Town of Gilboa
Building Permit Packet

Building Permit Application Instructions :

A permit will be issued when it is determined that the application is complete and the proposed work conforms to applicable requirements of the Uniform Code. Building permits are valid for one year from date of issuance (unless otherwise noted), and may be renewed for a fee of $40.00, permits may only be renewed twice. Permits must be kept current until closed out with a Certificate of Occupancy, or Certificate of Compliance, it is unlawful to occupy any structure without such Certificate. The Town of Gilboa must be notified of any changes to information during the period for which the permit is in effect.

A Homesite permit is required for any new structure or addition

Single level sheds with a grass floor area under 144 sq. ft. do not require a building permit

A BUILDING PERMIT IS REQUIRED BEFORE commencing construction, enlargement, improvement, removal, or demolition of any building or structure or any portion thereof, or installation of heating equipment or solid fuel burning device.

- Lot size must accommodate 50' from well to septic 100' from well to leach field
- The tax map or property ID number can be obtained from the local assessor, Town Clerk or through your county real property tax office A Certificate of Occupancy will not be issued without this number.
- A 911 address must be assigned by Schoharie County before a permit is issued please contact Schoharie County Real Property Tax Service PO Box 308 Schoharie NY 12157 (866) 295 6229
- Two sets of plans are required. If the area of the new residential building is greater than 1,500 Sq. Ft or if the cost of the alteration or addition exceeds $10,000, or if the alteration will have an effect on either structural or public safety, plans submitted must bear the original seal and signature of a NYS licensed Professional Engineer or Registered Architect as provided for in Sections 7307 and 7209 of the New York State Education Law
- Submit one copy of sewage disposal system design documents as approved by Schoharie County Health Department along with approval letter Schoharie County Health Dept PO Box 667 Schoharie NY 12157 518 295-8365 If project is located in NYC watershed a letter of approval from NYC DEP must be submitted
- A site plan with dimensions showing driveway, well, septic, and any structures
- Proof of Contractors Workers Compensation Insurance form C 105 2 or U 26 3

  If Contractor is exempted use form CE 200
- Home owners may use form BP-1 (9-07) for Workers' Compensation exemption.

Adopted By Resolution #30-2021 on 5/5/2021

- For manufactured homes please provide a copy of installers NY certification, engineer's approved slab details, and a copy of the manufacturers installation guide.

Design Criteria

Climate Zone-6
Ground snow load- 50 lb. sites at elevations above 1,000' shall have their value increased by 2 psf for every 100' above 1,000

Wind speed-90 mph
Seismic Design Category -B
Weathering probability-Severe
Frost depth- (48")
Ice Barrier Underlayment Required- Yes
Flood Hazards- Yes
Termite Infestation probability-Slight to Moderate
Building Setbacks- 75' from center of road, 25' from property lines

- Undertaking activity that requires a building permit prior to obtaining such a permit is prohibited This would be a violation liable to a fine of not more than $200 (two hundred) dollars for each day during which such violation continues
- INSPECTIONS It is the Owners responsibility to make arrangements to notify the Building Inspector at least 48 hrs notice for inspections If arrangements are not made it would constitute a violation, and a stop work order may be issued.

Building Inspector Brian Caron
caroncarpentry29@yah**oo.com**

518-827 5668 Mon Fri 10:00 am to 8:30 pm Sat 12:00 to 6:00 pm

- Work site prior to the issuance of a building permit
- Footing excavation, forms and reinforcement before concrete
- Foundation wall forms and reinforcement before concrete
- Foundation waterproofing and drainage before backfill
- Rough framing
- Rough mechanical and plumbing (drain and supply lines must be pressure tested with water or air)
- Electrical inspection by a 3rd party electrical inspector
- Fire resistance penetrations, and insulation before final covering
- Solid fuel burning heating appliances chimneys flues or gas vents
- Final inspection after all work has been completed

PLEASE KEEP THESE INSTRUCTIONS AND INSPECTION SCHEDULE FOR YOUR RECORDS.

Adopted By Resolution #30-2021 on 5/5/2021

SUBMIT THE FOLLOWING APPLICATION TO TOWN OF GILBOA

Town of Gilboa

Attn: Brian Caron-Building Permits
PO BOX 187
Gilboa, NY 12076
607-588-6400(office)
518-827-5668(Building Inspector)

Building Permit Application

For Office Use Only

Date_____

Tax Map #_____

Site Address _____

Owner Information

Name_____ **Phone #** _____
Address_____ **Cell #** _____
City_____ **State**_____ **Zip** _____
E-Mail_____
Preferred way of contact(Call,text or email)_____
Estimated cost of your project _____
Street Address of your project _____
911 Address if different (Must be assigned by Schoharie County before a permit is issued)_____
Is property located on a seasonal or private road?_____**If so please list a main road your property is located off from**_____.

