



DEPARTMENT OF BUILDINGS
INCORPORATED VILLAGE OF GARDEN CITY
 VILLAGE HALL
 351 STEWART AVENUE
 GARDEN CITY, NY 11530
 516-465-4040(O) – 516-742-5377 (F)
 DOB@GARDENCITYNY.NET

BUILDING PERMIT APPLICATION	
OFFICE USE ONLY	
APPLICATION #	
Permit #	
Fee Collected	\$

1. Filing Status – Check all that apply in this section.

Initial Submission (New Buildings)
 Initial Submission (Addition or Alterations)
 P.A.A (Post Approval Amendment)
 Demolition

2. Cost of Construction – (Industry Standards)

Estimated Cost \$ OFFICE USE ONLY: Fee \$ Deposit \$ Total \$

3. Property Information

Address: _____ Garden City N.Y 11530

Map: _____ Block: _____ Lot(s): _____ Zoned: Residential Commercial

Existing Single Family Multiple Family Commercial/Business Other* *Describe in #4
Proposed Single Family Multiple Family Commercial/Business Other* No Change

Note: For Multiple Family with 4 or more tenants, must be filed as COMMERCIAL

Total Lot Square Footage (ft²) _____ ft² All zoning information and calculations are also to be shown and submitted on construction drawings

Square Footage at Ground Level _____ ft² Height-feet / Stories: _____

Existing Lot Coverage: _____ Rear Lot Coverage: _____ Front Yard Setback: _____ Rear Yard Setback: _____
 Side Yard Setback: _____ Aggregate Side: _____

Proposed Lot Coverage: _____ Rear Lot Coverage: _____ Front Yard Setback: _____ Rear Yard Setback: _____
 Side Yard Setback: _____ Aggregate Side: _____

4. Job Description - Scope of Work

Description of Work: _____

Indicate any and all Demolition (Full Demolition Requires a Separate Form): _____

5. Plans Submitted

AR Architectural ST Structural FO Foundation ZN Zoning Calculations NP No Plans
 EC Energy Code PL Plumbing EL Electrical ME Mechanical SW Site Work
 Other: _____ Will Structural Stability be affected by this alteration? Yes No

6. Owner/ Tenant Information Check box if Owner Address is the same listed above:

Last Name: _____ First Name: _____ M.I: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Home Phone: () _____ Cell: () _____ Email: _____

7. Applicant Information NYS License #: _____ Same as above:

Last Name: _____ First Name: _____ M.I: _____
 Company Name: _____ Email: _____
 Company Address: _____ City: _____ State: _____ Zip: _____
 Office Phone: _____ Fax: _____ Cell: _____



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8. Designer of Record Information

Professional Engineer Registered Architect Other: NYS License #:

Last Name: _____ First Name: _____ M.I: _____

Company Name: _____ Email: _____

Company Address: _____ City: _____ State: _____ Zip: _____

Office Phone: () Fax: () Cell: ()

9. Contractor / Construction Manager

Last Name: _____ First Name: _____ M.I: _____

Company Name: _____ Email: _____

Company Address: _____ City: _____ State: _____ Zip: _____

Office Phone: () Fax: () Cell: ()

Additional Notes:

10. Designer Professional

The undersigned affirms that he/she is authorized to make this application, is responsible for the work described, and that all statements and documents contained herein are true and accurate to the best of his/her knowledge and belief.

Name: _____



Signature: _____ Date: _____

11. Contractor / Construction Manager

The undersigned affirms that he/she is authorized to make this application, is responsible for the work described, and that all statements and documents contained herein are true and accurate to the best of his/her knowledge and belief.

Signature: _____ Date: _____

Print Name: _____

Forms Submitted – All information to be provided
 Workers Compensation Disability Insurance Compensation

12. Property Owner Same as above:

The undersigned affirms that he/she is the owner of the property described herein, hereby gives the consent to this application and fully understands the requirements contained therein in order to receive a Certificate of Occupancy.

Signature: _____ Date: _____

Print Name: _____

Phone: () Cell: ()

Email: _____

13. Applicant Statement & Signature Same as above:

The undersigned affirms that he/she is authorized to make this application, is responsible for the work described, and that all statements and documents contained herein are true and accurate to the best of his/her knowledge and belief.

Signature: _____ Date: _____

Print Name: _____

Phone: () Cell: ()

Email: _____

Forms Submitted – All information to be provided
 Workers Compensation Disability Insurance Compensation

Incomplete applications will not be accepted. This form must be typewritten and submitted in triplicate (1 original and 2 copies).



