

# INCORPORATED VILLAGE OF KENSINGTON

NASSAU COUNTY, NEW YORK

## APPLICATION FOR BUILDING PERMIT

2 Nassau Drive, Great Neck, NY 11021 (516) 482-4409 Fax (516) 482-2866 [www.villageofkensingtonny.com](http://www.villageofkensingtonny.com)

APPLICATION #

PERMIT #

This application form shall be submitted in duplicate, both copies bearing original signatures where required, along with a **non-refundable** \$250.00 initial Building Permit application fee check made payable to the Village of Kensington. This fee payment shall be deducted from and applied against the total Building permit fee as calculated below. When the Building Inspector's approval stamp and signature are affixed below and returned to the applicant with the pink Building Permit placard, both documents shall constitute a valid Building Permit. The original Building Permit and the stamped, approved plans MUST be retained on the construction site and be available for the Building Inspector's review at all times during the construction process. The application process and Building Permit are subject to the conditions printed on the reverse side (or second page) of this form. The owner and the applicant are advised to read and abide by the conditions on the reverse carefully.

All permits issued by this Building Department are strictly subject to the Zoning Codes of the Incorporated Village of Kensington and all New York State Building, Maintenance, and Fire Codes applicable on the date of the application. NO ERROR OR OMISSION IN THE ISSUANCE OF THIS OR ANY PERMIT GRANTED BY THE VILLAGE OF KENSINGTON SHALL LEGITIMIZE OR LEGALIZE ANY CONSTRUCTION OR USE OTHERWISE PROHIBITED BY LAW.

Please check all of the following that apply to this application:

ADDITION  INTERIOR RENOVATION  EXTERIOR RENOVATION  WINDOW REPLACEMENT  
 ACCESSORY USE OR STRUCTURE  NEW RESIDENCE  MISCELLANEOUS. (Specify):

S/B/L: 2/___/___	Date Rec'd: _____	Fee Paid: \$ _____	Fee Type: _____	Check #: _____
	Date Rec'd: _____	Fee Paid: \$ _____	Fee Type: _____	Check #: _____
VILLAGE USE ONLY	Date Rec'd: _____	Fee Paid: \$ _____	Fee Type: _____	Check #: _____

### Property Owner's Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Corp. Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Tel. No: \_\_\_\_\_ Fax No: \_\_\_\_\_ Email: \_\_\_\_\_

### Address of Permit Activity:

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Description of Permit Activity:

### Building Permit Fee Calculation: (\*assessed once per application)

Check and calculate all that apply to this application:

<input type="checkbox"/> New Res. / > 40% Add./Renov.:	_____ SF @ \$3.75 / SF = \$ _____	+ \$1,000.00	= \$ _____
<input type="checkbox"/> Addition < 40% Gross Area:	_____ SF @ \$3.30 / SF = \$ _____	+ *\$ 500.00	= \$ _____
<input type="checkbox"/> Kitchen / Bathroom Renovation:	_____ SF @ \$3.00 / SF = \$ _____	+ *\$ 500.00	= \$ _____
<input type="checkbox"/> General Interior Renovation:	_____ SF @ \$1.80 / SF = \$ _____	+ *\$ 500.00	= \$ _____
<input type="checkbox"/> Accessory Use or Structure:	_____ SF @ \$1.80 / SF = \$ _____	+ *\$ 500.00	= \$ _____
<input type="checkbox"/> Exterior Renovation > 20%:	_____ SF @ \$0.25 / SF = \$ _____	+ *\$ 500.00	= \$ _____
<input type="checkbox"/> Window Replacement:	\$100.00 for the First Window, Plus \$25 for Each Additional Window		= \$ _____
<input type="checkbox"/> Miscellaneous Building Permit (Specify):	\$250.00 _____		= \$ _____
	Total Building Permit Fee		= \$ _____
<input type="checkbox"/> Architectural Review Board Fee:	[ ] \$100.00 [ ] \$250.00 [ ] \$300.00 [ ] \$400.00 [ ] \$600.00 [ ] \$800.00 [ ] \$1,500.00 [ ] \$2,500.00 [ ] \$5,000.00		= \$ _____
<input type="checkbox"/> Architectural Review Board Professional Consultant Deposit:	[ ] \$250.00		= \$ _____
<input type="checkbox"/> Subsequent Additional Inspection Fee:	[ ] \$200.00		= \$ _____

DO NOT WRITE BELOW THIS LINE - PERMIT IS NOT VALID UNLESS STAMPED HERE

**Architect/Engineer:** Business/Corporate Name: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Lic. Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City, State, Zip code: \_\_\_\_\_  
 Tele Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Contractor:** Business/Corporate Name: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Lic. Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City, State, Zip code: \_\_\_\_\_  
 Tele Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Plumber:** Business/Corporate Name: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Lic. Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City, State, Zip code: \_\_\_\_\_  
 Tele Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Electrician:** Business/Corporate Name: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Lic. Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City, State, Zip code: \_\_\_\_\_  
 Tele Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

## PROPERTY OWNER'S AUTHORIZATION

I (we) hereby certify that:

- 1] Two (2) fully detailed sets of architectural and / or structural drawings (plans) prepared to scale of at least one-quarter inch to the foot shall accompany this application. These sets shall bear the original seal and signature of the above named design professional. One (1) set of approved plans will be returned to you that will contain the approval stamp of the Building Department. Said plans shall be kept on the construction site and exhibited on demand to any official of the Building Department.
- 2] I (we) agree to permit the Building Inspector and any officer or employee of the Incorporated Village of Kensington to enter upon the premises and/or to photograph the premises in the discharge of their duties with this application.
- 3] Approved plans and a copy of the approved permit shall remain on the premises at all times until a Certificate of Occupancy / Completion is issued. These plans will be made available to the Building Inspector upon request.
- 4] Building Inspector shall be given a minimum forty-eight (48) hours notice to make required inspections and no work shall continue until such inspection has been completed and approved.
- 5] The owner or his representative shall be responsible to arrange for all required inspections and (if necessary) to renew all permits prior to expiration of same.
- 6] Permit shall expire three (3) months from the date of issuance unless construction is in progress. No work is to be started until permit has been received and posted by the owner/applicant. Commencement of any work prior to the receipt and posting of the permit will result in penalties, pursuant to Chapter 8 Article 6 of the Code of the Incorporated Village of Kensington.
- 7] Work shall be permitted between the hours of 8 AM and 6 PM, Monday through Friday.
- 8] It is the responsibility of the owner/applicant to submit plans and applications to the Building Department in compliance with all Federal, State and local laws.

**Name of Property Owner (please print):** \_\_\_\_\_

deposes and says that he/she resides at \_\_\_\_\_ in the State of \_\_\_\_\_, that he/she is the owner in fee of all certain lots, parcels of land known as (address of permit activity): \_\_\_\_\_  
 \_\_\_\_\_ Section \_\_\_\_\_, Block \_\_\_\_\_, Lot(s) \_\_\_\_\_, situated, lying and being within the incorporated area of the Village of Kensington; that I have read and understand items one (1) through eight (8) as above stated, that the work to be done upon the premises shall be done in accordance with the approved application and accompanying plans of which he/she is totally familiar; And that he/she hereby names \_\_\_\_\_ as his/her representative to file this application on his/her behalf.

Signature of Owner: \_\_\_\_\_

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

Signature of Notary Public: \_\_\_\_\_