COUNTY OF SUFFOLK

EDWARD P. ROMAINE
SUFFOLK COUNTY EXECUTIVE

DEPARTMENT OF PUBLIC WORKS

CHARLES J. BARTHA, P.E.
COMMISSIONER

LESLIE A. MITCHEL
DEPUTY COMMISSIONER

MICHAEL J. MONAGHAN, P.E.
CHIEF DEPUTY COMMISSIONER

JAMES J. AHRENS, P.E.
DEPUTY COMMISSIONER

For Building Permit Group Use Only

BPA# _____

Date Received: _____

Date Accepted for Review: _____

APPLICATION FOR BUILDING/DEMOLITION PERMIT

All sections of this application must be completed.

If this application is to AMEND or EXTEND an *existing* Building Permit provide the number of that permit here: _____

APPLICATION is hereby made for a permit to do the following work, which shall be done in accordance with the description, survey and plans submitted pursuant to the requirements of the ***2025 Uniform Code & 2025 Energy Code*** *of New York State* and any other laws, rules or regulations pertaining to the work proposed.

1. BUILDING/SITE INFORMATION:

Building/Project Name: _____

Building Address: _____

Tax Map Number: _____ **LAD Number:** _____ **Building Number:** _____

2. PROJECT INFORMATION: (Check/Fill in all that apply)

☐ **New Structure** ☐ **Demolition** **Proposed Use/Occupancy:** _____ **Construction Type:** _____

☐ **Modification to Existing Building/Structure. If so, check at least one of the following:**

☐ **Repair** ☐ **Alteration:** (Circle Level #) **Level: 1 2 3** ☐ **Change of Occupancy** ☐ **Addition** ☐ **Relocation**

Description of Project: _____

Construction work to be performed by: _____
(Name of contactor: Annual contract, County staff, lessee's forces, awarded bidder, etc.)

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APPLICATION FOR BUILDING/DEMOLITION PERMIT, Continued

3. DEPARTMENT/USER GROUP ACKNOWLEDGEMENT:

County Department/User Group Affected by Work: _____

The project described herein is authorized by the Department/User Group above.
SCDPW Code Enforcement Officials are authorized access to the building and site as required.

Printed Name of Commissioner or Authorized Representative	Signature of Commissioner or Authorized Representative	Date

4. SUBMIT WITH APPLICATION:

ALL APPLICABLE ITEMS BELOW *MUST* BE SUBMITTED WITH PERMIT APPLICATIONS:

Four, (4), Sets of Construction Documents, Including the Following: **Comments:**

- ❑ **Design Plans (Drawings and/or Specifications)**
  Must be Sealed and Signed by the Design Professional.
  - ❑ **Code Analysis Demonstrating Compliance With All Applicable Codes**
    Must be Sealed and Signed by the Design Professional and indicate Code complying with.
  - ❑ **Statement of Compliance with the Uniform Code and Energy Conservation Construction Code of New York State [19 NYCRR Part 1203.3(a)(3)(iii)]**
  - ❑ **Complete Statement of Special Inspections (Uniform Code Chapter 17)**
  - ❑ **Site Plan Showing Location of Project and Surrounding Structures**

Additional Documents:

- ❑ **Worker's Compensation Insurance Certificate, (C-105.2 or U-26.3)**
- ❑ **Disability Insurance Certificate, (DB-120.1)**
- ❑ **Utility Disconnect Notices, (water, sewer, electric, gas, etc.)**

5. DESIGN PROFESSIONAL:

Name: _____ **Dept./Firm:** _____

Address: _____

Office Phone: _____ **Cell:** _____ **E-Mail:** _____

I affirm that to the best of my knowledge and belief the plans, specifications, inspection schedules, code analysis and other construction documents included with and as part of this application represent a complete and accurate description of the work proposed and demonstrate compliance with all provisions of 19 NYCRR Part 1203, the *2025 Uniform Code & 2025 Energy Code* of New York State and any other laws, rules or regulations pertaining to the work proposed.

NYS License Number	Signature	Date

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BPA# _____

APPLICATION FOR BUILDING/DEMOLITION PERMIT, Continued

6. APPLICANT: (Commissioner/Authorized Representative of the User Group or DPW BDC/Facilities Engineering Project Manager)

(Note: This is the person to whom the Building Permit will be issued. The applicant must be a County Employee.)

Dept.: _____ **Name:** _____

Address: _____

Office Phone: _____ **Cell:** _____ **E-Mail:** _____

Title	Signature	Date

To schedule delivery and an initial review of the completed application package with all of the required documents, as listed in section 4, above, contact David McCarthy
631-852-4660. David.McCarthy@suffolkcountyny.gov

SCDPW BD&C Building Permit Group
335 Yaphank Avenue, Suite 208
Yaphank, NY 11980-9608