



## TOWN OF NEW PALTZ

52 Clearwater Road/P.O. Box 550

New Paltz, New York 12561

(845) 255-0102 - Ext. 1

[buildingdepartment@townofnewpaltz.org](mailto:buildingdepartment@townofnewpaltz.org)

### BUILDING PERMIT INSTRUCTIONS

- **APPLICATION:** Must be completed by the contractor or property owner and include contact phone number(s) and email address(es) for both. The application must be signed by the property owner or a Letter of Agent is to be submitted. **A \$50 application fee (in most cases) is required upon submission of any new permit application. We will notify you of the permit fee amount when the application is approved. Payments can be made by check or money order, payable to the Town of New Paltz.**
- **NOTE: NO CASH PAYMENTS ARE ACCEPTED.**
- **PROCESSING:** Upon receipt of a completed Building Permit Application, a pre-permit inspection may be scheduled prior to the issuance of a building permit. Applications generally take **10-15 business days** to process and for a permit number to be issued. Please plan accordingly.
- **PLOT PLANS (SURVEYS):** Please submit **two (2) copies** for all that is listed below.

New construction	Additions when adding square footage
Accessory structures	Swimming pools, hot tubs and spas
Fences and sheds	Decks
- **BUILDING PLANS:** **Two (2) sets are required** for all applications, including new construction, alterations, additions, decks, and all accessory buildings. If the value is more than \$10,000, a NYS Licensed Engineer or Architect must stamp the plans. As-Builts and final surveys can be submitted in PDF format in an email to the department.
- **PROJECT START:** **The job is NOT to be started until the permit fee has been paid and the permit is in hand. All permits shall be posted in a visible location on the job site. Once the permit is issued, inspections should be requested 24 hours in advance. All permits require a final inspection by a Town of New Paltz Building Inspector. All electrical work requires an additional inspection by an approved third-party electrical inspector prior to our inspection.**
- **INSURANCE REQUIREMENTS:** Proof of liability insurance and worker's compensation insurance must be submitted before any permit may be released. The Town of New Paltz must be listed as the certificate holder. Please note that Acord forms are **NOT** acceptable proof of worker's compensation insurance. Contractors who do not need worker's compensation and are not hiring subcontractors must file a CE-200 available at [www.wcb.ny.gov](http://www.wcb.ny.gov).
- **CERTIFICATE OF OCCUPANCY/CERTIFICATE OF COMPLIANCE:** Upon passing of the final inspection by the Town of New Paltz Building Inspector, a Certificate of Occupancy (CO) or a Certificate of Compliance (CC) will be issued.

TOWN OF NEW PALTZ BUILDING DEPARTMENT  
52 CLEARWATER ROAD  
NEW PALTZ, NY 12561  
(845) 255-0102 EXT 1



**OFFICE USE ONLY:**

Permit No.: \_\_\_\_\_

Permit Fee:\$ \_\_\_\_\_

Insurance Cert.: Liability   Worker's Comp   CE-200

Permit Approved ( )   Denied ( )   ZBA Ref. ( )

CO/CC Date: \_\_\_\_\_

## BUILDING PERMIT APPLICATION

**A PERMIT MUST BE OBTAINED BEFORE STARTING WORK.**

**PERMITS EXPIRE 12 MONTHS FROM DATE OF ISSUE.**

ADDRESS OF PROPOSED WORK: \_\_\_\_\_

SECTION-BLOCK-LOT NUMBER: \_\_\_\_\_

ESTIMATED COST OF PROPOSED WORK: \_\_\_\_\_

***THE UNDERSIGNED HEREBY APPLIES FOR A PERMIT  
TO BUILD, ALTER, RENOVATE, OR OCCUPY ACCORDING TO THE FOLLOWING SPECIFICATION.***

PROPERTY OWNER'S NAME: \_\_\_\_\_

PROPERTY OWNER'S PHONE NUMBER: \_\_\_\_\_

PROPERTY OWNER'S EMAIL: \_\_\_\_\_

APPLICANT (Contractor): \_\_\_\_\_

APPLICANT'S MAILING ADDRESS: \_\_\_\_\_

APPLICANT'S EMAIL: \_\_\_\_\_

### NATURE OF PROPOSED WORK - CHECK ALL BOX(ES) THAT APPLY

<input type="checkbox"/>	ADDITION TO A BUILDING	<input type="checkbox"/>	FENCE INSTALLATION
<input type="checkbox"/>	ALTERATION TO A BUILDING	<input type="checkbox"/>	ROOF REPLACEMENT/REROOF
<input type="checkbox"/>	CHANGE OF OCCUPANCY	<input type="checkbox"/>	SOLAR
<input type="checkbox"/>	CONSTRUCTION OF A NEW BUILDING	<input type="checkbox"/>	STORAGE SHED (Accessory Structure)
<input type="checkbox"/>	DECK	<input type="checkbox"/>	SWIMMING POOL, HOT TUB OR SPA
<input type="checkbox"/>	DEMOLITION OF A BUILDING	<input type="checkbox"/>	SIGN(S)
<input type="checkbox"/>	ELECTRICAL UPGRADES	<input type="checkbox"/>	OTHER _____

