



Town of Fallsburg Building Permit Checklist:

(Please **READ** and **CHECK** boxes prior to submission. We will not accept incomplete applications.)

1. I have read the instructions on page 2 of the permit application. ☐
2. I have submitted a plot plan showing the lot and building on the premises. ☐
3. I have submitted legible detailed plans as per the instructions on the permit. ☐
4. I understand the work may not be started until a permit is issued. ☐
5. I understand that all electrical work must be independently inspected. ☐
6. I understand that not displaying the permit placard is a \$50.00 fine. ☐
7. I understand that a Workman's Comp. exemption # or policy must be submitted. ☐
8. I understand that construction debris must not be left outside during const. ☐
9. I understand that a minimum of 24 hours is required for inspections. ☐
10. I understand that any change requires updating the permit. ☐
11. I understand that it is illegal to occupy or use without a C/O. ☐
A fine of \$1,500 per day for occupying without a C/O
12. I understand that a C/O/C must be issued prior to use. ☐
13. I understand that a 911 number must be installed at the property. ☐
14. I have given a copy of this checklist to my contractor. ☐

By signing below I am stating that I have read and agree to the statements above and the dwelling, structure, fuel burning device, etc. will not be used or occupied until the issuance of a Certificate of Occupancy the building department

Signature of applicant: _____ Date: _____

Office Use ONLY:

- Owners Proxy (if applicable) ☐
- Home Owners Association (if applicable) ☐
- Electrical Verification (if applicable) ☐
- Insurance ☐
- Plot plan/ Site plan ☐
- Permit Fee's \$ _____ ☐

TOWN OF FALLSBURG
CODE ENFORCEMENT OFFICE
Member: New York State Building Officials Conference, Inc.



5250 MAIN STREET
SOUTH FALLSBURG
NEW YORK 12779
(845) 434-8811
FAX: (845) 434-0791

POOL APPLICATION

PERMIT # _____

SBL#: _____

Address where work will be performed: _____

Applicants Name: _____ Phone #: _____

Email: _____

Owners Name: _____ Phone #: _____

Contractors Name: _____ Phone #: _____

Inground pool ☐

Above ground pool ☐

Fees:

Inground pool size: _____ x _____

\$.40 x total sf. plus a \$100 filing fee.

Above ground pool size: _____

\$100 fee for above ground pool.

Please use this space to draw where your pool will be built:

(Make sure you include setbacks from property lines and other structures (homes, sheds etc.))

§ 310-4.8Swimming pools.

A.

Applicability. Portable pools having a water capacity less than six inches in depth shall be exempt from these provisions.

[Amended at time of adoption of Code (see Ch. 1, General Provisions, Art. IV)]

B.

Private swimming pools. Private swimming pools, whether permanent or portable, shall be regulated as follows:

(1)

Private swimming pools shall be erected on the same lot as the principal building.

(2)

Private swimming pools may be erected only in the rear yard of such structure and shall be located not less than 20 feet from a rear lot line and not less than 10 feet from any side lot line and from any principal building or accessory structure attached thereto. Such pool shall also be not closer than 50 feet to a front lot line.

(3)

Such pool shall not occupy more than 35% of the balance of the rear yard area, after deducting the area of all private garages and other accessory buildings or structures.

(4)

Private swimming pools shall be enclosed in accordance with the New York State Uniform Fire Prevention and Building Code.

C.

Swimming pools accessory to residential developments and nonresidential developments. Swimming pools accessory to residential developments, whether clustered one-family dwellings, seasonal camps, or multiple-family dwellings, shall be of permanent construction and shall be located not closer than 50 feet to any lot line and not closer than 50 feet to any dwelling unit. Swimming pools that are part of nonresidential uses, whether commercial or noncommercial, such as hotels, motels, clubs, campgrounds, day-use recreational facilities or institutions shall be of permanent construction and shall be located not closer than 100 feet from any lot line. Such swimming pools shall be enclosed in accordance with the New York State Uniform Fire Prevention and Building Code.

(1)

If the water for such pool is supplied from the public water supply system; the inlet shall meet the standards of Chapter 266, Swimming Pools, § 266-3.

(2)

Such pool shall be constructed, operated and maintained in compliance with the applicable provisions of the New York State Sanitary Code relating to public swimming pools.

(3)

No swimming pool shall be initially filled or used until the foregoing requirements shall have been certified by the Code Enforcement Officer (CEO).

(4)

All empty pool areas must be locked and secured.

