

ROOF, WINDOW & SIDING PERMIT APPLICATION

Village of Castleton
Building Department
P.O. Box 126
Castleton, NY 12033
Phone (518) 732-2211 Ext. 2
www.castleton-on-hudson.org

Permit No. _____

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Roof, Window & Siding Permit pursuant to the N.Y.S. Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations and all conditions expressed on this application which are part of these requirements, and also will allow inspectors to enter the premises for the required inspections.

APPROVED / DENIED
OFFICE USE ONLY

ADDRESS OF SUBJECT PROPERTY

Number Street _____ City _____ State _____ Zip _____

Tax Map No. (Required - This can be found on your Tax Bill) _____

Zoning District _____ Lot Size _____ Occupancy Classification _____ Commercial Residential

Specify Work To Be Done _____

Existing Use _____ Intended Use _____

Estimated Cost of Construction _____ Floor Area of Construction (Sq. Ft.) _____

Applicants Name _____ E-Mail _____

Address _____
Number Street _____ City _____ State _____ Zip _____

Phone (Home) _____ (Cell) _____ (Fax) _____

Property Owner(s) Name _____ Phone _____

Address _____
Number Street _____ City _____ State _____ Zip _____

General Contractor _____

Address _____
Number Street _____ City _____ State _____ Zip _____

Phone (Work) _____ (Cell) _____ (Fax) _____

THE GENERAL CONTRACTORS CURRENT CERTIFICATE OF WORKERS COMPENSATION (form C-105.2, U26.3 or CE-200) AND GENERAL LIABILITY INSURANCE (ACCORD Form) ARE REQUIRED TO BE ON FILE (Village of Castleton must be certificate holder) WITH THIS OFFICE PRIOR TO ISSUANCE OF A BUILDING PERMIT

IF WORK IS DONE BY THE HOME OWNER, THIS OFFICE REQUIRES A COPY OF THE DECLARATION PAGE FROM THE HOME OWNERS INSURANCE POLICY

OFFICE USE ONLY	
Fee Amount \$ _____	Date Paid / Check Number _____
Application of _____	Dated _____
Is hereby Approved <input type="checkbox"/>	Denied <input type="checkbox"/>
Reason for DENIAL of permit _____	
Proposed Use _____	
Date _____	Code Enforcement Official _____

THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED

INSTRUCTIONS

1. This application must be completed legibly in ink and submitted to the Village of Castleton Building Department.
2. This application must be accompanied with the **Certificate of Liability Insurance** as well as **Proof of Workers Compensation**.
3. For **New Roof**, this application must be accompanied by:
 - A) Two sets of plans for any Structural Changes (if applicable).
 - B) Type of material being removed _____
 - C) Lists of items being applied, including but not limited to:
 - Felt Paper _____
 - Ridge Vent _____
 - Soffit Vents _____
 - Ice Protection _____
 - Flashings _____
 - Drip Edge _____
 - Roof Material (Shingle, metal roof, etc.) _____
 - Other _____
4. For **Windows**, this application must be accompanied by documentation indicating:
 - A) Two sets of plans for any Structural changes (if applicable).
 - B) Light & Ventilation Requirements.
 - C) Energy Requirements for the replacement windows.
 - D) Egress Requirements for Sleeping Room Windows. (5.7 Square Feet Minimum)
 - E) Tempered Glazing Requirements for Hazardous Locations.
5. For **New Siding**, this application must be accompanied by:
 - A) Description of the Exterior Covering _____
 - B) Description of the Vapor Retarder _____
6. The work covered by this application **SHALL NOT** commence before the issuance of a Building Permit.
7. Upon approval of this application, this Building Department will issue a Building Permit to the applicant. Such permit and Approved Plans shall be kept on the premises and be available for inspection throughout the progress of the work.
8. Any deviation from the approved plans must be authorized by the approval of revised plans subject to the same procedure established for the examination of the original plans. An additional permit fee may be predicated on the extent of the variation from the original plans.

INSPECTION SCHEDULE

All Inspections Require 24 Hours Notice

You must call the Village of Castleton Building Inspector (518) 605-2184 for the following required inspections. Any work covered or concealed before inspection and approval shall be exposed for inspection at the applicants expense.

1. **Framing Inspection (if applicable)** before closing of any of the frame work.
2. **Insulation Inspection (if applicable)**
3. When all work is completed, a **Final Inspection** of the Site, Building and Work Done is Required.

TO WHOM IT MAY CONCERN:

Please be informed that in reviewing building plans, all information is taken from the plans. Any changes, after the plans have been accepted, must be reviewed by the Building Inspector. This Department shall expect, upon completion, to find the structure as the plans show.

Date _____

(Applicant)