



INCORPORATED VILLAGE OF SHOREHAM
BUILDING DEPARTMENT
 PO Box 389, Shoreham, New York 11786
 (631) 821-0680 – Fax (631) 821-4102
www.shorehamvillage.org

BUILDING PERMIT APPLICATION CHECKLIST

This worksheet is presented as a guide for preparation of a complete building permit application. Please include all of the documents and items required for the proposed work. Additional information is available at the Village website at www.shorehamvillage.org

Application Requirements:

1.	Building Permit Application	(page 2) Complete as much as applicable	Y / N
2.	Construction Plans **	2 sets; 1/4" or 1/8" scale and no larger than 24" x 36" Rooms should be labeled, dimensions & square footages provided	Y / N
3.	Plot plan (3 copies)	Show proposed work with zoning chart overlain on survey information Stamped/signed by design professional, no larger than 11" x 17" Top of bluff & CEHA lines depicted, if applicable	Y / N
4.	Clearing plan	Show proposed limits of clearing for project and calculated percentage per Chapter 28; no larger than 11" x 17" (may be on plot plan)	Y / N
5.	Current Survey (2 copies)	Must be representative of all structures on currently on property	Y / N
6.	Owner's Authorization	(page 3) Required if applicant is other than the property owner	Y / N
7.	Energy Compliance (2 copies)	ResCheck & Draft Stopping Details, and for New Dwellings or Major Additions: Third Party Affidavit (pg 4), Mechanical Line Drawing with Insulation Notes, Manual J, Manual S	Y / N
8.	History; COs/permits	Provide copies of open permits, violations, issued COs for the property	Y / N
19.	Contractor's info & license	Suffolk County Home Improvement license for existing residential	Y / N
10.	Contractor's Insurances	Liability (Acord), Workers' Compensation (C-105.2 / U-26.3) & Disability (DB-120.1) and/or *waiver from WC/DB (CE-200) *see www.wcb.ny.gov	Y / N
11.	Fees	To be determined and submitted at time of application, per Chapter 5A	Y / N

Additional Documents and/or Approvals, if applicable:

- a. Design Review Board**
- b. Shoreham Department of Public Works; road opening and/or work within the right-of-way
- c. Zoning Board of Appeals Determination
- d. Planning Board Approved Site Plan and Approval Resolution
- e. Suffolk County Department of Health Services; red-stamped approval to construct
- f. New York State Department of Environmental Conservation

** For new buildings or additions in excess of 200 SF, review and approval is required by the Design Review Board. Elevations w/ Materials & Colors, as well as any other renderings or photos, should be provided in copies no larger than 11" x 17" for distribution.



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BUILDING PERMIT APPLICATION

PART I: Owner Information – Please print below

Property Location : _____ SCTM# 207- _____ - _____ - _____

Owner(s) of Record : _____

Phone: _____ Email: _____

Mailing Address of Owner(s): _____

City State Zip Code

PART II: Agent / Architect / Attorney Information (responsible for filing & receiving correspondence) – Please print below

Agent responsible for proposed work: _____

Phone: _____ Email: _____

Mailing Address of Agent: _____

City State Zip Code

PART III: Proposed Work Project Details – Please print below

Proposed project description: _____

New Building Floor 1	SF	New Building Floor 2	SF	Lot Area	SF
Attached Garage	SF	Roofed-Over Porches	SF	Clearing (proposed total)	%
Existing Floor 1	SF	Existing Floor 2	SF	Alteration/Renovation	SF
Proposed Floor 1 Add	SF	Proposed Floor 2 Add	SF	Deck/Patio	SF
Pool / Hot tub	SF	Fence	LF	Retaining Wall	LF
				Detached Garage	SF
Solar PV	Y / N	Mechanical	Y / N	Shed	SF
				Estimated Cost	\$

Contractor: _____ Suffolk County License #: _____

Plumber: _____ Suffolk County License # _____

Electrician: _____ Suffolk County License # _____

PART IV: Notary Public – Please type or print below

APPLICATION IS HEREBY MADE FOR ISSUANCE OF A BUILDING PERMIT pursuant to the Code of the Village of Shoreham and the Building Code of the State of New York, and all amendments thereto, for the work as described herein an in the described plans and specs.

STATE OF NEW YORK, COUNTY OF SUFFOLK) ss: (Print Name of Applicant) _____
 being duly sworn deposes and says that he/she is the applicant above named.

They are the (Owner or Agent: Contractor, Officer, RA, PE, etc) _____ of said owner or owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief; and that the work will be performed in the manner set forth in this application, plans and specifications filed herewith.

Sworn to before me this _____ day
 of _____, 20_____

 Applicant Signature



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OWNER'S AUTHORIZATION

STATE OF _____)
) ss.:
COUNTY OF _____)

I, (owner) _____

Residing at: _____

Being the owner of premises (Property Location) _____

Also known as Suffolk County Tax Map Number (SCTM #:) _____

Hereby authorize (Agent) _____

Whose mailing address is (Agent Address) _____

To act on my behalf for purposes of application and interfacing with the Building Department for (Description of Proposed Work)

Of the Village of Shoreham, and to received and/or file any documents required with reference to my application for

(Owner) _____

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by this Board as a condition of their approval.

Owner Signature

Sworn to before me this _____ day
of _____, 20_____

Notary Public



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AFFIDAVIT OF ENERGY COMPLIANCE, 3RD PARTY TESTING
NEW HOMES & MAJOR ADDITIONS

STATE OF NEW YORK)

) ss.:

COUNTY OF SUFFOLK)

I, _____, being duly sworn and depose, state that the undersigned
(BPI/Hers Certified Tester)

company has been hired to perform the required testing and documentation of energy compliance, as defined within the 2020 ECC NYS, for the dwelling or major addition (more than 50% increase) to be constructed at:

Property Address: _____, Shoreham

Owners Name (printed) _____, Initials: _____,

Suffolk County Tax Map # 207 – _____ – _____ – _____
Section Block Lot

Please be informed:

_____ I have reviewed the construction & mechanical plans for energy compliance.

_____ I will oversee insulation installation and air sealing measures being performed by the contractor.

_____ I will provide a Blower Door Test & Duct Blower Test if and as required by the ECCNYS.

_____ I will work with the homeowner and the contractor until compliance is achieved.

Company Name: _____

Company Address: _____

Phone Number: _____ Email : _____

(Signature of Affiant)

Personally appeared before me the above named _____, personally known to me who being duly sworn, deposes and says that he/she executed the above instrument and that the statement and answers contained therein are true and correct to the best of his/her knowledge and belief.

Subscribed and sworn to before me this _____

day of _____, 20____

Notary Public