

**BUILDING DEPARTMENT – VILLAGE OF MINEOLA
BUILDING PERMIT APPLICATION**

Instructions – Information to be printed or typed, black or blue ink only.

It is the responsibility of every property owner to have permits as required by Law. It is the responsibility of the Building Department to enforce the Law. The Building Inspector will identify any structures on your property that have not been properly legalized. This will be done on the first inspection. If any violations are found, they will be pointed out to you and you will have a period of one month to legalize the situation. After that, failure to legalize will result in summons, stoppage of construction, and/or court action. If you have conditions requiring legalization, we recommend you include them now in this application.

- Building Permit Application completed.
- Assessor's Form completed.
- A legible and accurate Property Survey included.
- Three (3) complete sets, detailed construction plans. (SIGNED, SEALED & STAPLED)
- All signatures notarized.
- Insurance Certificate(s) included
Contractors shall submit Workmen's Compensation & Disability Insurance Certificates with General Liability coverage no less than \$2,000,000. The Village of Mineola must be listed as Certificate Holder and Additionally Insured. If the homeowner is the contractor, the Homeowner's Insurance Certificate shall be submitted.

NO WORK SHALL COMMENCE BEFORE A BUILDING PERMIT HAS BEEN ISSUED.

When issued, the "RED" permit card shall be prominently displayed at all times.

Nassau County Map No. 9, Block _____, Lot No. _____

Street address of property _____

Zoning District _____ (✓) if applicable: New Structure/addition _____ Alteration _____ Demolition _____

Name, address & phone of Architect or Engineer: _____

Name, address & phone of Contractor: _____

Property Use: Current: _____, Proposed: _____

Lot size _____ Sq. Ft. of Building _____ No. of stories _____ Height in Ft. _____

Construction type _____ Structure have Cellar or basement? _____ Sprinkler? _____ Alarm Sys? _____

Brief description of proposed work: _____

Estimated cost of proposed construction, alteration or demolition: \$ _____

Name, address <u>and phone</u> of property owner	Name, address <u>and phone</u> of applicant
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Notarized signature: (print name AND sign)	Notarized signature: (print name AND sign)
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* I certify by my signature that I and the owner of aforesaid property, or that I am the duly authorized agent of the owner with full power to act on his/her/their behalf.

* * * * * **DO NOT WRITE BELOW THIS LINE** * * * * *

- | | |
|---|--|
| <input type="checkbox"/> _____ Bd. Trustees
<input type="checkbox"/> _____ Bd. Appeals
<input type="checkbox"/> _____ VOM Plan. Bd.
<input type="checkbox"/> _____ NC Plan. Com.
<input type="checkbox"/> _____ NC DPW
<input type="checkbox"/> _____ NC Health
<input type="checkbox"/> _____ NC Fire Marshal
<input type="checkbox"/> _____ NYS DOT
<input type="checkbox"/> _____ SEQR | Electrical Permit Req'd? _____
Plumbing Permit Req'd? _____
Date Received _____
Permit Fee \$ _____
Deposit Fee \$ _____
Date Approved _____
Date Issued _____
Building Inspector _____
Permit No. _____ |
|---|--|

**ALL APPLICATIONS MUST BE SUBMITTED AS A
COMPLETE PACKAGE**