

Well Permit Application

Village of Old Westbury
1 Store Hill Road
Old Westbury, NY 11568
(516) 626-0800

Requirements:

- Special Use Permit from DEC – must be attached to the Application
- Well Building Permit and Application Fee of \$750.00
- Certificate of Compliance Application and Fee of \$250.00
- Application Fee of \$150.00
- Survey showing location prepared by a licensed surveyor
- Contractors' General Liability and Workman's Compensation made out to the Village of Old Westbury as additional insured
- NYS DEC Final Certification
- Updated Survey required prior to the issuance of the Certificate of Compliance

ARTICLE III, Drilling of Wells [Adopted 10/20/1986 by Local Law Number 5-1986]

§ 210-47 Certain installed capacities prohibited.

The drilling of any well for the production of potable or nonpotable water at an installed capacity of 45 gallons per minute or less in the Village is hereby prohibited.

§ 210-48 Enforcement; penalties for offenses.

The Village of Old Westbury may enforce the provisions of this article by means of injunction in the Supreme Court and/or by means of appropriate proceedings in the Village Justice Court. When the Village proceeds in the Village Justice Court, each day of pumping shall be considered a separate violation, provided that a separate accusatory instrument is served upon the defendant. In the event that a person is found guilty in the Village Justice Court, he shall be fined no more than \$250 per day per violation, i.e., with respect to each accusatory instrument.

Permit No. _____ Permit Fee _____ Date _____ Job _____

INC. VILLAGE OF OLD WESTBURY
APPLICATION FOR SPORTS COURT PERMIT
No building permits shall be issued without proper Board resolutions.

Section: _____ Block: _____ Lot(s): _____

Owner's Last Name: _____ First Name: _____

Address: _____

Home Phone: _____ Business Phone: _____

Contact for Permit: _____ Telephone: _____

Estimated Cost of Proposed Construction: _____

Address Location of Permit _____

Description of Work: _____

Proof of General Liability and Workers' Compensation Insurance for each of the below.

Architect: _____ License No: _____

Address: _____ Phone No: _____

Contractor: _____ License No: _____

Address: _____ Phone No: _____

Plumber: _____ License No: _____

Address: _____ Phone No: _____

Electrician: _____ License No: _____

Address: _____ Phone No: _____

PROPERTY INFORMATION:

Is this a permit to legalize an existing structure? () Yes () No

Will any trees be cut down? () Yes () No Tree Removal Application Attached? () Yes () No

Square Footage of Lot: _____ Current % of Lot Coverage: _____

Existing Volume per Certification Letter: _____

Zoning District: _____ Proposed % of Lot Coverage: _____

Proposed Volume: _____ Total Volume on Plot: _____

Total Lot Coverage: _____ Height: _____ feet Stories _____

Plan Bd/BZA or Plan Bd Sub Committee Approval: () Yes () No

Site Plan Review: () Yes () No

DISTANCES FROM PROPOSED BUILDINGS TO PROPERTY LINES:

	Front Yard	Rear Yard	Side Yard
Main Building	_____ feet	_____ feet	_____ feet
Accessory Structures	_____ feet	_____ feet	_____ feet

OWNER'S AUTHORIZATION:

1. I agree to permit the Building Inspector and any officer or employee of the Village of Old Westbury to enter upon the premises in the discharge of their duties with this application.
2. Approved plans and a copy of the approved permit will remain on the premises at all times until a Certificate of Occupancy is issued. These plans will be made available to the Building Inspector.
3. The Building Inspector will be given a minimum of 48 hours notice to make the required inspection and no work will continue until such inspection has been completed and approved.
4. The owner or his/her representative will be responsible to arrange for all required inspections.
5. Permit will expire within one (1) year from date of issuance unless construction is in progress. No work is to be started until permit has been received by the applicant.

State of New York)

County of Nassau)

_____ depose and say: that he/she resides at
_____ mail address of
owner in the State of _____, that he/she is the owner of all certain lots,
parcel of land shown on the attached survey Section _____ Block _____ Lot(s)
_____ situated, lying and being within the incorporated area of the Village of Old
Westbury; that I/we have read and understand the items above as here in stated, that
the work to be done upon the premises, will be done in accordance with the approved
application and accompanying plans, of which he/she is totally familiar and that he/she
hereby names _____ as his or her representative to file this
application on his/her behalf.

