

INCORPORATED VILLAGE OF THE BRANCH

BUILDING DEPARTMENT

P.O. Box 725 Smithtown, NY 11787

VOB BUILDING PERMIT APPLICATION REQUIREMENTS

- (2) COPIES OF APPLICATION, FILLED AND NOTARIZED

- (3) COPIES OF SURVEY

- (3) COPIES OF PLOT PLAN

- (3) COPIES OF CONSTRUCTION DRAWING, SIGNED AND SEALED

- LICENSE & INSURANCE FOR CONTRACTOR, ELECTRICIAN, & PLUMBER

- BOARD OF HEALTH APPROVAL (IF REQUIRED)

- DEC APPROVAL (IF REQUIRED)

- PLANNING AND ENGINEERING APPROVAL (IF REQUIRED)

Note: Once plan is reviewed, applicant will be notified if any other approvals are required.

NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION
AND/OR TIMBER CONSTRUCTION

RESIDENTIAL ONLY

TO: **Joseph Arico, Building Inspector**
Village of the Branch, Building Department

Property Owner _____ Tax Map No. (SBL) _____

Property Address _____

| | | |
|--|---|--|
| <input type="checkbox"/> New Dwelling | <input type="checkbox"/> Addition | <input type="checkbox"/> Alteration |
| <input type="checkbox"/> Repair | <input type="checkbox"/> Accessory Structure | |

None

Truss Type Construction (TT)

Pre-Engineered Wood Construction (PW)

Timber Construction (TC)

Roof Framing (R)

Floor Framing & Roof Framing (FR)

Floor Framing, Including Girders & Beams (F)

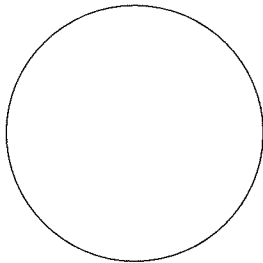
Seal/Stamp (If signed by Architect or Engineer)

or

Notary (If signed by Owner/Contractor)

I, _____
Print Name

as the _____
Architect - Engineer - Owner - Contractor (Indicate above)



Architects/Engineer Stamp/Seal

Signature _____

Sworn before me:

This _____ day of _____, 20 _____

Signature of Notary Public

| |
|--------------|
| Notary stamp |
|--------------|

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EXCAVATION AFFIDAVIT

New York State Rule 753 requires that no person shall commence or engage in any excavation or demolition unless and until they have served timely notice as provided in the law to operate (Utility's) who maintain underground facilities in the Village of The Branch.

753-1.1 Purpose. The purpose of these rules is to establish procedures for the protection of underground facilities in order to assure public safety and to prevent damage to public and private property, as required by General Business Law Article 36 and Public Service Law Section 119-b. This Part may be cited as Industrial Code 53 or Code Rule 53, in addition to its designation as part 753.

SUBPART 753-2 DUTIES OF LOCAL GOVERNING BODIES

753-2.1.1 Provision and Display of Notice. Any local governing body that issues permits for excavation and demolition shall provide a notice to applicants for permits that informs them about their responsibilities under state law to protect underground facilities and the existence, operation, programs and telephone number of the one-call notification system. Every such local governing body shall continuously display such notice in a conspicuous location in the office or agency it designates.

List of all operators (Utility Companies) that operate in the Town of Smithtown are provided below:

UNDERGROUND OPERATORS (Utility Companies)

PSEG LI - KEYSpan
N.Y.S.D.O.T.

TELEPHONE & CABLE SERVICE
SUFFOLK COUNTY HEALTH SERVICES

SUFFOLK COUNTY WATER AUTHORITY

CONTACT THE NUMBER BELOW FOR NOTIFICATION OF EXCAVATION
TO ALL UNDERGROUND OPERATORS

1-800-272-4480 or 811

SECTION BLOCK LOT

TYPE OF APPLICATION

OWNER OF PROPERTY

AGENT FOR OWNER

ADDRESS OF PROPERTY

AFFIDAVIT OF EXCAVATION

I hereby affirm that the above property owner or agent for this application shall comply with New York State Rule 753 regarding underground facilities.

Date

Signed

Title

(owner, agent, contractor)

NOTARY:

Sworn to before me this day of 20

Signature of Notary Public

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ALL POOL APPLICATIONS

REQUIREMENTS FOR SUBMISSION OF A SWIMMING POOL PERMIT

A receptacle for water or an artificial pool capable of holding water depth at any point of more than 24 inches deep at any point designed or intended for the purpose of the immersion or partial immersion therein and including all appurtenant equipment. The work pool shall be construed to mean in-ground, above ground, on-ground outdoor water pool hot tubs and spas that are installed or constructed indoors or outdoors.

1. Two (2) original application **signed by owner**, notarized and completely filled out.
2. Clear copy of original stamped survey (required if architect prepared site plan).
3. Three (3) surveys/plot plans showing location of pool, pool heater and all pool equipment indicating distances to all lot lines and from the dwelling/deck and all electrical lines.
4. If there is a deck attached to the pool indicate the size and location.
5. Draw the location and height of the fence surrounding the pool or property.
6. Retaining wall(s) show the location and distance from the fences(s). *A permit may be required for retaining walls(s).*
7. Three (3) sets of plans:
 - Architects/Engineers signed and sealed for in-ground swimming pools.
 - Good working drawings on above ground pools and all pool decks.
8. Excavation affidavit for in-ground and semi-in-ground pools.
9. Four (4) photos at different angles showing pool, deck and fence for existing pools.
10. Indicate what type of pool heater is applicable. Fee for all pool heaters also need a permit from Fire Marshal.
11. Suffolk Licenses (photo ID) for Electrician, Plumber and Contractor (Contractor's License must read "Pool & Spa Certified" - H3 License). Insurance for each (workers' comp/disability, if not up-to-date and on file, see insurance requirements).
12. Homeowners Exemption Affidavit for work by homeowner.

