

**TOWN OF WARWICK
MINOR - BUILDING PERMIT APPLICATION**

FEES:

\$100 APPLICATION + \$10 PER \$1000 OF COST (ROUND UP TO NEAREST THOUSAND)

FOR ADDITIONS & FINISHED SPACE: \$100 + \$1 PER SQ. FT.

*NOTE: total fee owed to change if work started without a permit

Payments accepted: Cash or Check - 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.

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

_____ APPLICATION NOTARIZED _____ PROJECT SCOPE IN DETAIL & PLANS (1 SET)
_____ SURVEY WITH STRUCTURE & SETBACKS _____ INSURANCE (WAIVER OR CERTIFICATE)

Date: _____

Section - Block - Lot: _____ - _____ - _____

Street Location: _____

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

PROJECT:

DESCRIPTION:

SIZE:

☐ New ☐ Existing (projects previously done without approvals)

_____ Accessory Building - with electric Yes or No _____ **X**

_____ Swimming Pool.....ABOVE____INGR____ Type: _____ **X**

_____ Hot Tub..... **X**

_____ Deck/Porch: Rear____ Side____ Front____ Covered: Yes or No _____ **X**

_____ Fence: (Front____ Rear____ Side____) - Height____ Length____ Type _____

_____ Solar Panels (Roof Mount or Ground Mount)Panels #: _____ KW

_____ Woodstove/Pellet Stove/Fireplace Insert (detailed location/description)

_____ Roof Replacement: (____2nd Layer ____re-roof)

_____ Windows (#: ____) - provide U-values & model

_____ Finish Basement (provide NYS architect stamped floor plan)

_____ Addition - (provide NYS architect stamped plans)

_____ Renovations - (provide scope of work in detail)

_____ Other: _____

ESTIMATED COST: \$ _____

APPLICATION FEE: \$ _____ \$100

BUILDING FEE: \$ _____

OR

SQUARE FOOT FEE: \$ _____

TOTAL FEE: = \$ _____

(*see fee schedule at top of page to calculate cost)

PROVIDE FOLLOWING (if applicable):

ZBA Variance Approval Date: _____

OWNER:

Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

ARCHITECT / ENGINEER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

CONTRACTOR:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

INSURANCE (check one): (Must be provided with each application)

☐ Contractor - New York State Insurance Certificate (*Workers Compensation*)
(**U-26.3, C-105 or SI 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: <https://www.businessexpress.ny.gov/> - provide signed certificate.

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 #: _____ Date entered: _____