DEPARTMENT OF BUILDINGS COMMERCIAL CODE DATA WORKSHEET

INCORPORATED VILLAGE OF GARDEN CITY
351 STEWART AVENUE, GARDEN CITY, NEW YORK 11530
(516) 463-4040 (P) • (516) 742-5377 (F)

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IN ORDER TO PROCESS YOUR APPLICATION THIS WORKSHEET MUST BE FULLY COMPLETED.

1. TYPE OF FILING – CHECK ALL THAT APPLY IN THIS SECTION.			
<input type="checkbox"/> New Construction	<input type="checkbox"/> ALTERATION TYPE 1	<input type="checkbox"/> ALTERATION TYPE 2	<input type="checkbox"/> ALTERATION TYPE 3
<input type="checkbox"/> Change of Occupancy	<input type="checkbox"/> Historic Building	<input type="checkbox"/> Relocated Structures	<input type="checkbox"/> REPAIRS
		<input type="checkbox"/> ADDITIONS	<input type="checkbox"/> Other:
2. PROPERTY INFORMATION – ALL INFORMATION TO BE PROVIDED			
Address:		Garden City	N.Y
		11530	
Map:	Block:	Lot(s):	Zoned:
3. DESCRIPTION OF WORK – SCOPE OF WORK THAT WILL BE PERFORM AND IT'S SPECIFIC TO ITS LOCATION OR ROOM.			
Description of work:			
4. APPLICANT INFORMATION			
Applicant Name:		Company Name:	
Company Address:		City:	State: Zip:
Last Name:		First Name	M.I
Office Phone: ()	Cell: ()	Email:	

LEGEND: ** CODE DATA **

NA	NOT APPLICABLE	NR	NOT REQUIRED	NS	NOT SHOWN ON DRAWINGS
NC	NON-CONFORMING	R	REQUIRED	C	CONFORMS

5. CODE TABLE – APPLICANT MUST CALCULATE IN SPACE PROVIDED ON LINES (3.4, 3.3, 5.1 & 5.2)				
No.	TOPIC	CODE SECTION	REQUIRED / ALLOWED BY CODE	PROPOSED / MAINTAINED
1.0	OCCUPANCY CLASSIFICATION PROPOSED/EXISTING	302		
1.1	MIXED OCCUPANCIES – NON- SEPARATED OR SEPARATED USES	508.3 508.3.3		
2.0	TYPE OF CONSTRUCTION (INCLUDE SUBTYPE)	602		
2.1	FIRE RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS (HOURS)	TABLE 601		
2.2	FIRE RESISTANCE RATING REQUIREMENTS FOR EXTERNAL WALLS	TABLE 602		
3.0	ALLOWABLE HEIGHT AND BUILDING AREAS	CHAPTER 5		
3.1	HEIGHT (FT.)	TABLE 503		
3.2	NUMBERS OF STORIES	TABLE 504, 3, 4		
3.3	FLOOR AREA (SQ. FT. PER FLOOR)	TABLE 506		
3.5	FLOOR AREA MODIFICATIONS * BUILDING AREA	506		
3.6	OTHER			
4.0	FIRE PROTECTION SYSTEMS	CHAPTER 9		
4.1	AUTOMATIC SPRINKLER SYSTEM	903 [B] [F]		
4.2	PORTABLE FIRE EXTINGUISHERS (MUST SHOW LOCATION ON DRAWINGS)	906 [B] [F]		
4.3	FIRE ALARM AND DETECTION SYSTEM	907 [B] [F]		
4.4	OTHER; BUILDING FINISHES (FLOOR SPREAD) CHAPTER 8			
5.0	MEANS OF EGRESS	CHAPTER 10		
5.1	OCCUPANT LOAD*	TABLE 1004.1.2		
5.2	EGRESS WIDTH*	1005.1		
5.3	EXIT SIGN(S)	1013		
5.4	EGRESS ILLUMINATION (EMERGENCY LIGHTS)	1008		
5.5	STAIRWAYS AND HANDRAILS/GUARDS	1011/1014/1015		
5.6	EXIT ACCESS (SPACE WITH ONE MEANS OF EGRESS)	1016 THROUGH 1021		
5.7	EXIT ACCESS TRAVEL DISTANCE	1017 TABLE 1017.2		
5.8	CORRIDOR WIDTH	1020.2		
5.9	CORRIDOR FIRE RESISTANCE RATING	TABLE 1020.1		
5.10	DEAD ENDS	1020.4		
5.11	CORRIDOR CONTINUITY	1020.6		
5.12	EXISTING/MINIMUM NUMBER OF EXITS	1006 TABLE 1006.2.1		
5.13	BUILDING WITH ONE EXIT	1006 TABLE 1006.21		
5.14	ENCLOSURES	1023.11.2 1023		
5.15	OTHER			
6.0	ASSEMBLY	SECTION 1029		
6.1	MAIN EXIT	1029.2		
6.2	OTHER EXITS	1029.3		
6.3	INTERIOR BALCONY AND GALLERY MEANS OF EGRESS	1029.5		