Sworn to me this _____ day of _____ 20__

Signature of Notary Public

Signature of Homeowner

**APPLICATION FOR
CERTIFICATE OF OCCUPANCY/COMPLETION
VILLAGE OF OLD WESTBURY
NEW YORK**

Certificate No.: _____ Application Date: _____

Issued Date: _____ Type: _____

No certificate will be issued unless all final requirements stamped on building plans are met. This includes a final survey, done by a licensed surveyor, electrical underwriter's certificate from Village approved electrical inspector, architect's certification letter and final inspection done by Village Superintendent of Buildings and Public Works. The undersigned, as owner, or agent for owner, (circle one) will request that final inspection to be made and a Certificate of Occupancy/Completion be issued for the (new/altered) building at the following location after all completed requirements are made.

Section: _____ Block: _____ Lot: _____

Street: _____

Building Permit No. _____

Issue Date: _____

Signature: _____

Address: _____

Phone: _____

Email: _____

REQUIREMENTS FOR A CERTIFICATE OF OCCUPANCY

1. Final Survey (2 copies) stamped and sealed by a licensed land surveyor.
2. Electrical underwriter's certification by village accepted agency.
3. Architect's certified letter with signature and seal, stating that all phases of construction were constructed as per village approved plans. Project conforms to the N.Y. state residential Code, international Building Code and the Village's allowable volume, zoning ordinance, structural design, strapping, hold downs, and Energy Code requirements.
4. Final inspection and approval of Building Department.
5. Letter of Certification of Drywells for Drainage from Engineer and/or Surveyor, stating number of installed drywells, dates and sizes of rings, dome and cover.
6. Approval of cesspool by Nassau Health Department (For a New Home)
7. Pressure test certification letter from installer.
8. Final approval from the Water Department regarding possible upgrading of your meter pit.
9. Elevator Certification (if applicable)
10. Completed Landscaping. New homes must have a landscaping inspection done with the Building Inspector and Planning Board Sub-Committee Chairman. Landscaping must match what was originally approved.

Notice of Competition of Construction

Return Completed Copy to:

Village of Old Westbury
Water Superintendent
1 Store Hill Road
Old Westbury, NY 11568

Fax: (516) 626-1296

DEC Permit #: _____ Building Permit #: _____

Permitee: _____ Phone Number: _____

Well Driller: _____ Phone Number: _____

The terms and condition of this permit have been compiled with, and the authorized activity was completed on _____.

Permitee Signature

Date

Well Driller Signature

Date

INCORPORATED VILLAGE OF OLD WESTBURY

1 STORE HILL ROAD

OLD WESTBURY, NY 11568

ASSESSOR'S FORM

Section _____ Block _____ Lot _____ Zone _____ Date _____

Address of Construction _____

Property description: Residential Commercial Other

Existing conditions (photo required):

Lot: size _____ sq ft

Coverage: _____ sq ft

Floor Area: _____ sq ft

Number of Stories: _____

Bathrooms: full _____ half _____

Kitchen: Renovate New

Garage: Number of cars _____

A/C units: _____

Pool: Gunite Vinyl _____ sq. ft

Deck: _____ sq ft

Description of Work: _____

Alteration Addition New construction Demo Pool

Proposed Conditions (photo or rendering required):

Lot Coverage: _____ sq ft

Floor Area: _____ sq ft

Second Floor: _____ sq ft

Number of Stories: _____

Bathrooms: full _____ half _____

Bathrooms: Renovate New

Kitchen: Renovate New

A/C units: _____

Fireplace(s): _____

Central air unit(s): _____

Basement: Full Partial

Finished: _____ %

Garage: Number of cars _____

Garage: Attached Under

Pool: Gunite or Vinyl _____ sq. ft

Deck: _____ sq ft

Official Use Only

Permit date _____ **Percent completed** _____ **Date** _____

Exterior _____ **Interior finish** _____ _____



**BUILDING PERMIT
RESIDENTIAL PROPERTY
DEPARTMENT OF ASSESSMENT
NASSAU COUNTY**

240 Old Country Road, Mineola, NY 11501

TOWN - CITY - VILLAGE OF: _____

NBHD# (ASSESSOR USE ONLY)

