

Village of Great Neck

61 Baker Hill Road
Great Neck, NY 11023
Tel: (516) 482-0187



Building Permit Application

Application No: _____

New Building Addition Alteration Demo Roof Solar Patio / Deck A/C Other

Application must be submitted with a current property survey prepared by a licensed land surveyor, and two sets of plans showing in detail all proposed structural, mechanical, electrical and plumbing work; and a plot plan drawn to scale showing location, size, shape and dimensions of property, setbacks from property lines, size of existing and proposed building and/or additions.

The approved copy of plans must be kept on the job at all times, until a Certificate of Occupancy/Completion has been issued, and must be available to the Building Inspector for inspections. The Building Permit must be displayed at all times.

The applicant agrees to comply with all provisions of the Code of the Village of Great Neck and the International Building Code in effect as of this date. Work must be completed within one year from the date of permit issuance; or an extension must be obtained from the Building Department.

Address _____

Section _____ Block _____ Lot(s) _____ Building Zone _____

Description of Work _____

Estimated Cost of Construction \$ _____

Variance(s) required _____

Name and address of Owner _____ Telephone _____

Email _____

Name and address of Architect _____ Telephone _____

Email _____

Name and address of Contractor _____ Telephone _____

Email _____

Contact Name _____ Mobile _____

Nassau County Home Improvement License No. _____

FOR BUILDING DEPARTMENT USE

FOR OFFICE USE

Permit Fee _____

Amount Received _____

Date _____

STATE OF NEW YORK)
COUNTY OF NASSAU)

_____ being duly sworn says that he/she is the owner/agent of the property above described. That all statements made in this application are true to the best of his/her knowledge and belief.

I, the undersigned am authorized to execute this affidavit as follows: As sole owner of the above premises;
Both on behalf of myself and on behalf of my spouse; Principal of Corporation, Firm or Company of Partnership

Sworn to before me this _____ day of _____, 20__ . _____
(PRINT) Name of Applicant

Notary Signature of Applicant

I hereby authorize the Superintendent, Building Inspector and/or Agent of the Building Department to enter upon and inspect my property and structure(s) on the property prior to the Building Department rendering a determination with regard to this Building Permit application, and as may be necessary to administer the permit during construction.

OWNER'S AUTHORIZATION

I, _____ owner of the above described premises, situated within the Incorporated Village of Great Neck, New York; hereby authorize _____

having a place of business at _____ to obtain a building permit and related permits in connection with the construction activities at the above referred location.

Sworn to before me this _____ day of _____, 20__ . _____
(PRINT) Name of Owner

Notary Signature of Owner

As per Section 391-2 of the Code of the Village of Great Neck: "The erection, including excavating, demolition, alteration or repair, of any building" may ONLY occur between 8:00 a.m. and 7:00 p.m. on Monday through Friday, and 9:00 a.m. and 7:00 p.m. on Saturdays and holidays.

GENERAL CONTRACTOR'S AUTHORIZATION

STATE OF NEW YORK)
COUNTY OF NASSAU)

_____ being duly sworn says that he/she shall be the sole General Contractor of the construction project at the property above described and agrees to fully comply with all Village Laws, New York State Workers Compensation Insurance Laws and the International Building Codes; and further, shall be responsible for compliance by all subcontractors and construction workers at this property throughout the course of construction.

(PRINT) Name of General Contractor's Business (PRINT) Name of General Contractor

That all statements made in this application are true to the best of his/her knowledge and belief.

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

Notary Signature of General Contractor