

INCORPORATED VILLAGE OF
EAST ROCKAWAY

DEPARTMENT OF BUILDING, ZONING
AND CODE ENFORCEMENT
P.O. BOX 189
EAST ROCKAWAY, N.Y. 11518-0189
PHONE: (516) 887-6310
FAX: (516) 887-6311

John F. Felbinger
Superintendent of Buildings
Juan A. Garcia, P.E., C.F.M.
Village Engineer

CONTRACTOR REGISTRATION FOR 2 YEARS

COMPANY NAME: _____

BUSINESS ADDRESS: _____

PHONE # _____ EMAIL: _____

OWNER NAME OR APPLICANT: _____

Electrical: _____ General Contractor: _____ Plumbing: _____ Other: _____

Nassau County License Date: _____

General Insurance Expiration Date: _____

Workers Compensation Expiration Date: _____

Liability Insurance: ACORD 25 Form

Worker's Compensation Insurance: Certificate C-105.2

Disability Certificate: DB-120.1

Nassau County Home Improvement License (if applicable)

Signature

Date



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OWNERS ACKNOWLEDGEMENT AFFIDAVIT

STATE OF NEW YORK
COUNTY OF NASSAU
VILLAGE OF EAST ROCKAWAY

Date: _____

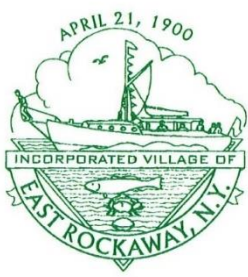
_____ Being duly sworn deposes and says that I am the owner of _____
_____, and that I have authorized the work to be performed under
the attached building permit application dated _____. I have familiarized myself with the
conditions set forth for the issuance of a building permit as well as the Code of the Village of East
Rockaway including but not limited to:

1. That the Permit is valid for one year from the date of issuance and upon expiration must be renewed for an additional year at the full permit fee as per the fee schedule in effect at the time of renewal.
2. That all required inspections must be completed and all necessary paperwork submitted (electrical inspection certificate, final survey, etc..) prior to the issuance of a Certificate of Occupancy or Compliance.
3. Insuring that the Building Department is contacted at least one day prior for all inspections as listed on the Permit.
4. Construction work shall only be performed Monday thru Saturday from 7:00 am to 8:00 pm and not on Legal Holidays.
5. That the Construction site shall be kept in a clean and safe condition at all times.
6. That all Construction Waste must be disposed of at my own expense and shall not be placed at the curb for regular Sanitation Pick-up.
7. That all changes to the project must be approved by the Building Department and the Architect/Engineer of record.

I make this affidavit with the full knowledge that the Building Department relies upon the truth of the statements herein contained and in relying thereon will issue a permit called for in the application.

(Property Owners Signature Only)

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



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CARBON MONOXIDE & SMOKE DETECTOR AFFIDAVIT

State of New York ss: Building Permit #: _____

Country of Nassau Plumbing Permit #: _____

I/we: _____ are the Owner(s) of real property located at:

Address: _____

The premise described is a one or two family dwelling and is classified as a R3 occupancy by the 2020 Fire Code of New York State.

I/we hereby attest and affirm that, in accordance with the provisions of Section 915 of the 2020 Fire Code of New York State, that carbon monoxide detector(s) have been installed, maintained and in operable condition within each dwelling unit or sleeping unit located within the above referenced structure where carbon monoxide producing equipment is located.

I/we hereby attest and affirm that, in accordance with the provisions of Section 704 of the 2020 Property Maintenance Code of New York State, that smoke detectors have been installed, maintained, provided with an appropriate power source and are in operable condition in the following locations:

1. Outside each separate sleeping area in the immediate vicinity of bedrooms as per manufacturer's specifications.
2. In each room used for sleeping purposes.
3. In each story within (all) dwelling unit(s), including basements and cellars, while excluding crawl spaces and uninhabitable attics.

Or

I/we hereby attest and affirm that, in accordance with Section R314 of the 2020 Residential Code of New York State, a residential fire alarm system with central station interconnection has been installed throughout the premise and is in proper operating order.

This affidavit is submitted in accordance with New York State Executive Law, as modified by the current requirements of the 2020 Fire Code of New York State.

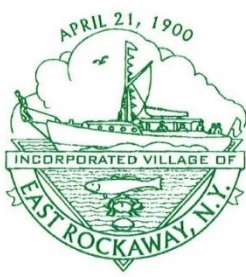
Dated: _____ Signature: _____

Sworn before me this ___ day of _____, 20_____ Name (print): _____

Must Be Submitted Prior to Completion

Notary Public or Within 30 Days of Inspection

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



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AFFIDAVIT OF NO MECHANICAL WORK

State of New York ss: Building Permit #: _____

Country of Nassau Plumbing Permit #: _____

I/we: _____ are the Owner(s) of real property located at:

Address: _____

Section: _____ Block: _____ Lot: _____

Making application for a Building permit, being duly sworn and depose that there will be no mechanical work what so ever, including replacement of existing heating and/or cooling equipment.

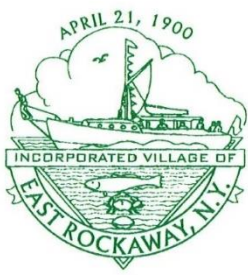
I/we hereby attest and affirm that shall the scope of work change, and mechanical work will be required, a separate Mechanical Permit will be applied for and no mechanical work shall begin until such permit has been issued.

This affidavit is submitted in accordance with *New York State Executive Law*.

Dated: _____ Signature: _____

Sworn before me this ____ day of _____, 20____ Name (print): _____

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AFFIDAVIT OF NO ELECTRICAL WORK

State of New York ss: Building Permit #: _____

Country of Nassau Plumbing Permit #: _____

I/we: _____ are the Owner(s) of real property located at:

Address: _____

Section: _____ Block: _____ Lot: _____

Making application for a Building permit, being duly sworn and depose that there will be no electrical work what so ever.

I/we hereby attest and affirm that shall the scope of work change, and electrical work will be required, a separate Electrical Permit will be applied for and no electrical work shall begin until such permit has been issued.

This affidavit is submitted in accordance with *New York State Executive Law*.

Dated: _____ Signature: _____

Sworn before me this ____ day of _____, 20____ Name (print): _____

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