

*Incorporated Village of Head of the Harbor*  
 500 North Country Road  
 St. James, NY 11780



Building Department (631) 584-5602  
**APPLICATION FOR BUILDING PERMIT**

**APPLICATION IS HEREBY MADE** to the Building Inspector of the Village of Head-of-the-Harbor for the approval of the detailed statement and plans herewith submitted for the construction of the buildings, additions, or alterations herein described. The applicant agrees to comply with all provisions of the Building and Zoning Ordinances and with the provisions of all other laws and rules relating to the construction of said buildings, additions, or alterations, whether herein described or not.

(Official Use Only)				
District 801 Sec. _____ Blk. _____ Lot _____				
Zoning District _____				
Fee \$ _____	Paid _____		20 _____	
Permit No. _____	Issued _____		20 _____	
Foundation Inspection _____			20 _____	
(Note: Location Verification Survey Required)				
Plumbing Inspection _____				
Framing Inspection _____				
Final Inspection _____				
Certificate of Occupancy Issued _____			20 _____	
Police	Clerk	Building Dept.	Applicant	Tax Assessor

Owner of Property:  
 (Name) \_\_\_\_\_ (Tel. #) \_\_\_\_\_ (Fax) \_\_\_\_\_

(Address) \_\_\_\_\_ (preferred daytime phone #) \_\_\_\_\_

The person responsible for the supervision of the work insofar as the Building and village Zoning Ordinance apply is:

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Architect \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Builder \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Mason \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of Plumber \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Survey Certifying Site Location by

Name of Surveyor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

As defined in Village of Head of the Harbor Code § 165-5:

Construction of new:

- 1-family dwelling\*
- guest house
- accessory building
- accessory structure
- dock/bulk heading\*
- other \_\_\_\_\_

Alteration/addition:

- 1-family dwelling
- guest house
- accessory building
- accessory structure
- other \_\_\_\_\_

Installation/Upgrade:

- gas/oil
- electrical
- plumbing
- windows
- other \_\_\_\_\_

Miscellaneous:

- Tree Removal
- Demolition
- Relocation
- Grade changes
- curb cuts\*
- other \_\_\_\_\_

\* may require appropriate forms for the Planning Board –Site plan and/or subdivision applications.

ESTIMATE COST OF PROPOSED WORK \$ \_\_\_\_\_

**NO OCCUPANCY PERMITTED PRIOR TO THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY**

Information pertinent to obtaining certificate of occupancy

- a. Final Inspection, Building Department Approval
- b. Submit a copy of a final survey indicating compliance with minimum zoning set back requirements (guaranteed to the Inc. Village of head of the Harbor)
- c. Submit a copy of laboratory water analysis.
- d. Submit county Board of Health Certificate on water supply and sewage disposal.
- e. Submit New York State Board of Fire Underwriters certificate, covering all electrical installations.
- f. Village approval of drainage provisions run off onto Village roads and/or adjoining property:

**WORKMEN’S COMPENSATION INSURANCE**

Pursuant to Section 57 of the Workmen’s Compensation Law a Certificate of Insurance on the Standard Form Approved by the Industrial Commissioner must be filed with this application covering all operations in connection therewith. If not filed with this application, a certificate will be furnished by \_\_\_\_\_ Policy No. \_\_\_\_\_  
Surety \_\_\_\_\_ Exp. Date \_\_\_\_\_.

**AFFIDAVIT**  
(Designate Capacity of Affiant)

State of New York  
County of Suffolk  
Village of Head of the Harbor

} SS.

The undersigned (Owner, Owner’s Agent, Architect, Contractor) being duly sworn, says that the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the applicable ZONING ORDINANCE, BUILDING CONSTRUCTION CODE, and all other laws pertaining to the proposed wok shall be complied with, whether specified or not, and that such work is authorized by the owner.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature \_\_\_\_\_  
Owner, Owner’s Agent , Architect, Contractor

Notary Public

**AFFIDAVIT**

State of New York  
County of Suffolk  
Village of Head of the Harbor

} SS.

I, \_\_\_\_\_ Owner of the premises located at \_\_\_\_\_

Being duly sworn depose and say:

That the premises described herein will only be used as a one family dwelling, or other ( \_\_\_\_\_ )  
in accordance with the current Zoning Ordinance of the Incorporated Village of Head of the Harbor

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature \_\_\_\_\_  
Owner

Notary Public