What do you want to do?

Build, Repair, Renovate, Alteration, Addition, Demolish,New Structure
Please explain what you want to do. (Keep it simple.)

_____

_____

What type of structure are you working on(circle one)

Single-Family House **Multi Family Residence** **Commercial**

Garage/Pole Barn/Utility Building **Pool** **Deck**

Manufactured Home(Single or Double) **Other**[1]_____

What will your structure be used for?

Home_____ Second Home_____ Business_____ Rental_____ Other_____

Floodplain ___Yes ____No * If your project is in the Watershed,provide a DEP letter of approval.

Wetland site_____Yes ____No

Heat System type:_____

Septic System:_____Exisitng _____New If New, Please attach Schoharie County Health Department approval of system or design.

Water supply_____existing _____New

Who is completing the work:

Owner's Name and Address if different from applicant:_____

_____Phone Number:

Contractor's Name _____ Include their address, contact info(Phone #'s , email address)_____

_____

- **Proof of Workers Comp:** Insurance from a contractor must be provided, or a signed affidavit of exemption(form in the back of the packet)
- **If the owner** is doing the work, we need a completed exemption form (blank form is in the back of this packet).

[1] Town of Gilboa Building Permit Packet-2021

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- Applicants must provide 2 sets of construction documents(drawings, and/or specifications)which are prepared by a New York State registered architect or licensed professional engineer unless otherwise stated by the Building Inspector.
- Also include site plans with property setbacks, well,septic, etc.
- Work to remain accessible and exposed for inspection. Permit holders shall notify the Code Enforcement Officer 48 hours in advance when work is ready for inspections. Please contact the Code Enforcement Officer directly and prior to the need for the inspection.

Do you own the property?

Yes **No**

Note: If you do not own the property we need the owner's written permission for you to apply (blank form is in the back of this packet).

Applicant's Signature_____ Date:_____

_____**, being duly sworn,** deposes and says that he/she is the applicant above named. He/she is the **owner** or **agent of said owner** or owners, and is duly authorized to perform or have performed the proposed work, and to make and file this application; that all statements contained in this application package 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 specifications filed therewith, and in accordance with applicable laws, ordinances, rules and regulations.

The applicant recognizes that it may be necessary for the town or members of the Planning Board and or Assesors to conduct an on site visit of the exterior and /or interior of the property that is the subject of the application.

The applicant hereby agrees that such on-site visit(s) may be conducted as deemed necessary. Whether a site visit is necessary for the purpose of reviewing the application shall be within the sole discretion of the Code Enforcement Officer or Board members.

The applicant further agrees, that by submitting this application, the applicant shall hold harmless the Town of Gilboa, Staff and/or Board /Commission and their members and agents in their official and individual capacities for any damage or injury alleged to have been caused as a result of any site visit made pursuant to this application.

Sworn to before me this _____ day of _____ in the year_____.

_____ _____

Signature of Applicant **Signature of Notary Public**

Fee Schedule

Fee Schedule- Fees due at time of submitting application (all fees include Certificate of Occupancy, or Compliance)

New Construction including additions based on local construction factor of $65.00 /SF

Garages, pole buildings and utility buildings based on $35.00/ SF

Interior renovations includes converting basement or attics to living space)

based on $30/ SF

Decks based on $20/ SF

	w/slab	w/foundation
Single **wide manufactured home**	$140	$190
Double wide manufactured home	$240	$290
One level Modular home	$290	$340
Two level Modular home	$340	$390

Above ground pool
$60

In ground pool
$100

Heating systems, *AC System*, wood stove, fireplace, or chimney
$40

Outdoor Wood Burning Device
$75

Solar system (use unified solar permit)

$75

Roof replacement
no charge

Electrical work
no charge

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Demolition of manufactured home
$25

Demolition of house/ other
$50

Replace septic system
$50

Homesite permit
$25

c/o search
$40

Permit renewal

$40.00 permit may only be renewed twice

Inspection and Certificate of compliance

$80

Change of Occupancy
$80

Fire Inspection
$25 /per building paid to Building Inspector at time of Inspection - to be made out to Town of Gilboa.

Amount Enclosed $_

Please make check payable to: Town of Gilboa

- For all new construction and for additions or alterations that will have an effect on structural or public safety or that will cost $10,000 or more to construct, plans submitted must bear the original seal of a NYS licensed Professional Engineer or Registered Architect as provided for in the New York State Education Law.

