

TOWN OF WAPPINGER

CODE ENFORCEMENT

Susan Dao X 126

Sal Morello, III X142

FIRE INSPECTOR

Mark Liebermann X127

ZONING ADMINISTRATOR

Barbara Roberti X128



BUILDING DEPARTMENT

20 MIDDLEBUSH ROAD

WAPPINGERS FALLS, NY 12590-0324

(845) 297-6256

FAX: (845) 297-0579

FEES:

Above ground pool: \$150.00

LEGALIZATION FEE: \$250.00 IF APPLICABLE

BUILDING PERMIT APPLICATION

Above Ground Swimming Pools

*** THE FOLLOWING MUST BE SUBMITTED AT TIME OF APPLICATION ***

APPLIC FORM COMPLETED INSURANCESUBMITTED INSURANCEON FILE CONSENTIF APPLIC

Please provide:

Specifications of structure provided by manufacturer including:

1. Deed to property
2. Survey of property
3. Brochure of Pool
4. Specification of Pump and Filter
5. If Pool is to include deck,
sufficient drawings (2 Copies) of construction;
show all dimensions and construction, including footings and materials being used
6. Plot Plan Sheet provided must be filled out showing all sizes and setbacks of structure
and other structures on the property

ALL POOLS REQUIRE:

1. **POOL ALARM & CERTIFICATION (Form enclosed)**
2. **INSPECTION BY TOWN OF WAPPINGER BUILDING INSPECTOR**
3. **AN ELECTRICAL INSPECTION:**

NOTE: ALL ELECTRICAL WORK TO BE INSPECTED;
USE LIST ATTACHED OF THIRD PARTY INSPECTORS.

