



BUILDING PERMIT
Town of Islip Building Division
1 Manitton Court, Islip, NY 11751
www.islipny.gov

COMPLETE THIS APPLICATION IN ITS ENTIRETY AND SUBMIT TO THE PERMITS DEPARTMENT ALONG WITH ALL REQUIRED DOCUMENTATION LISTED BELOW.

The final fee will be determined by the Permits Department. Visit islipny.gov/departments/planning-and-development/building-division-permits-section for the Fee Schedule.

Subject Address: _____
 Bldg/House # _____ Street _____ Suite _____

 City _____ State _____ Zip _____

Tenant Name: _____ **Unit #:** _____
 (if applicable)

Property Type: Commercial¹ Residential
¹Additional requirements may apply, please check with a Plans Examiner

FOR OFFICE USE ONLY

PLACE STICKER HERE

Filing Date: _____ By: _____

Zoning Letter for Applicant: Yes No As-built Survey Required: Yes No

Zoning Approval Date: _____ By: _____

Plans Examiner Approval Date: _____ By: _____

Approved to Issue Date: _____ By: _____

Issued Date: _____ By: _____

Permit Expiration Date: _____

Special Conditions of Permit: _____

Filing Fee: \$ _____ Receipt #: _____

Permit Fee: \$ _____ Receipt #: _____

Total Fee: \$ _____ C/O Issued: _____

PERMIT(S) REQUESTED (work cannot commence before permit is issued):			
Check as Applicable	Corresponding Requirements (complete items from list below)	Check as Applicable	Corresponding Requirements (complete items from list below)
<input type="checkbox"/> Main Building - New <input type="checkbox"/> Main Building - Addition	1-8	<input type="checkbox"/> Second Story Deck ¹	1-3, 5-8
<input type="checkbox"/> Accessory Structure - New <input type="checkbox"/> Accessory Structure - Addition	1-3,5-8	<input type="checkbox"/> Interior Alteration	1-3, 7-8
<input type="checkbox"/> Site Work Only: Is a generator involved? <input type="checkbox"/> Yes <input type="checkbox"/> No	1-2, 6, 8	<input type="checkbox"/> Fire Damage Repair	1-3,5,7-8
<input type="checkbox"/> Fireplace / Wood Coal Stove	8	<input type="checkbox"/> Revision of Issued Permit ²	1-8
<input type="checkbox"/> Change of Use	1-3, 5-6, 8	<input type="checkbox"/> Truss Sign ¹	Submit Sample Sign
<input type="checkbox"/> Solar Panels (25KW or more)	Dependent on type-confer with Zoning or Bldg Plans Examiner	<input type="checkbox"/> Change of Tenant	1-3, 5-6, 8
<input type="checkbox"/> Shell Building <input type="checkbox"/> Speculative <input type="checkbox"/> Vanilla/White Box	1-9	<input type="checkbox"/> Interior Arrangement	1-4, 8, 9 Shell Building Complete
<input type="checkbox"/> Combustible High Rack Commodity Storage	1-3, 7-8	<input type="checkbox"/> Other - _____ Please use the customized applications for the following permits types: Certificates of Compliance, Demolition, Elevator, Equine, 'PODS', Pools, Plumbing/HVAC, Signs (other than Truss), Temp Trailers, Solar (25KW or less)	
Permits are valid for one year with three consecutive renewals allowed, unless otherwise footnoted above: ¹ No Renewals permitted ² Expires at original permit expiration			

REQUIREMENTS FOR PERMITS LISTED ABOVE:

- Size & Use of Existing Structures: _____
- Proposed Use: _____
- Floor Area to be constructed or altered (total of all floors excluding cellars and attics): _____
- If Master Plan, identify Town issued Master Plan Number & Building Identification: _____
- Setbacks (distance new structure will be from property line after construction):
 Front Yard: _____ 2nd Front Yard: _____ (corner or thru lots) Rear Yard: _____ Side Yard: _____ Other Side Yard: _____
- Size of Property: _____ x _____ = _____ sf, or _____ Acres
- Height of building from average grade to ridge or roof: _____ ft. _____ in.
- Are there any Property Covenants or Conditions on the property? Yes (please attach) No
- Refer to the Procedures for Permitting Shell/Vacant Buildings (2017) document on our website.

