APPLICATION FOR BUILDING PERMIT

The Village of Irvington | 85 Main St | Irvington NY 10533

Application Number:	627	Date:	07/26/2022
Job Location:	5 RIVERVIEW RD	Parcel ID:	2.50-18-1
Property Owner:	Brian Mauthe	Property Class:	1 FAMILY RES
Occupancy:		Zoning:	
Common Name:			

Applicant	Contractor		
Brian Mauthe	Brian Mauthe		
N/A			
5 Riverview RoadIrvington NY 10533	5 Riverview Road Irvington NY 10533		
2016691551	2016691551		

Description of Work

Type of Work:	Fence	Applicant is:	Owner
Work Requested by:		In association with:	
Cost of Work (Est.):	5000.00	Property Class:	1 FAMILY RES

Description of Work

Installing a 6' fence on the eastern border of our property line.

Please Note: Completing the application does not constitute a permit to commence construction. To obtain your permit follow the instructions on the instruction page provided on page 3.

Job Location: 5 RIVERVIEW RD

Parcel Id: 2.50-18-1

AFFIDAVIT OF APPLICANT	A	F	FID	A	/IT	OF	AP	PI	_IC	AN	Γ
------------------------	---	---	-----	---	-----	----	----	----	-----	----	---

with offices at: ard of Directors, and the and that said to the best of his f the New York State dinance and all other ecify in this application
and that said to the best of his f the New York State dinance and all other ecify in this application
to the best of his f the New York State dinance and all other ecify in this application
to the best of his f the New York State dinance and all other ecify in this application
f the New York State dinance and all other ecify in this application
f the New York State dinance and all other ecify in this application
nature
nature
ty as the property ow ilding Department and ruction, a property
nature

INSTRUCTIONS

REQUIREMENTS FOR OBTAINING A PERMIT:

The following items must be submitted in order to obtain a Building Permit:

1. One (1) Building Permit application signed by the owner or a notarized Agent Letter.

2. One (1) property survey (signed and sealed), reflecting existing conditions.

 Two (2) sets of construction drawings and specifications, including existing and proposed conditions, state design criteria, structural and architectural details, plans, and cross sections, mechanical, electrical, and plumbing drawings (signed and sealed by a likened professional).

4. One USB with all plans (with Licensed Professionals certification/stamp) and specifications in PDF (file size must be less than

Copy of approved site plan from the Irvington Planning Board when applicable (required on all increases of FAR, footprint, coverage, driveways and increases of cubic content under a roof).

- Approval by the Architectural Review Board (ARB) when applicable. An additional five (5) sets of construction drawings and specifications (please see ARB requirements (available on the village web site www.irvingtonny.gov) prior to submission).
- Visit the Village of Irvington website www.irvingtonnx.gov for additional check list for solar panels, generators, underground propane tanks, signs and awnings(found in forms and documents in the Building & Planning General Information folder).

8. Village Zoning Code is available on the Village website: www.lrvingtonny.gov.

9. Provide evidence that the application meets the NYS Energy code as described by www.dos.state.ny.us/code/energycode/overview.htm

Contractor Requirements in order to obtain a Building Permit:

- Contractor's Certificate of Liability listing the Village of Irvington as the Certificate Holder with no disclaimer in the description other than certificate holder is named additional insured (any additional comments will not be accepted).
- 11. Contractor's Workers Compensation C-105 form (or equivalent) listing the Village of Irvington as Certificate Holder.

12. Copy of Contractor's Westchester County Home Improvement License.

- 13. All information above uploaded into permit application with the contractor's contact information, including mailing address, phone number, and email address.
- 14. Contractor's signature on Affidavit of Contractor (required prior to issuance of the permit).

Please Note:

-State Law requires that the contractor submits a copy of Workman's Compensation as required by the New York State
Disability Insurance naming the Department of Buildings, Village of Irvington as certificate holder and showing coverage for general
contacting and the locations covered by such insurance. If structure is to be demolished a copy of Liability Insurance must also be
submitted.

- Please be advised under State and Municipal Laws, the Workman's Compensation and Disability benefits insurance must be submitted on separate state approved forms. The "Acord Form" is no longer acceptable as proof of Workman's Compensation coverage. Further information or questions may be answered by calling the NYS Bureau of Compliance at (518) 486-6307 or by visiting their website or by contacting your insurance provider.

