



## VILLAGE OF PLANDOME MANOR

55 Manhasset Avenue, Manhasset, NY 11030

Tel. (516) 627-3701 • Fax (516) 627-7067 • [clerk@plandomemanor.ny.gov](mailto:clerk@plandomemanor.ny.gov)

### REQUIREMENTS FOR A RESIDENTIAL BUILDING PERMIT

- 1] Application for Building Permit with Owner's Authorization.
- 2] Proposed Site Plan (2 copies) to include:
  - a] Zoning data (including FAR) - Allowed-Existing-Proposed
  - b] Percentage of lot coverage - Allowed-Existing-Proposed
  - c] Setbacks to all property lines
  - d] Locations of trees within property to be removed
  - e] Topography of site if over 10% change to grade
  - f] Floor area – Allowed-Existing-Proposed
  - g] Elevations – indicate Sky Exposure Plane
- 3] Construction drawings (2 copies) – Site plan and Zoning data must be on Page A  
Submit all necessary plans, elevations, sections, and details.  
"Boiler Plates" that do not apply are not allowed or accepted.
- 4] SWPPP (Stormwater Pollution Protection Plan) – if applicable.
- 5] **PDF Copy of All Drawings and Surveys – Please email to [clerk@plandomemanor.ny.gov](mailto:clerk@plandomemanor.ny.gov)**
- 6] General Contractor, Electrician, and Plumber: (See attached for specific insurance requirements)
  - a] Copy of license
  - b] Name, address, telephone number & email address
  - c] Certificate of Insurance, General Liability, Workmen's Compensation, NY Disability – **listing Inc. Village of Plandome Manor as certificate holder AND additionally insured**
- 7] Existing survey of property (2 copies) – No more than 2 years old
- 8] Application for Plumbing Permits (if applicable), must be filed prior to issuance of Building Permit
- 9] Street Opening Permit (if applicable)
- 10] Approved permits from all other Federal, State and Local agencies having jurisdiction
- 11] **Permit Fees:**

New Construction: \$500.00 + 1.5% x construction cost (\$375 per sq. ft.) + CO/CC fee \$200.00

Alteration/Addition: \$250.00 + 1.5% x construction cost (\$300 per sq. ft.) + CO/CC fee \$200.00

\*Construction Cost Rate: \$375.00 new dwelling & \$300.00 addition/alteration\*

All other construction i.e., pools, patios, retaining walls etc.... \$250.00 + 1.5% construction cost + CC fee \$200.00

Building permits are Valid for One (1) Year

Residential Building Permit may be extended in Ninety (90) day increments for a period not to exceed One (1) Year at a cost equal to the pro rata share of the original Permit fee.

#### FOUNDATION SURVEY REQUIRED PRIOR TO FRAMING.

\*NO PERMIT MAY BE EXTENDED PAST 2 YR OF FIRST ISSUANCE

\*\*INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED FOR FILING.

\*\*\*DESIGN REVIEW BOARD APPROVAL IS REQUIRED IN MOST CASES

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MAYOR  
Barbara C. Donno

TRUSTEES  
Matthew Clinton  
Tony DeSousa  
Patricia O'Neill, RA, AIA  
James Baydar, Esq.

BUILDING INSPECTOR  
Edward P. Butt, RA, AIA  
CODE ENFORCEMENT OFFICER  
Jack Mancusi

VILLAGE CLERK  
Katherine Hannon

VILLAGE ATTORNEY  
John Farrell, Esq.

VILLAGE TREASURER  
Marie DePalo

**All permit applications need to be accompanied by:**

- General Liability Insurance certificate (accord form)
- Certificate of Worker's Compensation Insurance (U-26.3 state form)  
(issued by the NYS Insurance Fund)
- Disability Insurance Certificate (DB-120.1 state form) (Issued by the  
NYS Workman's Compensation Board)
- Copy of Contractors Nassau County or Town License

**\*\*ALL CERTIFICATES MUST LIST THE Village of Plandome Manor, 55 Manhasset Avenue, Manhasset, NY 11030" as the Certificate holder & Additional insured.**

All above paperwork can be emailed to [clerk@plandomemanor.ny.gov](mailto:clerk@plandomemanor.ny.gov). **Please include the project address and homeowner name in the email subject line.**

INCORPORATED VILLAGE OF PLANDOME MANOR

NASSAU COUNTY, NEW YORK

APPLICATION FOR BUILDING PERMIT

55 Manhasset Avenue, Manhasset, NY 11030 - P (516) 627-3701 F (516) 627-7067 Email: clerk@plandomemanor.ny.gov

This application shall be filled out in its entirety both front and back. When approval stamp with signature is affixed below and returned to you with the Building Permit, both documents represent a valid Building Permit. The Building Permit and stamped approved plans MUST be on site at all times during the construction process. The application process and building permit are subject to the conditions printed on the back. The Applicant is admonished to read the conditions on the back carefully.