THE ORIGINAL APPLICATION FORMAT MUST BE RETAINED AND NOT ALTERED, OTHER FORMS WILL NOT BE ACCEPTED



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6.4	TRAVEL DISTANCE	1029.7	
6.5	COMMON PATH OF TRAVEL	1029.8	
6.6	REQUIRED AISLE	1029.9	
6.7	OTHER		
7.0	ACCESSIBILITY (IBC/IRC/ANSI A-117.1 – 2015) <small>[NOTE: ALL NEW BATHROOMS MUST BE ACCESSIBLE]</small>	CHAPTER 11	
7.1	OTHER		
8.0	ENERGY CONSERVATION CONSTRUCTION CODE – PROVIDE REQUIRED TABLES AND CLIMATE ZONE - <i>OR</i>	ENERGY CONSERVATION CONSTRUCTION CODE [E]	
	COM CHECK LIST CALCULATIONS** <small>(ATTACHMENT 8 1/2" x 11" SHEETS SEPARATELY - SIGNED AND SEALED REQUIRED) ** DOWNLOAD SOFTWARE AT WWW.ENERGYCODES.GOV</small>	COMPLETE LIST	
9.0	REQUIRED LIVE LOADS	TABLE 1607.1	
9.1	SNOW LOADS	FIGURE 1608.2	30 HISTORIC TRADITIONAL IN VILLAGE
10.0	PLUMBING (REQUIRED NUMBER OF FIXTURES)	CHAPTER 29 TABLE 2902.1	
11.0	HEAT PRODUCING EQUIPMENT <small>[NOTE: A STRUCTURAL DIAGRAM/FRAMING PLAN MUST BE PROVIDED TO BE ACCEPTABLE]</small>	MECHANICAL CODE [M]	
11.1	NUMBER OF PROPOSED UNITS AND LOCATION		
11.2	NUMBER OF EXITING UNITS		
11.3	NUMBER OF REPLACEMENT UNITS		
11.4	ELECTRICAL OR GAS POWERED <small>(GAS REQUIRES A PLUMBING APPLICATION)</small>		
12.0	SITE WORK <small>[REFER TO T.O.B. DEPT. OF P&D INDIVIDUAL BUILDING SITE PLAN RULES AND REGULATIONS DATED 8/1/05]</small>		
12.1	LINEAR FEET OF CURBING		
12.2	SQUARE YARDS OF ASPHALT PAVING		
12.3	CUBIC YARDS OF BASE		
12.4	NUMBER OF DRYWELLS/CATCH BASINS		
13.0	ALL OTHER APPLICABLE CODE(S) THAT APPLY TO THE SCOPE OF WORK BEING PERFORMED. I.E. : ANY OTHER BUILDING CODES		
	NASSAU COUNTY FIRE MARSHALL		
	NASSAU COUNTY HEALTH DEPT.		
	CURB CUTS (CONTACT APPROPRIATE AGENCY – STATE, COUNTY OR TOWN)		
	X		
	X		

7. SIGNATURE OF APPLICANT 48 HR. NOTICE IS REQUIRED F12.40R ALL INSPECTION REQUESTS	
<p>THE ABOVE IS A SUMMARY OF THE BASIC CODE, WHICH APPLIES TO MANY COMMERCIAL BUILDING APPLICATIONS. IT IS NOT MEANT TO BE A COMPLETE OR COMPREHENSIVE LIST OF APPLICABLE BUILDING CODE REQUIREMENTS, WHICH MAY APPLY TO ANY PARTICULAR OR GIVEN SITUATION.</p>	<p>NAME: _____ (PRINT)</p> <div style="text-align: center; border: 1px solid black; border-radius: 50%; width: 150px; height: 150px; margin: 20px auto;"> <p style="font-size: 24px; margin: 0;">SEAL & SIGNATURE</p> </div> <p style="font-size: 8px; text-align: center;">ORIGINAL INKED SEALED AND SIGNATURE BY A NYS LICENSED DESIGN PROFESSIONAL IS REQUIRED</p>