By signing below, you acknowledge you have read and understand the above code for swimming pools:

Signature: _____

Date: _____



TOWN OF FALLSBURG
CODE ENFORCEMENT OFFICE

OWNERS PROXY

_____deposes and states that he/she resides at:

(Owner)

(Location where work is being done)

And that he/she is the owner of the premises described in the attached application for a building permit application and further states that he/she has authorized _____ to make said application, secure any necessary permits and approvals, call for inspections, and request a certificate of occupancy upon satisfactory completion of the work described in said application.

Owner's signature: _____ Date: _____

Email address: _____

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H.O.A. Building Permit Permission Form

I, [board member] _____
have received a request from, [applicant]
The owner of **unit #** _____ **SBL#** _____
located at [property name] _____
for a [purpose of request] _____
Having reviewed the applicants request the association has decided to:

Check Box:

Approve [] with the following conditions _____

Denied [] -----

I assert that **I** am a board member of the homeowners association and this matter has been discussed with other board members and this is the decision of the majority of the board.

Signed: _____ Title: _____

Print Name: _____

Phone Number: _____

Email: _____

Attention!

The Code Enforcement Office must be made aware
when new board members are elected or replaced.

The names, phone numbers and mailing addresses of all board members should
be updated regularly in the event of an emergency and to prevent
any confusion or delays in the permit process.

Please add a copy of this required information on a
separate sheet along with this form to avoid delays in the permit p

HOME OWNER ELECTRICAL SIGN OFF

I hereby state under penalties of perjury that I own and occupy the premises located at:

Electrical work will be done at said premises, in which electrical work will be installed, maintained and/or replaced by myself, the homeowner or the property described above.

Description of type of electrical work:

Dated: _____

Note: False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Homeowner Signature

ELECTRICAL CONTRACTORS' VERIFICATION FORM

This half of the page must be filled out by a SULLIVAN COUNTY LICENSED ELECTRICIAN if the homeowner is not doing the electrical work.

Electrical Contractor's Name: _____

Electrician's License #: _____

Property Owner: _____

Property Address/Street: _____

Signature of Electrical Contractor: _____

Date: _____

No walls are to be covered until this form is returned to the Building Department and they have verification that the electrical contractor mentioned above is performing said work.

Certificate of Attestation of Exemption



Workers' Compensation Board

Instructions for obtaining and filing a Certificate of Attestation of Exemption from Workers' Compensation and/or Disability and Paid Family Leave Benefits (CE-200) through New York Business Express

Follow these steps:

1. Go to businessexpress.ny.gov.
2. Select **Log in/Register** in the top right-hand corner. A NY.gov Business account is required.
3. If you do not have a NY.gov business account, go to [step 4](#) to set up your account.
If you have a NY.gov log-in and password, go to [step 16](#).
4. Select **Register with NY.gov** under New Users.
5. Select **Proceed**.
6. Enter the following:
 - First and Last Name
 - Email
 - Confirm Email
 - Preferred Username (check if username is available)
7. Select **I'm not a robot**.
 - You may have to complete a Captcha Verification before proceeding.
8. Select **Create Account**.
 - If you already have a NY.gov account, the screen will display your existing accounts, either Individual or Business.
 - Do one of the following:
 - If the account(s) shown is a NY.gov Individual account, select **Continue**.
 - If the account(s) shown is a NY.gov Business account, select **Email Me the Username(s)**.
9. Verify that the account information is correct.
 - Select **Continue**.
10. An activation email will be sent.
 - If you do not receive an email, see the **No Email Received During Account Creation** page.
11. Open your activation email and select **Click Here**.
 - Specify three security questions.
 - Select **Continue**.
12. Create a password (must contain at least eight characters).
13. Select **Set Password**. You have successfully activated your NY.gov ID.
14. Select **Go to MyNy**.
 - At the top of the screen select **Services**.
 - Select **Business**.
 - Select **New York Business Express**.
 - Select **Log in/Register**.
15. On the New York Business Express home page, do one of the following:
 - Scroll down to Top Requests and select **Certificate of Attestation of Exemption, or**
 - Search Index A-Z for **CE-200**.
16. Under **How to Apply**:
 - Select **Apply as a Business, or**
 - Select **Apply as a Homeowner** (applies to those obtaining permits to work on their residence).
17. Complete application screens.
18. Review Application Summary.
19. Attest and submit.

You will receive an email when your certificate has been issued.

To view your certificate:

- Select **Access Recent Activity** from your email, or
- Access businessexpress.ny.gov, and then access your **Dashboard** (under your login name on right).

Print and sign the **Certificate of Attestation of Exemption**.

Submit your **CE-200** for your license, permit or contract to the issuing Agency.