



VILLAGE OF TARRYTOWN

One Depot Plaza, Tarrytown, New York 10591-3199

Mayor
KAREN G. BROWN
Deputy Mayor
REBECCA McGOVERN

Trustees
ROBERT HOYT
DAVID T. KIM
THOMAS MITCHELL
PAUL J. RINALDI
EFFIE PHILLIPS-STALEY

VILLAGE ADMINISTRATOR
914-631-1885
VILLAGE TREASURER
914-631-7873
VILLAGE CLERK
914-631-1652
VILLAGE ENGINEER
914-631-3668
DEPT. OF PUBLIC WORKS
914-631-0356

FAX NO. 914-631-1571

BUILDING PERMIT REQUIREMENTS

- 1 COPY OF DEED
- 3 SETS OF PLANS SIGNED AND SEALED BY A NYS LICENSED PROFESSIONAL ENGINEER OR ARCHITECT – **MAXIMUM SIZE 24" X 36"**
- SIGNED PROPOSAL
- **A TOPOGRAPHY MAP MUST BE INCLUDED WITH THIS APPLICATION; SLOPES OF 25% OR GREATER MUST BE DELINEATED**
- 1 SET OF SPECIFICATIONS (IF APPLICABLE)
- 1 PLOT PLAN SIGNED AND SEALED BY NYS LICENSED LAND SURVEYOR SHOWING ALL ZONING REQUIREMENTS
- CERTIFICATES OF INSURANCE FOR WORKMEN'S COMPENSATION AND LIABILITY (VILLAGE OF TARRYTOWN TO BE NAMED AS ADDITIONAL INSURED)
- WESTCHESTER COUNTY HOME IMPROVEMENT LICENSE FOR ALL RESIDENTIAL WORK
- **APPLICATION FEE - \$100 (APPLICATION FEE) + \$20 PER \$1,000 OF CONSTRUCTION**
- **FOR NEW RESIDENTIAL/COMMERCIAL - PLEASE CALL BUILDING DEPT. FOR APPLICATION FEES AT 914-631-3668**

Note:

New York Electrical Inspection Services and/or New York Board of Fire Underwriters Certificate of Compliance and Plumbing Certificate is required in order to obtain a Certificate of Occupancy. Also, all other applicable local electrical and plumbing permits must have been obtained, as well as an as-built survey submitted for department review.

All Electricians and/or Plumbers must be licensed in Westchester County.

Other building permit related fees:

Re-inspection fee: \$200.00 RE-INSPECTION FEE

Plan Amendment Fee: \$200.00 FOR AMENDMENT AND/OR RE-SUBMISSION

Certificate of Occupancy/Completion: \$150 for residential \$300 for commercial

**OFFICE OF THE BUILDING INSPECTOR
VILLAGE OF TARRYTOWN
APPLICATION FOR BUILDING PERMIT**

Check No. _____ Amount \$ _____ APPLICATION # _____
--

Permit No. _____ Sheet _____ Block _____ Lot _____ Zone _____

Permit Type:

<input type="checkbox"/> Residential(New)	<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Demolition
<input type="checkbox"/> Residential (Addition/Alteration)	<input type="checkbox"/> Pools and Decks	<input type="checkbox"/> Topographic alteration
<input type="checkbox"/> Assembly (Includes Restaurants)	<input type="checkbox"/> Steep slopes	<input type="checkbox"/> (Excavation or fill)
<input type="checkbox"/> Commercial/Business	<input type="checkbox"/> Wetlands	<input type="checkbox"/> Other

Describe proposed scope of work: _____

Address of Proposed Work: _____

Construction Classification: Type: ☐ 1A/B ☐ 2A/B ☐ 3A/B ☐ 4 ☐ 5A/B

TOTAL ESTIMATED COST \$ _____

(Note: The estimated cost shall include all labor, material, scaffolding, fixed equipment, professional fees and material and labor which may be donated gratis)

A signed contract listing the construction cost must be included with the application. If construction costs are \$20,000 or more, the affidavit of construction must be signed and sealed by the licensed engineer or architect.

All residential work shall have smoke detectors that comply with RCNYS 2020 (in each sleeping room, outside of each separate sleeping area in the immediate vicinity of the bedrooms and on each additional story of the dwelling).