**NO POOL TO BE USED UNTIL CERTIFICATE OF COMPLIANCE
ISSUED !**

TOWN OF WAPPINGER PLOT PLAN

DIRECTIONS:
 1- DRAW STRUCTURE TO BE
 2- LABEL ITS DIMENSIONS
 3- LABEL SETBACKS WITH A

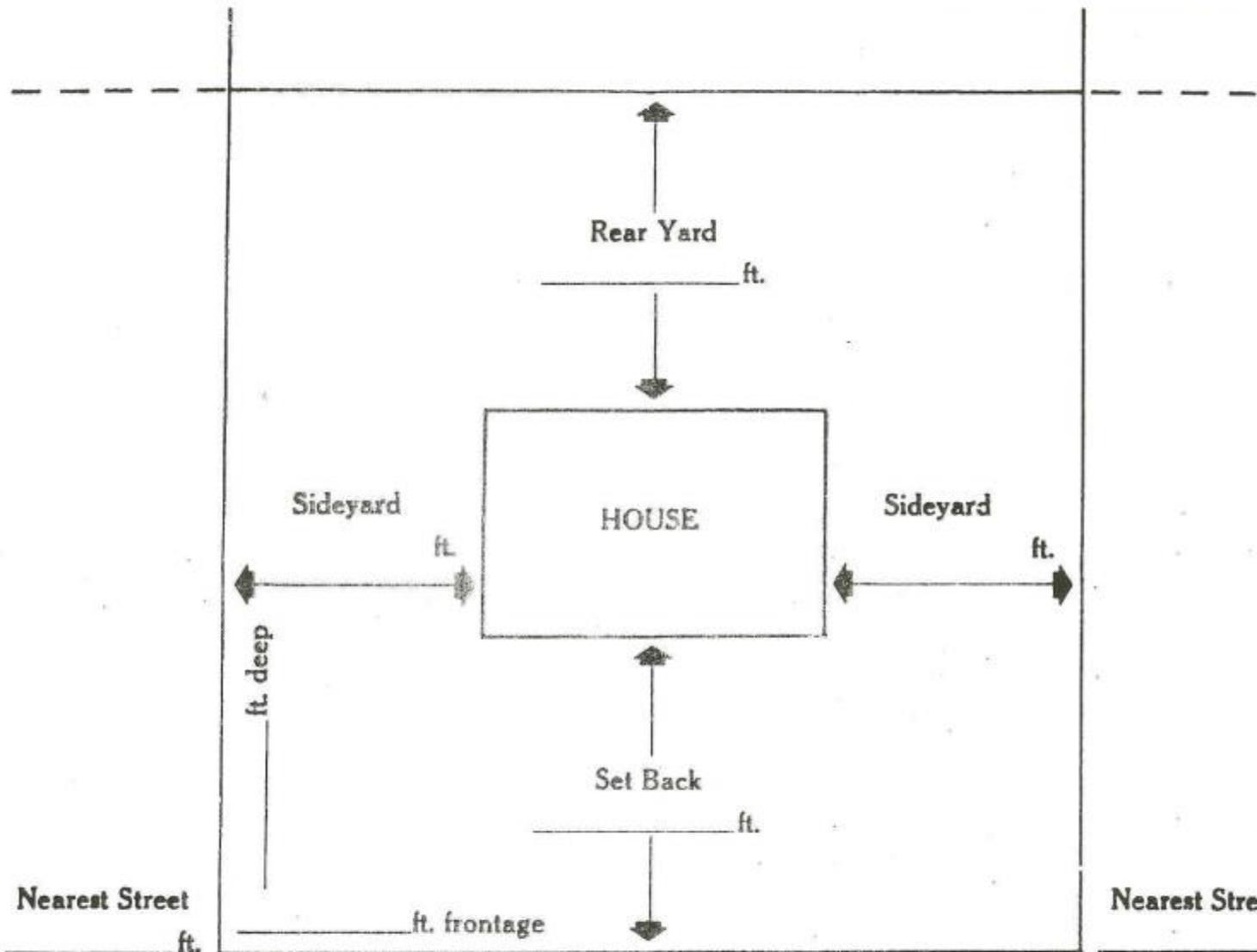
BUILDING PERMIT # _____ DATE _____

LOCATION N S SIDE _____ STREET/AVENUE
 E W

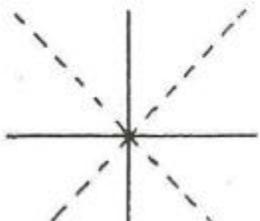
HOUSE NUMBER _____ LOT NUMBER _____ REC. VOL. _____ PAGE _____

OWNER OF LAND _____

INTERIOR OR CORNER LOT _____ ZONE _____



INDICATE LOCATION of WELL and SEWAGE SYSTEM
 and THE DISTANCE of EACH FROM HOUSE



_____ STREET

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OWNER CONSENT FORM

TO BE FILED WHEN THE APPLICANT IS NOT THE BUILDING, SITE OR PROPERTY OWNER

BUILDING PERMIT # _____ **APPLICATION #** _____

SITE LOCATION: _____

GRID: # _____

Name of APPLICANT: _____

(Person PHYSICALLY coming in to apply) (IF other than the Owner)

~ CERTIFICATION ~

NOTICE TO APPLICANTS: 240-109 Certificate of Occupancy

It shall be unlawful for a building owner to use or permit the use of any building or premises or part thereof hereafter created, erected, changed, converted or enlarged, wholly or partly, in its use or structure until a Certificate of Occupancy shall have been issued by the Building Inspector and the Zoning Administrator.

FAILURE TO COMPLY MAY RESULT IN COURT PROCEEDINGS.

I, _____, owner of the land/site/building hereby give my permission for the Town of Wappinger to approve or deny the above application in accordance with local and state codes and ordinances.

Date

Owner's Signature

Owner's Telephone Number

Print Name

Print Owner's Address

FOR OFFICE USE ONLY

Code Enforcement Official: _____

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BUILDING DEPARTMENT INSPECTION PROCEDURE

ANY CHANGES to plans require approval by Code Official
You are required to call **1-800-962-7962** before you excavate and contact **Underground Facilities Protective Organization** for approval.

You are required to schedule all inspections with this office in Advance of work to be inspected. Please provide building permit number, name on permit and specific type of inspection requested.

1. Pre-site inspection if required by Code Official
2. Erosion control measures as dictated on plan or notes
3. Footing inspection when complete all rebar placement and form work; notify at least 24 hours before
4. Framing inspection compliance to submitted approved drawings.
5. Rough plumbing with all in-ground pools
6. Final Electrical inspection by third party agency certificate
MUST BE SUBMITTED TO THIS OFFICE.
7. FINAL INSPECTION BY CODE OFFICIAL FOR COMPLIANCE TO SUBMITTED DRAWINGS AND N.Y.S. BUILDING CODE.