All permits issued by the Building Department are strictly subject to the Zoning and Building Codes of the Incorporated Village of Plandome Manor and all New York State fire codes and construction codes applicable on the date of the application. NO ERROR OR OMISSION IN THE ISSUANCE OF A PERMIT SHALL LEGALIZE ANY CONSTRUCTION OR USE OTHERWISE PROHIBITED BY LAW.

NEW CONSTRUCTION [ ] ADDITION/RENOVATION [ ] MAINTAIN EXISTING [ ]

Section: Block: Lot (s): Date:

Owner's Information:

Last Name: First Name: Corp. Name: Street Address: City/State/Zip: Tele Number: Email:

Applicant Information:

Last Name: First Name: Corp. Name: Street Address: City/State/Zip: Tele Number: Email:

Address of Permit Activity:

Street Address: City: State: Zip Code: Tele Number:

Description of Work:

Table with 3 columns: Area of Work (SF), Construction Cost Rate / SF: \$, Permitting Cost of Construction: \$

Is this permit to legalize an existing structure: Yes [ ] No [ ]

Zoning Zoning District: Verified By: Lot Area (SF): Max. Permitted Coverage (SF): Proposed Coverage (SF): Max. Permitted Gross Floor Area (SF): Proposed Gross Floor Area (SF): Max. Permitted Elevation (35' Facing Street): Proposed Elevation (Facing Street):

Front Yard: Required: Provided: Rear Yard: Required: Provided:

Aggregate Side Yard: Required: Provided:

Side Yard 1: Required: Provided: Side Yard 2: Required: Provided:

Architect/Engineer:

Business/Corporate Name: Last: First: Middle Initial: Lic. Number: Street Address: City, State, Zip code: Tele Number: Email:

Contractor:

Business/Corporate Name: Last: First: Middle Initial: Lic. Number: Street Address: City, State, Zip code: Tele Number: Email:

Plumber:

Business/Corporate Name: Last: First: Middle Initial: Lic. Number: Street Address: City, State, Zip code: Tele Number: Email:

Electrician:

Business/Corporate Name: Last: First: Middle Initial: Lic. Number: Street Address: City, State, Zip code: Tele Number: Email:

NOT VALID UNLESS STAMPED HERE

# OWNER'S AUTHORIZATION

I (we) hereby certify that:

1] Two (2) fully detailed structural drawings (plans) prepared to scale at least one-quarter inch to the foot shall accompany this application. One (1) set of approved plans will be returned to you which contain the red-inked approval stamp of the Building Department. Said plans shall be kept on the construction site and exhibited on demand to any official of the Building Department. No application shall be deemed complete unless two (2) preliminary surveys, prepared by a licensed surveyor, are submitted showing the location of existing and proposed buildings on the property. Additional documents relating to Worker's compensation and the New York Labor Law may be required.

2] I (we) agree to permit the Building Inspector and any officer or employee of the Incorporated Village of Plandome Manor to enter upon the premises and/or to photograph in the discharge of their duties with this application.

3] Approved plans and a copy of the approved permit shall remain on the premises at all times until a Certificate of Occupancy / Completion / Acceptance is issued. These plans will be made available to the Building Inspector upon request.

4] Building Inspector shall be given a minimum forty-eight (48) hours notice to make the required inspection and no work shall continue until such inspection has been completed and approved.

5] The owner or his representative shall be responsible to arrange for all required inspections and to renew all permits prior to expiration of same.

6] Owner shall be responsible for the presence of the appropriate representative for the required inspection as directed by the Building Inspector.

7] Permit shall expire three (3) months from the date of issuance unless construction is in progress. No work is to be started until permit has been received and posted by the owner/applicant. Commencement of any work prior to the receipt and posting of the permit will result in penalties, pursuant to Chapter 1 Article II of the Code of the Incorporated Village of Plandome Manor.

8] Work shall be permitted between the hours of 8:00 AM and 5:00 PM, Monday through Friday and 8:00 AM and 12:00 PM on Saturday. **NO WORK ON SUNDAYS AND FEDERAL HOLIDAYS. An Appearance Ticket shall be issued upon the first and every violation.**

9] It is the responsibility of the owner/applicant to submit plans and applications to the Building Department in compliance with all State and local laws.