SITE TO REMAIN SAFE AT ALL TIMES:

- Excess fill to be carted to legal fill site
- Pools must meet all zoning setbacks
- Permit is subject to field inspections
- Verify location of overhead wire as per National Electric Code and PSEG requirements

POOL HEATERS AND EQUIPMENT:

- If applicable an open trench inspection is required
- Gas lines require a pressure test
- Inspections are required for the oil pool heater and oil lines
- Propane heaters require a permit from the Fire Marshall
- All equipment shall be setback at least 10 feet from all property lines

For additional information and all code requirements see Section R326 of the 2016 NYS Code Supplement, International Energy conservation Construction Code Section R403.10 and Code of the Village of the Branch

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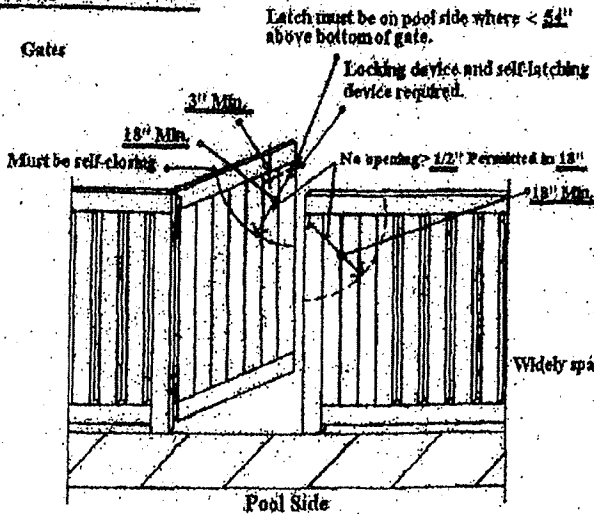
P.O. Box 725 Smithtown, NY 11787

SWIMMING POOL COMMENTS

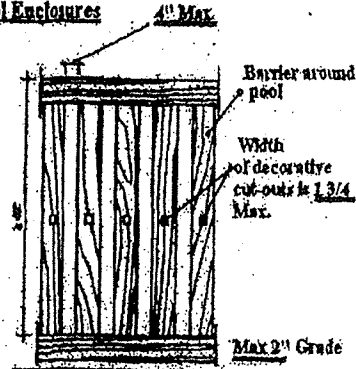
The Following Diagrams are Provided for Reference Purposes Only.
They are not Intended for Design Purposes.

This section addresses barriers enclosing residential swimming pools.

Swimming Pool Enclosures



Swimming Pool Enclosures



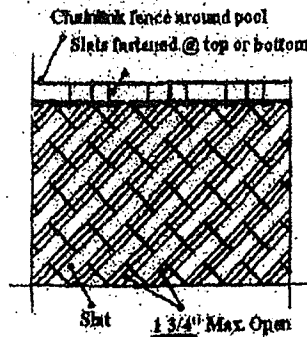
Widely spaced horizontal members in barriers around residential swimming pools.

Diagonal Members

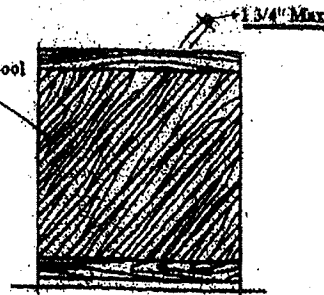
Gates in barriers around residential swimming pools.

The limitation of openings for barriers with diagonal members is shown in the detail provided.

Swimming Pool Enclosures



Barrier around pool



Diagonal members in barriers around residential swimming pools.

Chainlink dimensions at slats in fences around residential swimming pools.

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CONTRACTORS' INSURANCE INFORMATION

THE FOLLOWING FORMS ARE REQUIRED FOR WORKERS' COMPENSATION AND FOR DISABILITY INSURANCE

WORKERS' COMPENSATION INSURANCE

Accepted on one of the following forms ***only****

Form C-105.2 Certificate of NY State **Workers' Compensation Insurance** Coverage

Form GSI-105.2 (2/02) Certificate of Participation in Workers' Compensation Group Board approved self-insurance

Form U-26.3 NY State Insurance Fund Certificate of **Workers' Compensation Insurance**

DISABILITY INSURANCE

Accepted on one of the following forms ***only****

Form DB-120.1 Certificate of Insurance Under the New York State **Disability** Benefits Law

Form DB-155 Board-approved self-insured employers must obtain this form from Board's Self-Insurance Office

EXEMPTION FORM - NEW FORM CE-200

For ***each and every*** new or renewed permit a signed and dated form with a certificate number must be submitted *Replaced Form WC/DB100*

Affidavit for New York Entities With No Employees and Certain Out of State Entities, that New York State Workers' Compensation and/or Disability Benefits Insurance Coverage is Not Required

Any questions can be directed to:

New York State Workers Compensation Board
220 Rabro Drive Suite 100
Hauppauge, New York 11788
866-681-5354

Website: www.web.ny.gov

Directions - from east & west:

Long Island Expressway (LIE) to Exit 56. Turn north on Route 111-Wheeler Road (approx. 1/4 mile) to Rabro Drive. Turn right on Rabro Drive, enter the first parking lot on the right. The entrance to the Office is on the south end of the building (follow the directions on the sign).

LIABILITY INSURANCE WILL BE ACCEPTED ON THE ACORD FORM

* with valid expiration dates