Owner Signature: _____

Owner's Name _____ Tel. No. _____

Address _____ Email _____

Architect's or Engineer's Name _____ Tel. No. _____

Address _____ License or Registration No. _____

General Contractor's Name _____ Tel. No. _____

Address _____ Email _____

Additional Contacts _____ Tel. No. _____

Email _____

The undersigned hereby agrees that the provisions of the Building Code and the Zoning Ordinance of the Village of Tarrytown and Supplements thereto shall be complied with, whether the same are specified herein or not, and that all workmen will be protected by compensation insurance in accordance with the provisions of the Workmen's Compensation Law. I further agree to carry public Liability Insurance in an amount and form satisfactory to the Corporate Counsel.

Type of erosion control to be implemented: _____
(Hay bales, silt fence, vegetation, etc.)

Prior to the commencement of construction work on a project involving any disturbance of land, an Erosion Control Inspection must be requested, performed and approved. The plans must reflect the type of erosion control to be implemented and the Building Inspector must inspect for compliance with the plans and that the controls in place will be adequate to control erosion.

AFFIDAVIT OF OWNERSHIP:

State of New York, County of Westchester,

_____ being duly sworn deposes and says they are the owner or authorized representative by attached completed proxy statement and are duly authorized to perform or have performed said work and to make and file this application: that all statements are true to the best of their 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.

Sworn to before me

Owner or Authorized Representative

this _____ day of _____

Signature: _____

Print Name: _____

Notary Public: _____

**VILLAGE OF TARRYTOWN
ZONING COMPLIANCE FORM**

OWNER: _____ DATE: _____

PROPERTY LOCATION: _____

SHEET: _____ BLOCK: _____ LOT: _____ ZONE: _____

	Permitted	Existing	Proposed	Variance
MINIMUM LOT SIZE (SQ. FT.)				
REQUIRED MINIMUM STREET FRONTAGE (FT.)				
PRINCIPAL BUILDING COVERAGE (%)				
ACCESSORY BUILDING COVERAGE (%)				
TOTAL COVERAGE (ALL BUILDINGS) (%)				
MINIMUM FRONT YARD (FT.)				
MINIMUM FOR EACH SIDE YARD (FT.)				
MINIMUM 2 SIDE YARDS (FT.)				
MINIMUM REAR YARD (FT.)				
MINIMUM DISTANCE FROM ACCESSORY BUILDING TO PRINCIPAL BUILDING (FT.)				
MINIMUM DISTANCE FROM ACCESSORY BUILDING TO SIDE LOT LINE (FT.)				
MINIMUM DISTANCE FROM ACCESSORY BUILDING TO REAR LOT LINE (FT.)				
MAXIMUM HEIGHT (STORIES)				
MAXIMUM HEIGHT (FT.)				
MINIMUM FLOOR AREA PER DWELLING UNIT (S.F.)				
MAXIMUM LIVABLE AREA				
TOTAL GROSS FLOOR AREA (F.A.R.)				
IMPERVIOUS SURFACE				
PARKING SETBACKS:				
PRINCIPAL BUILDING				
FRONT				
ONE SIDE				
OTHER SIDE				
TOTAL OF BOTH SIDES				
REAR LOT LINE (FT.)				
TOTAL PARKING SPACES				
LOADING AREA				
BUILDING HEIGHT				
NUMBER OF STORIES				
TOTAL HEIGHT				
CORNER LOTS:				
MINIMUM FRONT YARD (FT.)				
MINIMUM FRONT YARD (FT.)				
MINIMUM SIDE YARD (FT.)				
MINIMUM REAR YARD (FT.)				
AREA OF STEEP SLOPES 25% OR GREATER		S.F.		%

**VILLAGE OF TARRYTOWN
BUILDING DEPARTMENT**

TO BE COMPLETED BY LICENSED ARCHITECT OR ENGINEER IF ESTIMATE COST IS
\$20,000 OR MORE

I, _____ do hereby affirm and certify as follows: (i) I am an architect/engineer (circle one) licensed by the State of New York; (ii) I have prepared the plans, drawings and specifications for this application at _____
_____ and I am fully familiar with the proposed construction; (iii) based on my training and experience I estimate the total cost of construction, including all labor, all materials, all professional fees and all associated costs, to be approximately \$ _____; and (iv) Pursuant to Penal Law § 210.45, I acknowledge that a false written statement made knowingly is a class A misdemeanor.

Signature: _____ Date: _____

SIGN AND AFFIX
PROFESSIONAL SEAL

VILLAGE OF TARRYTOWN

Building Department
One Depot Plaza
Tarrytown, NY 10591
Phone 914-631-3668 Fax 914-631-1571
www.tarrytowngov.com

PROXY STATEMENT

_____ is the owner of the property located at
_____ and has authorized
_____ to make the attached application
for _____ and to represent them at
all Board meetings.

Signature of Owner

Sworn to before me
this _____ day of _____

Notary Public: _____