*******IT SHALL BE UNLAWFUL TO OCCUPY ANY STRUCTURE UNTIL A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS ISSUED BY THE CODE ENFORCEMENT OFFICER OF THE TOWN OF WAPPINGER*******

1. Above ground pools need to be 48" in height from grade all around the pool.
2. Pool alarm rated ASTM F2208 must be activated once pool is filled with water.
3. In ground pools require a complying permanent barrier (FENCE) 90 days from the date of the installation of the pool.
4. POOL IS NOT TO BE USED UNTIL ELECTRICAL INSPECTION BY A TOWN APPROVED ELECTRICAL INSPECTOR AND A CERTIFICATE OF COMPLIANCE IS ISSUED BY THE BUILDING DEPARTMENT.

Failure to comply with the above may result in legal action!

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Building Department POOL ALARM CERTIFICATION (ASTM F 2208 only)

Building Permit: _____

Date: _____

Location: _____

Owner / Builder: _____

Company / Business: _____

The undersigned hereby attests to the fact that the building/structure has installed an alarm system which conforms to the laws, title or regulation governing Building Construction, Title 19 NYCRR Residential Code of New York State (RCNYS) Chapter XXXIII, Subchapter A, Part 1220.5, Building Code Part 1221.3.

The above-listed owner/builder company/business hereby acknowledges that the alarm system and all components have been tested and that both manual and automatic features are working properly. The alarm sound is a minimum of 85 dba (decibel) when measures 10' away from alarm mechanism and meets requirements of ASTM F 2208. (Alarm sound both at poolside and inside any adjacent residence of building of occupancy.)

Property Owner/Authorized Agent that installed working pool alarm.

Town Board Approved Agencies

NAME	ADDRESS	TEL. #
Middle Department Insp. Agency, Inc. <i>Dave Williams</i>	(800) 873-6342 P.O. Box 474 Valatie, NY 12184	(800) 479-4504
New York Electrical Inspectors <i>Greg Murad</i>	HCR #4 Kelly Corners, NY 12455	(845) 586-2430 / (888) 693-4693
<i>Tom Le Jeune</i>	P.O. Box 384 Amenia, NY 12501	(845) 373-7308
New York Board <i>Pat Decina</i>	P.O. Box 1558 Wappingers Falls, NY 12590	(845) 298-6792 tel & fax.
Tri-State Insp. Agency, Inc. <i>Lou Ambrosia</i>	P.O. Box 1034 Warwick, NY 10990	(845) 986-6514
Commonwealth Elect. Insp. Svcs. <i>Bill Meyer</i>	94 Long Lane Walkill, NY 12589	(845) 895-2130
<i>Ron Henry</i>	2 Mallard Dr. Newburgh, NY 12550	(845) 562-8429 tel. & fax
All County Electrical Insp. Svcs., Inc. <i>Dave Scism</i>	4725 Rt. 9G Red Hook, NY 12571	(845) 757-5916/fax (845) 757-5688
Electrical Underwriters of NY,LLC <i>Ernest C. Bello, Jr.</i>	P.O. Box 4089 New Windsor, NY 12553	(845) 569-1759/ fax. 757-5688
The Inspector, LLC	7063 State Rt. 374 Chateaugay, NY 12970	(518) 497-9918 / (800) 487-0535
Z3 Consultants, Inc. <i>Gary Beck</i>	P.O. Box 363 LaGrangeville, NY 12540	(845) 471-9370 tel. & fax
NY Electrical Insp. & Consult., LLC <i>John Wierl</i>	93 Beattie Ave. Middletown, NY 10940	(845) 551-8466
Swanson Consulting, Inc. J. O. Swanson	P.O. Box 1361 Salisbury Mills, NY 12577 Northville, NY 12134	(845) 496-4443 / fax (845) 496-5160
State Wide Inspection Services <i>Frank J. Farina</i>	21 Old Main St., Suite 203 Fishkill, NY 12524	Tel. 845-202-7224/fax(914)219-1062

New York Certified Electrical Inspectors

Jerry Caliendo

203 Purgatory Rd.
Campbell Hall, NY 10916

845-294-7695

John Metsger

845-339-2119