DATE REC'D (ASSESSOR USE ONLY)

SECTION	BLOCK	LOT (S)	SCH DIST #	PERMIT #	SPECIFIC ZONING DESIGNATION

Location of Building	N.E.S.W. SIDE OF (OR CORNER OF)	N.E.S.W. SIDE OF
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ADDRESS OF PROPERTY	Check one	NAME OF BUSINESS
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CITY, TOWN, VILLAGE	ZIP	<input type="checkbox"/> OWNER OR <input type="checkbox"/> LESSEE	CONTACT PERSON/OWNER
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ESTIMATED COST OF CONSTRUCTION:	<input type="checkbox"/> OWNER OR <input type="checkbox"/> LESSEE	ADDRESS
		CITY, STATE, ZIP

WORK MUST BEGIN BY	PRINCIPLE TYPE OF CONSTRUCTION	PHONE
PERMIT EXP DATE		EMAIL

LOT SIZE S.F.	<input type="checkbox"/> STEEL <input type="checkbox"/> MASONRY <input type="checkbox"/> FRAME	<p align="center">IF YOU WISH TO GROUP OR APPORTION LOTS PLEASE CALL 516-571-1500 FOR FURTHER INFORMATION</p>
# BLDGS ON LOT		

DETAILED DESCRIPTION OF WORK (PLEASE PRINT CLEARLY)
*INCLUDING, BUT NOT LIMITED TO: LOCATION, TYPE AND DIMENSIONS OF IMPROVEMENT

PERMIT TYPE - CHECK ALL ITEMS THAT APPLY	DOES RESIDENCE HAVE THE FOLLOWING
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION (CHANGE IN S.F.) <input type="checkbox"/> DEMOLITION <input type="checkbox"/> ALTERATION (NO CHANGE IN S.F.) <input type="checkbox"/> MAINTAIN (PRE-EXISTING) <input type="checkbox"/> RECONSTRUCTION <input type="checkbox"/> DECK, TERRACE, PORCH, CARPORT <input type="checkbox"/> DORMERS <input type="checkbox"/> OTHER _____	CENTRAL AIR YES <input type="checkbox"/> NO <input type="checkbox"/> FINISHED ATTIC YES <input type="checkbox"/> NO <input type="checkbox"/> BASEMENT FINISH 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> FULL <input type="checkbox"/>
<input type="checkbox"/> FIRE DAMAGE <input type="checkbox"/> GARAGE/ OUT BUILDING <input type="checkbox"/> HVAC <input type="checkbox"/> PLUMBING <input type="checkbox"/> RELOCATION <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> TENNIS COURT <input type="checkbox"/> CHANGE IN USE	

PROPOSED TOTAL PLUMBING FIXTURES

FLOOR/FIXTURE	BASEMENT	1ST FLOOR	2ND FLOOR	3RD FLOOR
BATHROOM SINK				
TOILET				
BATHTUB				
STALL SHOWER				
BIDET				
KITCHEN SINK				
WET BAR				

NUMBER OF EXISTING AND PROPOSED BATHS

NUMBER OF EXISTING FULL BATHS		NUMBER OF PROPOSED FULL BATHS	
NUMBER OF EXISTING HALF BATHS		NUMBER OF PROPOSED HALF BATHS	

HALF BATH EQUALS TWO FIXTURES, FULL BATH EQUALS THREE OR MORE FIXTURES

NEW C/O NEEDED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
VARIANCE OBTAINED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
CONSTRUCTION/RENOVATION IN EXCESS OF 50%	YES <input type="checkbox"/>	NO <input type="checkbox"/>
SURVEY ENCLOSED	YES <input type="checkbox"/>	NO <input type="checkbox"/>

PLEASE ATTACH ALL PERMITS & SURVEY IF AVAILABLE

DATE OF GRANTING OF PERMIT _____

Signature of Applicant/Contact Person - Sign & Print

SEPARATE APPLICATION SHALL BE MADE FOR EACH BUILDING

Address of Applicant/Contact Person

Telephone

FIELD REPORT ON REVERSE

TOWN _____
SCHOOL DISTRICT _____
SECTION _____
BLOCK _____
LOT(S) _____
CA # OR BLDG # _____
UNIT # _____
DATE _____