FEES ASSOCIATED WITH BUILDING PERMIT APPLICATION(All fees must be paid at time of application):

Fee s	ched	lule	
-------	------	------	--

Building Permit (Non-Refundable)

* Application fee \$85
 * Permit fee \$17 per thousand dollars (\$1000) of estimated cost of construction, or fraction thereof

<u>85</u>

25

Inspection Fees (as applicable)

Insulation: \$50

Footing: \$50

Solid Fuel: \$50

· Preparation for concrete slabs and walls: \$50

Foundation and footing drain: \$50

Framing: \$50

Energy Code Compliance: \$50

• Building systems, including underground and rough-in: \$50

Sediment and erosion control: \$50

• Fire resistant construction and penetrations: \$50

• Footing: \$50

Final Inspection for C.O.: \$50

Preparation for concrete slabs and walls: \$50

· State and local laws (per re-inspection): \$50

Total Inspections 50

* Certificate of Occupancy Fees: One dollar (\$1.00) per thousand dollars of estimated cost. Minimum Fee \$25.00

* Permit Revisions or Amendment: \$50.00 (plus \$17 per thousand (\$1000), of the estimated cost of construction and any additional inspections fees).

* Re-inspection fee for work not ready at time of inspection or not in compliance: \$50

* Applications for Undocumented Work/ Legalizing: Applications to legalize work done prior toapplying for and receiving a building permit shall pay double all applicable fees and inspections, including the cost of construction based on the cost of all proposed work being legalized at the time of application. Minimum fee \$500.00.

(To be collected at time of submission of application) Total

(Note: pursuant to 224-54A all permits are valid for one (1) year from date on permit Any permit that expires will be subject to additional fees.)



Certificate of Attestation of Exemption from New York State Workers' Compensation and/or Disability and Paid Family Leave Benefits Insurance Coverage

**This form cannot be used to waive the workers' compensation rights or obligations of any party. **

The applicant may use this Certificate of Attestation of Exemption ONLY to show a government entity that New York State specific workers' compensation and/or disability and paid family leave benefits insurance is not required. The applicant may NOT use this form to show another business or that business's insurance carrier that such insurance is not required. Please provide this form to the government entity from which you are requesting a permit, license or contract. This Certificate w not be accepted by government officials one year after the date printed on the form.

In the Application of (Legal Entity Name and Address):

Brian Mauthe 5 Riverview Rd Irvington, NY 10533 PHONE: 201-669-1551 FEIN: XXXXX3246 Business Applying For: Building Permit

From: Village of Irvington Building Department

The location of where work will be performed is 5 Riverview Road, Irvington, NY 10533.

Estimated dates necessary to complete work associated with the building permit are from July 26, 2022 to September 30, 2022.

The estimated dollar amount of project is \$0 - \$10,000

Workers' Compensation Exemption Statement:

The above named business is certifying that it is NOT REQUIRED TO OBTAIN NEW YORK STATE SPECIFIC

WORKERS' COMPENSATION INSURANCE COVERAGE for the following reason:

The applicant is a homeowner serving as the general contractor for a primary/secondary owner-occupied residence. The homeowner has ONLY uncompensated friends and family working on his/her residence or is hiring individuals a total of less than 40 aggregate hours per week and has a current homeowners insurance policy that covers the property.

Disability and Paid Family Leave Benefits Exemption Statement:

The above named business is certifying that it is NOT REQUIRED TO OBTAIN NEW YORK STATE STATUTORY

DISABILITY AND PAID FAMILY LEAVE BENEFITS INSURANCE COVERAGE for the following reason:

The applicant is a homeowner serving as the general contractor for his/her primary/secondary personal residence. The homeowner has not employed one or more individuals on at least 30 days in any calendar year in New York State. (Independent contractors are not considered to be employees under the Disability and Paid Family Leave Benefits Law.)

I, Brian Mauthe, am the Homeowner with the above-named legal entity. I affirm that due to my position with the above-named business I have the knowledge, information and authority to make this Certificate of Attestation of Exemption. I hereby affirm that the statements made herein are true, that have not made any materially false statements and I make this Certificate of Attestation of Exemption under the penalties of perjury. I further affirm that I understand that any false statement, representation or concealment will subject me to felony criminal prosecution, including jail and civil liability in accordance with the Workers' Compensation Law and all other New York State laws. By submitting this Certificate of Attestation of Exemption to the government entity listed above I also hereby affirm that if circumstances change so that workers' compensation insurance and/or disability and paid family leave benefits coverage is required, the above-named legal entity will immediately acquire appropriate New York State specific workers' compensation insurance and/or disability and paid family leave benefits coverage and also immediately furnish proof of that coverage on forms approved by the Chair of the Workers' Compensation Board to the government entity listed above.

SIGN HERE

Signature:

Date:

8/8/22

Exemption Certificate Number

2022-052060

Received

July 25, 2022

NYS Workers' Compensation Board







8/8/22, 8:39 AM

