

**TOWN OF POUGHKEEPSIE
MODULAR & MOBILE SINGLE FAMILY RESIDENTIAL
PLAN SUBMITTAL REQUIREMENTS**

Name of Applicant _____
Building Address or Lot # _____

In order to expedite your plan review, please check your plans and application to be sure the following information has been included. When each of the items has been checked by you, submit the form with your application, application fee, and two (2) sets of plans for Building Department review. NOTE: APPLICATIONS FOR BUILDING PERMITS CANNOT BE ACCEPTED FOR PLAN REVIEW UNTIL THE SUBMITTAL IS COMPLETE.

Applicable Codes: *2007 NYS Residential Code*

Ground Snow Load	Wind	Seismic Design Category	Subject to Damage From				Winter Design Temp	Ice shield underlayment required	Flood Hazards
	Speed (mph)		Weathering	Frost line depth	Termite	Decay			
40	90	B	Severe	42"	Moderate to Heavy	Slight to Moderate	2	yes	Adopted 7/18/90 Current FIRM 9/8/99

BUILDING PERMIT APPLICATION

- Application must be fully completed
- Must be signed by owner or submitted with a letter of agency

SITE PLAN

- North arrow
- Lot dimensions--all sides
- Size and location of any easements or right-of-ways
- Names and locations of all adjacent streets
- Locations of proposed and existing structures
- Setback dimensions--front, rear, and all sides
- Outside building dimensions and distances between buildings on building site
- Driveways, exterior stairs, landings, patios, and decks
- Location, type, and elevation of any retaining walls

BUILDING PLANS (two complete sets required)

- Complete set of house plans from modular company. Plans must have approval stamp from NYS Department of State. All options selected must be indicated and any options not selected must be voided. Plan must clearly indicate requirements for connections required between house and foundation, house modules and roof installation.
- Plans for foundation and any other construction built on site. (decks, porches, garages, etc.)
- Window well dimensions for emergency escape windows below grade
- Stairway landings, rise, run and handrail for stairs built on site.
- Guardrail height and pattern

- ___ Building elevations with finish grade line on all sides(exterior views)
- ___ Typical footing size, depth, and reinforcement
- ___ Foundation wall height, thickness, and reinforcement
- ___ Foundation sill and anchor bolts

PLUMBING DETAILS (a separate plumbing permit will be required)

- ___ Location of all plumbing fixtures including layout for future fixtures
- ___ Floor drains, water heater, clothes washer and dryer locations

MECHANICAL DETAILS (a separate heating permit will be required)

- ___ Furnace location
- ___ Combustion air location
- *___ Mechanical sizing information-use attached form

ENERGY CODE ANALYSIS

- *___ See Chapter 11 of NYS Residential Code

DEPARTMENT APPROVALS

Prior to review the Building Department will contact other town departments to verify building approvals. It is your responsibility to contact the applicable departments for approvals. The departments contacted are:

- ___ Water Department, if connected to a town water system.....462-6535
- ___ Sewer Department, if connected to a town sewer system.....462-2280 If on a septic system a SAN 34 form will be sent to the County Health Dept for approval.
- ___ Zoning Department.....485-3651
- ___ Planning Department.....485-3657
- ___ Engineering Department.....485-3638
- ___ Highway Department, if driveway enters a town road. (Phone # 452-1750 If the driveway connects to a state or county road a letter of approval for a curb cut permit must be submitted from the applicable department.
- ___ Approved address form from Dutchess County 911 must be included.

NYS Codes are available online at --- <http://publicecodes.citation.com/st/ny/st/index.htm>

**Town of Poughkeepsie
New Modular Single Family Home
Building Permit Application**

Received:

Permit # _____

Property Address: Street: _____ City: _____ Zip: _____

Grid Number: _____ Zoning District: _____

Owners Name: _____ Phone: (H) _____ (W) _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Builders Name: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

1) Attach Contractors workman comp. C105.2 or U26.3 or certificate of exempt

Arch/Eng Name: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Electrician : _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Electrical Inspection Agency _____ *(Attach Agency Application Form)*

Licensed Heating Contractor: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Licensed Plumber: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Fire Alarm Installer: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Separate permits are required for plumbing, heating and fire alarm installations

Project Description: _____

Is the property located in a flood zone? Yes No *If yes, a floodplain development permit is required.*

Are any wetlands located on the property? Yes No

Please contact the Planning and Engineering Departments for information on wetlands and floodplains.

Square Footage of living area including basement: _____ Square Footage of Attached Garages: _____

Square Footage of attached decks: _____ No. of Bedrooms: _____ No. of Bathrooms: _____

Height of Building: _____ ft. Stories: _____ Percent Lot Coverage: _____ Estimated Cost: _____

Please Check any applicable below: *(Any items checked below must have applicable Town/County/State approvals)*

Town Water Town Sewer Septic Well Septic Road: Town County State Private

The Owner/Applicant agrees to conform to all applicable laws of this jurisdiction, adhere to the plans and specifications affixed hereto and permit Building Department personnel to perform required inspections.

Applicant's Name: _____ *(attach letter of agency)*

Owner/Applicant Signature: _____ Date _____

Application fee: _____ 100.00

Square footage of living area including basement and attached garages _____ sq ft X .30/sq ft = _____

Square footage of attached decks _____ sq ft X .20/sq ft = _____

Other fees: _____ = _____

Receipt # _____ Total Fee _____