If any approved plans propose to place improvements/plantings within any Village right-of-way, you agree as follows:

10] This authorization is a license only. It grants you no right, title or interest in the improvements themselves nor in the property upon which they are situated. No improvement/planting will be allowed which, in the opinion of the building inspector, is intended to be permanent.

11] Any improvements/plantings shall be removed and the right-of-way restored to its original condition at the licensee's sole expense if, as and when so directed by: (a) Road Commissioner; or (b) Building Inspector; or (c) Board of Trustees; (d) any other person authorized to act on behalf of the Inc. Village of Plandome Manor.

12] Any removal directed by a person listed in ¶11 must be accomplished within seven (7) days, or such time as directed by the person listed in ¶11.

13] In the event of an emergency, all improvements/plantings shall be removed and the right-of-way restored to its original condition at licensee's sole expense, forthwith.

14] Direction to remove to the licensee shall be by any communication selected by the Village including, but not limited to, telephone, fax, e-mail and/or written correspondence to the last known address of the licensee.

15] Upon the failure of the licensee to remove and restore, as required by ¶¶12, 13 (and to the satisfaction of the Building Inspector), the Inc. Village of Plandome Manor may remove same and licensee agrees to repay the Village within thirty (30) days of invoice by the Inc. Village of Plandome Manor, the costs of removal and restoration.

16] Licensee agrees to save and hold harmless the Inc. Village of Plandome Manor, its agents, servants and/or employees for any injury or damage to person and/or property arising out of licensee's improvement within the Village right-of-way.

17] This license shall end upon the earlier of any of the events listed in ¶¶12, 13.

\_\_\_\_\_ please print – property in name of

depose and says that he/she resides at \_\_\_\_\_

\_\_\_\_\_ mailing address of owner

in the State of \_\_\_\_\_, that he/she is the owner in fee of all certain lots, parcels of land shown

on the attached survey Section \_\_\_\_\_, Block \_\_\_\_\_, Lot(s) \_\_\_\_\_, situated, lying and being

within the incorporated area of the Village of Plandome Manor; that I/We have read and understand items one (1)

through nine (9) as herein stated, that the work to be done in accordance upon the premises shall be done in

accordance with the approved application and accompanying plans of which he/she is totally familiar; And that

he/she hereby names \_\_\_\_\_ as his/her representative to file this

application on his/her behalf.

Signature of Owner: \_\_\_\_\_

Sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 201

Signature of Notary Public: \_\_\_\_\_



**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
----------------------	---------------------------------	------------------

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:	<input type="checkbox"/> OWNER OR <input type="checkbox"/> LESSEE	ADDRESS
		CITY, STATE, ZIP

WORK MUST BEGIN BY	PRINCIPLE TYPE OF CONSTRUCTION	PHONE
PERMIT EXP DATE		EMAIL

LOT SIZE S.F.	<input type="checkbox"/> STEEL <input type="checkbox"/> MASONRY <input type="checkbox"/> FRAME	<p align="center"><b>IF YOU WISH TO GROUP OR APPORTION LOTS PLEASE CALL 516-571-1500 FOR FURTHER INFORMATION</b></p>
# BLDGS ON LOT		

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	DOES RESIDENCE HAVE THE FOLLOWING
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION (CHANGE IN S.F.) <input type="checkbox"/> DEMOLITION <input type="checkbox"/> ALTERATION (NO CHANGE IN S.F.) <input type="checkbox"/> MAINTAIN (PRE-EXISTING) <input type="checkbox"/> RECONSTRUCTION <input type="checkbox"/> DECK, TERRACE, PORCH, CARPORT <input type="checkbox"/> DORMERS <input type="checkbox"/> OTHER _____	CENTRAL AIR YES <input type="checkbox"/> NO <input type="checkbox"/> FINISHED ATTIC YES <input type="checkbox"/> NO <input type="checkbox"/> <b>BASEMENT FINISH</b> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> FULL <input type="checkbox"/>
<input type="checkbox"/> FIRE DAMAGE <input type="checkbox"/> GARAGE/ OUT BUILDING <input type="checkbox"/> HVAC <input type="checkbox"/> PLUMBING <input type="checkbox"/> RELOCATION <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> TENNIS COURT <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**

Address of Applicant/Contact Person

Telephone

**FIELD REPORT ON REVERSE**

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