Poughkeepsie Police Department.