REVIEWS / APPROVALS INTERNAL USE ONLY

Examined Date Received: _____

 STATUS: ACCEPTED DISAPPROVED

Comment(s): _____

Plan Examiner(s): _____ Date: _____



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INSTRUCTION PAGE

****This section is not to be submitted with your application – For Information Purposes Only ****

- Application for Building Permit (Any type of construction, Fences, Pool, Driveway)
- Nassau County Assessors Form
- Two (2) sets of construction drawings, specifications and full zoning analysis
- Property survey indicating current conditions (w/existing topography for new buildings)
- N.Y.S. Energy Code calculations (signed and sealed by R.A. or P.E.) or on plans.
- Workers Compensation and Disability Insurance Certificates (**not Accord form**)
- Permit Applications from licensed plumber, electrician and/or mechanical contractor
- Sewer and water charges (*new buildings only*)

FEE DESCRIPTION	TOTAL FEES
RESIDENTIAL	\$400.00 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000
RESIDENTIAL DEPOSIT	\$300.00 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000
COMMERCIAL	\$500.00 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000
COMMERCIAL DEPOSIT	\$500.00 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000
COMMERCIAL FAST TRACK	\$1000.00 + \$150 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000
AMENDMENTS- ADMINISTRATIVE	
ADMINISTRATIVE CHANGES (CONTRACTOR, OWNERS) MINOR CHANGES WHICH DO NOT REQUIRE AMENDING APPROVED PLANS	\$25 PER SUBMISSION REQUEST
AMENDMENTS- POST APPROVAL	
PLAN REVIEW (ADDING, SUBTRACTING SCOPE OF WORK) REQUIRES PLAN REVIEW AND APPROVALS TO AMEND AN EXISTING PERMIT ISSUED	\$125 FOR THE FIRST \$1000 OF ESTIMATED COST PLUS \$20 FOR EACH ADDITIONAL \$1000 PER SUBMISSION REQUEST
MAINTAIN & LEGALIZATION (PREBUILT / INSTALLED ITEMS)	3X PERMIT FEE + PERMIT FEE (IF APPLICABLE)

ALL FEES INCLUDE CERTIFICATE FEE

Residential: \$400 for the first \$1000 of estimated cost plus \$20 for each additional \$1000 in cash or check payable to the Incorporated Village of Garden City (Triple fee + Permit fee for pre-built structures).

Commercial: \$500 for the first \$1000 of estimated cost plus \$20 for each additional \$1000 in cash or check payable to the Incorporated Village of Garden City (Triple fee + Permit fee for pre-built structures).

Deposit of \$300 (residential) \$500 (commercial) for the first \$1000 of estimated cost plus \$20 for each additional \$1000 in cash or check from property owner (for residential) payable to the Incorporated Village of Garden City.

REQUIRED INSPECTIONS Not limited to the following:

Foundation: Excavation, footings and walls for new buildings, submit foundation survey prior to framing (*unless otherwise required*).

Framing: At completion of wind bracing, plumbing, mechanical and electrical roughing.

Insulation: Prior to application of interior finishes plumbing, mechanical and electrical: main service installation, roughing and final.

Final: Upon completion of all work (*See note below*).

- Inspection requests must be made at least one day in advance with permit number
- Approved plans must be on job site with contractor present for all inspections.
- Permit must be posted in front window or door until final building certificate has been issued.

REQUIREMENTS FOR CERTIFICATE OF OCCUPANCY AND/OR CERTIFICATE OF COMPLIANCE:

- Final approval of all inspections
- Electrical Certificate
- Affidavit of final cost (*new buildings only*)
- Two (2) copies of final survey (*must show all dimensions to all structures, heights, etc...*)
- Certification letter for landscaping, if applicable

Disclosures:

- Final Building Inspection will only be performed once all other associated permits have been completed and all final documentations have been received and reviewed.
- Maintain and legalization applications must be filed separately from new construction.
- All structures are to be filed under separate applications.
- Incomplete applications will not be accepted.
- Must comply with building, energy, accessibility code, etc.



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INSTRUCTION PAGE

<i>SECTION</i>	<i>INSTRUCTIONS</i>
1. Filing Status	Check (X) the appropriate box for purpose of filing. Only one box may be checked (X). Provide any other requested information.
2. Cost of Construction	Provide the Estimated Cost of all work that will be completed. Fees can be found in Fee Schedule listed on our Website.
3. Property Information	Provide the house number and street name (if available) or Block and Lot. All information is to be provided since permits are based on location. Be specific as possible on actual location.
4. Job Description	Provide a brief description of the work to be covered under this application.
5. Plans Submitted	Check (X) the appropriate boxes for all plans that were submitted. All are required for a Building Permit to be granted.
6. Owner / Tenant Application	All information is required, unless address was stated under "Property Information," in which case check the box in the right hand corner.
7. Applicant Information	All information must be provided by the Applicant for the project, unless already stated in "Owner/Tenant Information." In which case, check box in right hand corner. Must include NYS License #.
8. Designer of Record Information	Check (X) the appropriate box and include the required NYS License #.
9. Contractor / Construction Manager	All information is required. If there are any additional notes, there is space provided.
10. Designer Professional Statement and Signature	Must sign, date, and seal if applicable.
11. Construction Manager Statement and Signature	Print, sign, and date.
12. Property Owner Statement and Signature	If Property Owner information was previously stated in "Owner Tenant Application," then check the box in the right hand corner, print, sign, and date.
13. Applicant Information Statement and Signatures	All information is required, unless phone numbers were provided under "Applicant Information" In which case, check box in right hand corner, sign, print, and date.