  Design professionals' name _____
  RA__PE_

License No.

_____

Phone _____

- *W*ork covered by this application has been started or completed
  Yes_____ NO _____ If yes, attach a written explanation

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Applicant Certification

I hereby certify that I have read the instructions and examined this application and know the same to be true and correct. All provisions of laws and ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of construction.

Signature of owner or authorized agent (if agent, provide letter of proof)

Signature_____

Date

_____

sworn to me this__day of

_____

(County Clerk or Notary Public)

*Application and check must be submitted to the Town Clerk

Make checks Payable to: Town of Gilboa

Town of Gilboa
Town Clerk:Linda Wyckoff
PO box 187
Gilboa,NY 12076
607-588-6400

Gilboa Code Enforcement Officer
Brian Caron
518-827-5668
caroncarpentry29@yahoo.com

For Office Use Only:

Permit Fee: _____

Receipt of $ _____, Check #

_____ From _____

Is your Packet Ready to be Submitted?

*****Missing Items will delay issuing your permit *****

1. Completed Application and Homesite Permit(If required)?

2. Site plan. (Show us where the building is or will be located on your land.)

3. Two sets of plans or drawings.

3. Affidavits filled out and notarized

4. Copy of Contractors Insurance or Exemption form

5. Witten letter or form if you are not the property owner obtaining permission to acquire a building permit for the property?

6. Check or Money order made out to Town of Gilboa

If you have all of the above completed please submit to the Town of Gilboa, Construction is not approved to start until you have received your permit to display. Turning in a building permit application DOES NOT mean you are approved to start your project.

** Violation fee: Permit fee will double if any work has begun without a building permit

Adopted By Resolution #30-2021 on 5/5/2021

To Be attached to packet: Homesite Permit Application, Affidavit of Exemption to show Proof of Workers Comp.

Application #_____
Property Owner_____

Affidavit By Property Owner

(Authorizing someone other than the property owner to submit an application on behalf of the property owner)

Town of Gilboa
PO BOX 187
Gilboa, NY 12076

Project location
(street address) _____

Tax Map # _____

X*_____*states that, according to the Schoharie County Real Property Tax Records, s/he is the Owner of Record of the property described above, and further states that (s)he hereby authorizes* _____*to act on his/her behalf to obtain all necessary permits and approvals for work as follows:

Signature:X _____

Sworn to before me this _____ day of _____ in the year of _____.

_____
Signature of Property Owner

_____
Signature of Notary Public

Notary Stamp

Adopted By Resolution #30-2021 on 5/5/2021

Town of Gilboa

PO Box 187

Application for Homesite Permit

Permit Fee: House, Mobile Home, Garage, Pole Barn, Storage Building, Campground, Mobile Home Park, Addition or Other- $25.00 (Payable to Town of Gilboa)

_____, residing at _____

hereby applies for a Homesite Premit and represents that he is the owner of the land located on

_____ Road in the Town of Gilboa upon which the

_____Mobile Home _____House _____Campground _____Mobile Home Park

_____ Garage or other (specify) _____ is to be situated and that the plan

submitted with the application is substantially true ans accurate. Date _____

Applicant _____

Note: In compliance with article 3 of Sanitary Code of Schoharie County, a soil percolation test to determine the application of settled sewage effluent will be conducted by a representative of the Board of Health Department before any construction is started. The sewage system will not be covered until the Public Health Technician issues a Certificate of Approval.

This application shall be accompanied by a plan showing the boundaries of the land, the location and plan of proposed (or existing) house or mobile home on the land, the location and plan for the proposed (or existing) water supply and the sewage disposal systems, and the location of adjacent properties or structures.

_____ Date _____

Building Inspector

.....

The Building Inspector of the Town of Gilboa, having approved the application of _____

_____, residing at _____ pursuant

to the provisions of 4.1 of the Town of Gilboa Homesite Law, a permit is hereby granted to said

application for _____, for the premises applied for the described in the plan

accompanying the said application.

Dated_____ _____

Building Inspector

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

This form cannot be used to waive the workers' compensation rights or obligations of any party.

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 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 workers' 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 homeowner's 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 workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' 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 if appropriate, file a WC/DB-100 exemption form; OR
- have the general contractor, performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes 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.

_____
(Signature of Homeowner)

_____
(Date Signed)

_____
(Homeowner's Name Printed)

Home Telephone Number _____

Property Address that requires the building permit:

_____
_____
_____
_____

Sworn to before me this _____ day of
_____, _____.

_____
(County Clerk or Notary Public)

Once notarized, this Form BP-1 serves as an exemption for both workers' compensation and disability benefits insurance coverage.