



Town of Mamaroneck – Building Department

740 West Boston Post Road
Mamaroneck, NY 10543-3353
TEL: 914-381-7830 FAX: 914-381-8473

APPLICATION FOR BUILDING PERMIT

(No Hand Written Applications Accepted)

Project Information:

DATE: _____

Permit Type: Residential Commercial

Addition/Interior Alteration	HVAC	Solar
Air Conditioner	New Accessory Structure	Swimming Pool
Blasting	New Construction	Tank Abandonment
Deck/Porch	Patio	Tank Install
Demolition	Rock Removal	Tank Removal
Ext: Alteration/Renovations	Roof	Windows/Doors Install
Fence	Shed	
Generator	Sign	Other: _____

SITE ADDRESS: _____ SEC: BLK: LOT:

DESCRIPTION OF WORK:

MUST BE COMPLETED ON SUBMITTAL

COST of WORK: _____

PLUMBING WORK: YES NO

ELECTRICAL WORK: YES NO

OFFICE USE ONLY:

Verified: _____

Verified: _____

OWNER INFORMATION:

Name(s):	_____		
Address:	_____		
City/ST:	_____	Zip Code:	_____
Home Phone:	_____	Work Phone:	_____
Cell Phone:	_____		
E-Mail:	_____		

CONTRACTOR INFORMATION:

Company Name:	_____				
Contact Name(s):	_____	Cell:	_____		
Address:	_____	City/St:	_____	Zip:	_____
Phone:	_____	FAX:	_____		
E-Mail:	_____				



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ARCHITECT/DESIGNER/ENGINEER INFORMATION:

Company Name:					
Contact Name(s):		Cell:			
Address:		City/St:		Zip:	
Phone:		FAX:			
E-Mail:					

Who Will Supervise the Work (check one)

Builder Architect Engineer Owner Other _____

Main Contact Number _____

E-mail _____

DATE STAMP

Applicant Signature

Filing Fee: _____

Receipt Number: _____

OFFICE USE ONLY

DIG SAFE NUMBER REQUIRED: YES NO

DIG SAFE NUMBER: _____

BOND REQUIRED: YES NO

NOTICE: All permits are good for one year from the date of issuance. The permit may be renewed for a maximum of two (2) six (6) month periods for an additional fee. It is the responsibility of the owner of the property listed above in the application to close out the permit. Passing of a final inspection does not complete the process. **ONLY** the issuance of either a “**LETTER OF COMPLETION**” or “**CERTIFICATE OF OCCUPANCY**” closes a permit. Any deviation from the approved plans will result in the revocation of the permit by the Building Inspector. Any amendments to the plan must be approved by the Building Department.

Homeowner Signature _____ **Date:** _____

From the Assessor:

The Town Assessor does not wait until a Certificate of Occupancy is issued to establish value for parcels with building permits. Each year the assessment roll reflects the physical condition of the property as of May 1st, the “taxable status date” for the Town of Mamaroneck. All building permits are reviewed by the Assessor’s Office and property inventories, building sketches and values are adjusted accordingly.



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To complete the application process, you will need to provide the following information along with the completed application to the Building Department:

- Street address _____
- Section _____ Block _____ Lot _____
- Zoning district _____
- Total lot area _____ square feet
- Dimensions from construction to Lot Lines (feet)
Front _____ Left Side _____ Right Side _____
Rear _____
- Total square footage of new construction _____ square feet
Basement _____ First floor _____ Second Floor _____
Third Floor _____ Attic _____
- Does the project involve exterior site work/temporary disturbance to site soils? Yes No
If **YES** indicate the total area of land Disturbance _____ square feet
- Are you working within a FEMA designated flood zone? Yes No
- Does the project involve disturbance within a regulated wetland buffer or watercourse? Yes No
- Are you working within the Town right-of-way? Yes No
- Are you working within a State or County right-of-way? Yes No
- Are you crossing the Town Right-of-Way with a dumpster or heavy equipment (i.e. track excavator)? Yes No
- Are you cutting any trees? Yes No
If **YES**, How many _____ Diameter at breast height (DBH) _____

Office use only:

- Street opening permit required
- County or State permit required
- Wetlands/Coastal permit required
- Tree Permit required
- Surface and Erosion Control permit required



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***NOTICE OF UTILIZATION OF TRUSS TYPE
CONSTRUCTION, PRE-ENGINEERED WOOD
CONSTRUCTION AND/OR TIMBER CONSTRUCTION
(MUST BE COMPLETED ON SUBMITTAL)***

To: Town of Mamaroneck

Owner:

Date:

Property Address:

Please take notice that the (check applicable line):

New residential structure

Addition to existing residential structure

Rehabilitation to existing residential structure

**To be constructed or performed at the subject property reference above
will utilize (check each applicable line):**

Truss type construction (TT)

Pre-engineered wood construction (PW)

Timber construction (TC)

In the following location(s) (check applicable line):

Floor framing, including girders and beams (F)

Roof framing (R)

Floor framing and roof framing (FR).

Date:

Signature:

Name:

Title:

NOT APPLICABLE

Note: Please complete this form with every application and if above referenced construction is applicable then building needs proper placarding as stated in referenced law or if not used check the “NOT APPLICABLE” box.

Check regulation at the following Website: <http://www.dos.ny.gov/DCEA/noticadopt.html>



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INSTRUCTIONS / CHECKLIST

Please Note: Completing the application form does not constitute a permit to commence construction.

To complete the application process, you will need to deliver to the building department the following:

- Application signed by **Applicant & Homeowner**, completed forms. Application forms are fillable PDFs, hand-written forms will not be accepted.
 - If applicable, architectural plans, stamped and signed by a NYS Licensed Architect or Professional Engineer in the following formats:
 - **One (1) - Full Size Set**
 - **One (1) - 11x17 Set**
 - Site Plan or Survey
 - Contractor's Insurance:
Town of Mamaroneck as Certificate Holder
 - Liability: Acord Form – listing Town of Mamaroneck as *Additional Insured*
 - Worker's Compensation: C105.2 Form
 - Disability: DB-120 Form
 - Westchester County Home Improvement License
- OR-**
- Waiver of Insurance if all work is to be performed by the property owner.

Additional information may be required once a formal review has been completed.