

VILLAGE OF GREAT NECK ESTATES

Fee Paid _____
Receipt# _____
Date _____

4 Gateway Drive, Great Neck, NY 11021 516-482-8283 Fax: 516-482-5572

MISCELLANEOUS PERMIT APPLICATION

Address _____ Section 2 Block _____ Lot (s) _____ Zone _____
Owner's Name (s) _____ Estimated Cost of Work \$ _____
Owner's Home Phone # _____ Business # _____ Cell # _____
Owner's Email: _____

INSTRUCTIONS

Application is hereby made for the permit indicated below, in accordance with the requirements of the Village Code:

Note: If a dumpster is needed, a separate Dumpster Permit is required.

_____ PLUMBING (Provide plumbing diagram)

_____ ROOFING (Describe extent of work below)

Material of existing roof _____ Material of new roof _____
Manufacturer _____ Color (& provide sample) _____
Nailing Pattern (*Provide copy of manufacturer's specification sheet*) _____
Type & size of structural support _____

_____ FENCE (Provide two surveys indicating fence size & location & a photocopy of the proposed fence style)

_____ SIDEWALK (Filing Fee & Refundable Deposit - **separate checks** - w/two surveys indicating location of sidewalk repair)

_____ DRIVEWAY/WALKWAY/PATIO See Section 230-39 of Village Code for Maximum Impervious Surface
(Filing Fee, two surveys marked and dimensioned indicating size and location) Calculate rainwater runoff for 3" rainfall at driveway, size drywell for entire driveway. Locate drain & drywell on site plan.

_____ OTHER

Description of Proposed Work

Contractor's Name _____

Contractor's Address _____

Contractor's Telephone # _____ Email: _____

Plumber's Name _____

Plumber's Address _____

Plumber's Telephone # _____ Email: _____

Electrician's Name _____

Electrician's Address _____

Electricians's Telephone # _____ Email: _____

****NY State Law requires that Certificates of Workers' Compensation Insurance, General Liability Insurance, and Disability Insurance be filed with this application for ALL contractors and subcontractors performing work pursuant to this application. See minimum insurance requirements. The Incorporated Village of Great Neck Estates, It's Officers, Agents & Employees must be named as Additional Insured and Certificates must identify the job location. ** Plumbers & Electricians require a Village of Great Neck Estates License in addition to the above***

AFFIDAVIT OF PROPERTY OWNER/AUTHORIZATION

All Owners must sign either as owner or applicant

State of New York)

SS:

County of Nassau)

(I)(We), _____ being duly sworn, state:
Print Name(s)

Complete Items #1, 2 or 3 as applicable, then Item #4

(I am) (We are) the owner(s) of the property described in this application known as _____, and described on the Nassau County Land and Tax Map as Section 2 Block _____, Lot(s) _____.

- (1) If the applicant is a corporation, the deponent is an officer thereof, to wit the _____, and is authorized by the Board of Directors of the corporation to execute this application on behalf of the corporation.
- (2) If the applicant is a partnership, the deponent, _____ is a general partner thereof, and has authority to execute this application in the name of the partnership.
- (3) (I) (We) hereby authorize _____ to submit this application.

Signature of Owner

Signature of Owner

Sworn to before me this ____ day
of _____ 20 ____.

Notary Public

Signature of Applicant

Sworn to before me this ____ day
of _____ 20 ____.

Notary Public

**FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS 'A' MISDEMEANOR
PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK**

HOLD HARMLESS AGREEMENT

To the fullest extent permitted by law, (Owner), shall indemnify, defend and hold harmless the **Incorporated Village of Great Neck Estates**, its elected and appointed officials, agents, employees and volunteers from and against all claims, damages, losses and expenses, including, but not limited to, reasonable attorneys' fees, arising out of or resulting from the performance of activities of

Address: _____

Description of Work: _____

or of its officers, agents, employees and/or sub-contractors, provided that such claim, damage, loss or expenses is attributable to bodily injury, sickness, disease or death or to injury to or destruction of tangible property (other than the work itself), including the loss of use resulting there from, regardless whether or not it is caused in part by a party indemnified thereunder. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist in favor of any party or person, described in these paragraphs.

In any and all claims against the **Incorporated Village of Great Neck Estates**, its elected and appointed officials, agents, employees or volunteers by any employee of the contractor or subcontractor, anyone directly or indirectly employed by any of them or anyone whose acts any of them may be liable, the indemnification obligation under the above paragraph shall not be limited in any way by any limitation on the amount of type of damages, compensation or benefits payable by or for the contractor or their sub-contractor under Workers Compensation acts, disability acts, or other employee benefit acts.

In witness whereof, the undersigned has executed this agreement this _____ day of _____, 20____.