BRIEF DESCRIPTION OF PROPOSED WORK (INCLUDE SF): \_\_\_\_\_

**BUILDING DEPARTMENT COMPLIANCE:** All new residential, commercial or industrial structure plans have been submitted in duplicate, stamped by a registered NYS architect or engineer certifying they meet all the requirements as set forth in the Codes of The State of New York (Education Law Section 7209 and 7307). Plans relating to residential additions or alterations have been stamped as specified by the Enforcement Officer. All Plans reflect compliance with the Codes of the State of New York and the Energy Conservation Construction Code of New York State May 2020 or as amended, and the Town of New Paltz Zoning Ordinances. Compliance sheets have been submitted with plans or attached thereto. Attached drawings are **in duplicate**, of proposed construction showing floors, elevations, walls and roof sections are required.

**The following is to be completed by Applicant (Contractor/Agent/Architect):**

I affirm this \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_, under the penalties of perjury under the laws of the State of New York, which may include a fine or imprisonment, that the foregoing is true, and I understand that this document may be filed in a future action or proceeding in a court of law. (*Amended CPLR 2106 effective October 28, 2023*))

\_\_\_\_\_  
**Signature of Applicant (Contractor/Agent/Architect)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name, Title, Company Name**

**NOTE: If the Applicant is NOT the owner, an Owner’s Affidavit (attached) must be executed and submitted at the time of application.**

**NOTE:** With the issuance of this permit, the Building Inspector, his Assistants, or Code Enforcement Officer having jurisdiction under the Codes of the State of New York and the Energy Conservation Construction Code of the State of New York, has the permission of the owners and or the contractors, upon the showing of proper credentials and in the discharge of their duties, to enter any building, structure or premise covered by this permit at any reasonable hour and no person shall interfere with the performance of their duties. All applicable inspections as required by the Building Inspector shall be completed according to the schedule attached at the time of issuance of the permit. Prior to occupancy of any building, structure or property covered under this permit, an application for a Certificate of Occupancy or Certificate of Compliance must be made to the Building Department on the prescribed form and said Certificate shall be issued prior to the building or premises being occupied.

**TOWN OF NEW PALTZ BUILDING DEPARTMENT**  
**OWNER'S AFFIDAVIT**

The undersigned states and declare(s) that:

1. I am the owner of property ("the Property") located at:  
Street Address: \_\_\_\_\_  
Tax Map Section-Lot-Block No. \_\_\_\_\_
  2. I have attached a copy of the deed giving me a fee title interest in the Property, which is recorded in the Office of the Ulster County Clerk at 244 Fair Street, 2<sup>nd</sup> Floor, Kingston, NY 12401.
  3. I am making, or if I am not the applicant, have agreed and consented to allow: \_\_\_\_\_ to make, submit and consult with regard to an application to the Town of New Paltz Building Department.
  4. I have the legal right to make or authorize the making of said application.
  5. To the best of my knowledge and belief, the statement made in that application are true and correct.
  6. I hereby authorize \_\_\_\_\_ to act as my representative in all matters regarding said application(s).
  7. I expressly grant permission to the Town of New Paltz Building Department and its authorized representatives to enter upon the Property, at all reasonable times for the purpose of conducting inspections. I acknowledge and agree that I may revoke this grant of permission **in writing**, and that such revocation will constitute an immediate withdrawal of my application(s) and no further action will be taken until or unless a new application is submitted to, and accepted by, the Town of New Paltz Building Department.
  8. I acknowledge and agree that the Town of New Paltz may incur substantial costs in review of any land use application, and that the applicant and the property owner are jointly and severally responsible for the payment of all application fees, application review fees, and inspection fees incurred by the Town during the review of this application, including all reasonable engineering, legal and consultant review fees and related costs, that are necessary for the complete and proper review of this application, including environmental review fees.
- Applicant's Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_
9. I acknowledge and agree that while the Town will endeavor to have the person or entity who made the application reimburse the Town for those fees, costs, or other expenses, in the event that they are not promptly paid, the owner is responsible if they are not promptly paid by the applicant, and if they are not promptly paid by the owner, the Town Board may determine that the fees, costs, or other expenses paid by the Town for which the Town has not been reimbursed shall be assessed, levied and collected as provided in Article VIII of Chapter 127 of the Town Code, and impose such costs upon the Property in the same manner as a Town tax.
  10. Under penalty of perjury I declare that I have examined this affidavit and that it is true and correct.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name/Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 )ss.:  
COUNTY OF \_\_\_\_\_ )

On \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/h/er/their capacity, and that by his/her/their signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

**NOTE: Signatures MUST BE ORIGINAL WET INK SIGNATURES and owner's must be notarized.**