BUILDING PERMIT REQUIREMENTS

Submission date:
 Hearing date:

APPLICATION #: 2017-xxxx

**Three (3) complete, collated packages consisting of the following checked () items:
 All architectural review applications must comply with the village code (chapter 57-5)**

- 1. Detailed drawings of proposed plans. The drawing list must consist of the following;
 - 1. Existing conditions survey and building plans.
 - A. Floor plans
 - B. Roof plan
 - C. Building elevations
 - 2. Proposed site plan including the existing conditions data as a composite drawing.
 - 3. Proposed building floor plans.
 - 4. Proposed roof plan.
 - 5. Proposed building sections including existing building assemblies to be altered.
 - 6. Proposed building elevations with one (1) color rendered building elevation or one (1) photo shop building elevation.
 - A. All proposed finish materials are to be identified.
 - B. All drawings are to include dimensions, elevation heights and datums.
- 2. Sectional drawings to explain the character of the design. *(See drawing list)*
- 3. Complete and accurate exterior elevations of all façade s, drawn at a scale adequate to show clearly the appearance of all proposed buildings and structures. *(See drawing list)*



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- 4. The title of the drawing, including the name and address of the applicant, the owner and the person responsible for preparation of such drawings. *(See drawing list)*
- 5. A north arrow, scale and date on all plans.
- 6. Boundaries of the property plotted to scale. *(See drawing list)*
- 7. Existing buildings and structures to remain or to be removed.
- 8. The location, design, type of construction, proposed use and exterior dimensions of all buildings. *(See drawing list)*
- 9. The location, design and type of construction of all pedestrian access.
- 10. An exterior lighting plan adequate to determine its character, the location and design of building and outdoor lighting facilities and means of illumination, and to enable review of possible hazards and disturbances to the public and adjacent properties. Provide all lamp types, lumen outputs and fixture catalog cuts.
- 11. The location and design of all existing and proposed site improvements, including drains, culverts, walls, fences, hedges and screen plantings and all existing trees on the subject property which have a diameter of eight (8) inches or greater, measured eighteen (18) inches above the ground.
- 12. A description of the method of public water supply and sewage disposal and the location of such facilities.
- 13. The location of fire and other emergency zones, including the location of fire hydrants. *(See drawing list)*
- 14. The location and design of all utilities, including electrical, gas and solar energy, telephone and cable television. *(See drawing list)*
- 15. The location and proposed development of all buffer areas, including existing vegetative cover.
- 16. Identification of the location and amount of building area proposed for each intended use, including storage and common areas, and the location of outdoor storage, if any.
- 17. A general landscaping plan and planting schedule.
- 18. An estimated project construction schedule.
- 19. Identification of state, county, town or other agency approval or permits required for the execution of the project along with copies of all applications for such approval or permits.
- 20. Part 1 of an environmental assessment form (eaf) in accordance with the state environmental quality review act and regulations (seqra).
- 21. Any other item deemed to be necessary by the superintendent of buildings or the board of architectural design review board, including but not limited to traffic studies.
- 22. Building permit application filled out completely if already filed.
- 23. Existing survey, showing current conditions of the property. A current updated survey may be required
- 24. Other:

Your design professional is requested to be present at the architectural review board hearing. You are required to provide all the items checked above. All items are to be indicated in your submission by reference and supportive documents. All physical items are to be brought to the hearing on the day your application is scheduled to be heard.

Please note:

Any items not currently checked may be required upon review and approval of the architectural design review board.

Please be reminded that no work is to commence until all building application(s) submission and a permit(s) have been issued by the buildings department.

The original and **seven (7), total of 8 copies** of the letter(s) and all other attachments outlined above must be folded and collated into eight (8) complete sets. Samples of all materials must be brought to the meeting.

All documents must be folded, collated and stapled into eight individual sets or they will not be accepted.

All ADRB applications are not reviewed for zoning