Signature

Print Name

Signature

Print Name

STATE OF NEW YORK

COUNTY OF _____: SS

On the _____ day of _____, 20____, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity(ies), and that by his/her signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument/

Notary Public

VILLAGE OF GREAT NECK ESTATES

Machinery Operation Compliance Agreement

NOTICE

Section one. Paragraph A of Section 154-2 of the Code of the Village of Great Neck Estates is hereby amended, to read as follows:

A. No person shall permit or cause the operation of any machinery, including lawn mowers, drills, power saws or other equipment,

(a) between the hours of 7:00pm on any day and 8:00am on the following day,

(b) on Saturdays, for more than an aggregate of thirty (30) minutes at any one property,

(c) or at any time on Sundays or holidays,

if such operation causes the emission of noise audible beyond the boundary of the property on which the machinery or equipment is located.

I, the undersigned, have read, understand and will comply with the aforementioned section of the Village Code.

Print Name (*Owner*)

Print Name (*Contractor*) (*Company Name*)

Signature

Signature

Date

Date

VILLAGE OF GREAT NECK ESTATES

4 Gateway Drive, Great Neck, NY 11021 516-482-8283 Fax: 516-482-5572

INSURANCE & LICENSE REQUIREMENTS

GENERAL CONTRACTORS:

- **General Liability Certificate** (Acord Form)
 - ✓ “The Incorporated Village of Great Neck Estates, and its Officers, Agents and Employees 4 Gateway Drive Great Neck, NY 11021” **MUST** be listed as the Certificate Holder & listed as Additionally Insured on the certificate
 - ✓ Address of Job **MUST** also be listed on certificate
- **Additional Insured Endorsement Form** (ISO Form CG 20 12)
 - ✓ **MUST** be indicated on the form: “The Incorporated Village of Great Neck Estates, and its Officers, Agents and Employees 4 Gateway Drive Great Neck, NY 11021”
- **Disability Insurance** (DB120 form)
- **Workers’ Compensation** (C105.2 form)
- **Nassau County Home Improvement License**
 - *Note: For Workers’ Comp & Disability Exemption use form CE-200*

PLUMBER:

- Village of Great Neck Estates Plumber’s License - \$50/year
Submit copy of current Master Plumber’s License & Liability, Disability & Workers’ Comp Insurances as indicated above

ELECTRICIAN:

- Village of Great Neck Estates Electrician’s License - \$50/year
Submit copy of current Master License & Liability, Disability & Workers’ Comp Insurances as indicated above

ELECTRICAL INSPECTION SERVICES

Certified Electrical Inspections Inc.
188 Park Ave
Amityville, NY 11701
(888)-238-1338 (631)-598-5610

Electrical Inspectors Inc.
308 East Meadow Ave
East Meadow, NY 11554
(516)794-0400

Suffolk Bureau of Electrical Inspectors Inc.
40 Nottingham Drive
Middle Island, NY 11953
(631)495-8136 3/10/14

Electrical Inspection Service Inc.
375 Dunton Avenue
East Patchogue, NY 11772
(631)286-6642 6/13/11

Alliance Electrical Inspections Ltd
707 Hyman Avenue
West Islip, NY 11795
(516)248-0820 (631)539-6055 6/13/11

Long Island Electrical Inspectors, Inc.
21 Third Avenue
Bayshore, NY 11706
(631)708-6690 7/8/13

NYS Electrical Inspections, Inc.
278 Indian Head Road
Kings Point, NY 11754
(631)466-4235 (631)292-2710 7/13/20

***The above electrical inspection companies are the ONLY electrical inspectors authorized by the Village of Great Neck Estates Board of Trustees.**



**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:	ADDRESS
	CITY, STATE, ZIP

WORK MUST BEGIN BY	PRINCIPLE TYPE OF CONSTRUCTION	PHONE
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PERMIT EXP DATE	<input type="checkbox"/> STEEL	EMAIL
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LOT SIZE S.F.	<input type="checkbox"/> MASONRY	IF YOU WISH TO GROUP OR APPORTION LOTS PLEASE CALL 516-571-1500 FOR FURTHER INFORMATION
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# BLDGS ON LOT	<input type="checkbox"/> FRAME
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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

<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> FIRE DAMAGE	DOES RESIDENCE HAVE THE FOLLOWING 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"/> ADDITION (CHANGE IN S.F.)	<input type="checkbox"/> GARAGE/ OUT BUILDING	
<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> HVAC	LOT(S)
<input type="checkbox"/> ALTERATION (NO CHANGE IN S.F.)	<input type="checkbox"/> PLUMBING	
<input type="checkbox"/> MAINTAIN (PRE-EXISTING)	<input type="checkbox"/> RELOCATION	
<input type="checkbox"/> RECONSTRUCTION	<input type="checkbox"/> REPLACEMENT	
<input type="checkbox"/> DECK, TERRACE, PORCH, CARPORT	<input type="checkbox"/> SWIMMING POOL	
<input type="checkbox"/> DORMERS	<input type="checkbox"/> TENNIS COURT	
<input type="checkbox"/> OTHER _____	<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

FIELD REPORT ON REVERSE _____ Address of Applicant/Contact Person Telephone _____

Rev 02/11

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