



TOWN OF SHAWANGUNK

Building Permit Application

1.) Submit all together to the Building Department:

- (1) Completed application
- (2) Application fee
- (3) Building plans – (2) paper copies, signed & stamped; (1) PDF copy
- (4) Insurance certificate
- (5) Site map (survey)
- (6) ResCheck (Energy Code Compliance Report)
- (7) Manuals J, S and D

2.) Work covered by this application **may not** begin until permit application is reviewed plans are approved, a permit is issued and signed for.

3.) Approved plans to be kept on the site of project for reference and the permit number must be displayed on site in 6" numbers to be seen from the road (make our own sign).

Your permit # will be needed to request inspections.

4.) Upon completion of work, final paperwork must be submitted, and final inspection must be scheduled to obtain certificate of compliance.

Contractor insurance requirement:

If the homeowner is the contractor:

1. Provide a copy of homeowner's Declaration page for address of project.
2. Complete Affidavit of Insurance form. **Must be notarized!**

If a contractor is hired:

1. Provide NYS Certificate of Worker's Compensation Insurance (C-105.2 or U-26.3), Liability and Disability insurances listing Town of Shawangunk as Certificate holder **(ACORD) forms are not accepted!**

---OR---

2. Self-insured contractors shall provide certificate of Attestation of Exemption (CE-200) from NYS Worker's Compensation Board (www.wcb.ny.gov)

Structure Placement: See Town of Shawangunk Zoning Code for Setback requirements for your property's zone.

1. Provide copy of survey (signed and stamped) detailing property borders, location of proposed well and septic (if applicable), driveway and any proposed or existing structures.

14 Central Avenue, P.O. Box 247, Wallkill, New York 125449

Phone: (845) 895-42090

email: building@shawangunk.org



Inspections: It is the permit holder's responsibility to schedule required inspections. Please request a list of required inspections for *YOUR* individual project from the Building Department.

- Inspections are performed between 11am- 2pm
- Please be sure your project is **ready** for the requested inspection. Scheduled inspections that are not ready will be Failed/Not Ready and be assessed a \$75 fee, unless cancelled at least 2 hours prior to inspection time.
- ***PLEASE NOTE: Photos will not be accepted for missed inspections.***
- Typical (minimum) inspections required for new Single Family Residential projects:
 - * Footing forms before pouring concrete (main structure)
 - * Footing forms before pouring concrete (auxiliary structures i.e., decks, etc.)
 - * Foundation walls before pouring
 - *Sheathing (roof and walls)
 - *Ice and water protector
 - *Rough electrical
 - *Rough plumbing
 - *Fire caulk
 - *Framing
 - *Insulation
 - *Drywall before spackling
 - *Final inspection prior to issuance of Certificate of Occupancy
- + Inspection results:
 - *Dogs and other animals must be secured
 - *Fences must be unlocked for inspection access



Third Party Electrical Inspection Agencies
(In Alphabetical Order)

Commonwealth Electrical Inspection Service Inc. Ron Henry 845-562-8429 Keith Sutton 845-527-8821 Fred Cocks 845-783-9309	New York Electrical Inspection and Consulting John Wierl 845-343-6934
CP Certified Electrical Inspector Chris Peone 845-853-3202	New York Electrical Inspections Chris Mano 845-586-2430
Electrical Underwriters of NY, LLC John Taylor 845-597-5072 Ernie Bello 845-569-1759	SAS Electrical Inspection Yuri Badovich 845-801-2172
LM Electric & Consulting Corp. Logan Millington 845-232-1074	Swanson Consulting, Inc. John Hamilton 845-459-0708 Joe Swanson 845-549-8271

Revised 9/4/2025

Permit #: _____ Date: _____

Section _____ Block _____ Lot _____ Zoning District _____

Reviewed by: _____ Date: _____ Approved ☐ Revisions Required ☐

Comments: _____

*** This section to be completed by Building Department ***

*****ALL permits require INSPECTIONS or A VIOLATION will be issued*****

Applicants' Name: _____ Phone #: () _____

Applicant Type (Owner, Contractor, Design Professional, Agent): _____

Applicants' email address: _____

Property owner's name: _____

Mailing address: _____

City _____ State _____ Zip _____ Phone #: () _____

Owner's email address: _____ Alt. Phone # () _____

Location of project (# and street address) _____

Corner Lot: yes / no Subdivision: yes / no _____

Project description: (i.e. "new single family residence") _____

Dimensions: _____

Cost of construction: _____ Permit Fee: _____

Contractor's Name: _____ Phone # () _____

Contractor's Address _____

Contractor's email: _____

Insurance carrier: _____ Policy # _____ Exp. Date _____

Ulster Co. licensed electrician _____ Lic# _____ Exp. Date _____

**Town of Shawangunk
County of Ulster
Office of the Building Inspector**

AFFIDAVIT OF OWNER

Premises _____

_____, being duly sworn, deposes and says that he/she is the
(Name of Property Owner as per recorded deed)

owner above named.

He/She is the OWNER and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Deponent alleges that 1) the provisions of the Worker's Compensation Law does not apply in this case in that he/she will do all required work on the premises and will imply no labor thereat, OR 2) owner alleges that contractor performing work will provide required NYS Worker's Compensation Insurance whereof, deponent requests approval of said plan and application and issuance of a PERMIT to commence work.

Signed _____
(signature of Property Owner)

Sworn to before me this

_____ day of _____, 20_____

Notary Public

Town of Shawangunk
County of Ulster
Office of the Building Inspector

**Affidavit of Exemption to show specific proof of Worker's Compensation Insurance
coverage for a single or multi-family, Owner-occupied residence.**

Under penalty of perjury, I certify that I am the owner of the single family or multi-family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of Worker's Compensation insurance coverage for such residence because (please check the appropriate box):

- ☐ I am performing all the work for which the building permit was issued.
- ☐ I am not hiring, paying or compensating in any way, the individual(s) that is (are) performing all the work for which the building permit was issued or helping me perform such work.
- ☐ I have a homeowners' insurance policy that is currently in effect and covers the property listed on the attached building permit **AND** am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

- ☐ Acquire appropriate Worker's Compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Worker's Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit
- OR
- ☐ Have the general contractor, performing the work on the single or multi-family, owner occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of that coverage on forms approved by the Chair of the NYS Worker's Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

(Signature of Homeowner)

(Date Signed)

(Home Telephone Number)

(Homeowner's Printed Name)

(property address)

Sworn to before me this

_____ day of _____, 20____

Notary Public

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Documents required to be submitted prior to scheduling final inspection

- Verify that all required inspections performed and approved by the Building Department.
- Final septic system approval from the Ulster County Department of Health.
- Final driveway approval from Highway Superintendent or evidence of posting \$1,200 bond with the Town Clerk (\$1,200 to be returned upon completion within 1 year) for driveway apron.
- Final electrical inspection and approval (by certified, town approved inspection agency)
- Water potability test approval
- Certified survey completed after foundation is in place and decks/porches installed.
- Your 911# must be displayed with 4" numbers within view of a public road