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

**PERMIT(S) REQUESTED (work cannot commence before permit is issued):**

<table>
<thead>
<tr>
<th>Check as Applicable</th>
<th>Corresponding Requirements</th>
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</tr>
</thead>
<tbody>
<tr>
<td>☐ Main Building - New</td>
<td>1-8</td>
<td>☐ Second Story Deck</td>
<td>1-3, 5-8</td>
</tr>
<tr>
<td>☐ Main Building - Addition</td>
<td></td>
<td>☐ Interior Alteration</td>
<td>1-3, 7-8</td>
</tr>
<tr>
<td>☐ Accessory Structure - New</td>
<td>1-3,5-8</td>
<td>☐ Fire Damage Repair</td>
<td>1-3,5-7-8</td>
</tr>
<tr>
<td>☐ Accessory Structure - Addition</td>
<td>1-2, 6, 8</td>
<td>☐ Revision of Issued Permit</td>
<td>1-8</td>
</tr>
<tr>
<td>☐ Site Work Only: Is a generator involved?</td>
<td>Yes ☐ No</td>
<td>☐ Change of Tenant</td>
<td>1-3, 5-6, 8</td>
</tr>
<tr>
<td>☐ Fireplace / Wood Coal Stove</td>
<td>8</td>
<td>☐ Interior Arrangement</td>
<td>1-4, 8, 9</td>
</tr>
<tr>
<td>☐ Change of Use</td>
<td>1-3, 5-6, 8</td>
<td>☐ 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)</td>
<td></td>
</tr>
<tr>
<td>☐ Solar Panels (25KW or more)</td>
<td>Dependent on type-confer with Zoning or Bldg Plans Examiner</td>
<td>☐ Change of Tenant</td>
<td>1-3, 5-6, 8</td>
</tr>
<tr>
<td>☐ Shell Building ☐ Speculative</td>
<td>1-9</td>
<td>☐ Interior Arrangement</td>
<td>1-4, 8, 9</td>
</tr>
<tr>
<td>☐ Vanilla/White Box</td>
<td></td>
<td>☐ Combustible High Rack Commodity Storage</td>
<td>1-3, 7-8</td>
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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:**

1. Size & Use of Existing Structures:
2. Proposed Use:
3. Floor Area to be constructed or altered (total of all floors excluding cellars and attics):
4. If Master Plan, identify Town issued Master Plan Number & Building Identification:
5. 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: _______

6. Size of Property: _______ x _______ = _______ sf. or _______ ft. or _______ Acres
7. Height of building from average grade to ridge or roof: _______ in.
8. Are there any Property Covenants or Conditions on the property? ☐ Yes (please attach) ☐ No
### OTHER REQUIREMENTS:
- Please be sure to check with the Permits Department for other submission requirements.
- Refer to C/O Requirements Checklist that will be supplied to you at permit issuance.

### DESCRIPTION OF PROPOSED WORK:

<table>
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<tr>
<th>Description</th>
<th>Fee</th>
</tr>
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<tbody>
<tr>
<td>Flat Fee or Filing Fee:</td>
<td>$</td>
</tr>
<tr>
<td>Base Fee:</td>
<td>$</td>
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<tr>
<td>Truss Sign:</td>
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<td>Fireplace:</td>
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**Total Fee:** $

### FOR OFFICE USE ONLY

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<td>$</td>
</tr>
</tbody>
</table>

**Total Fee:** $

### Property Owner:
- **Business Name/Homeowner:**
- **Contact Name (if Business):**
- **Email:**
- **Phone:**

### Mailing Address:
- **House No / Street:**
- **City:**
- **State:**
- **Zip:**

### Contractor:
- **Business Name:**
- **Contact Name:**
- **Phone:**

### Business Address:
- **No / Street:**
- **City:**
- **State:**
- **Zip:**

### Design Professional:
- **Business Name:**
- **Contact Name:**
- **Phone:**

### Business Address:
- **No / Street:**
- **City:**
- **State:**
- **Zip:**

### Expeditor:
- **Business Name:**
- **Contact Name:**
- **Phone:**

### Business Address:
- **No / Street:**
- **City:**
- **State:**
- **Zip:**

* If property was purchased within the last 6 months, a copy of the deed, or closing papers indicating the deed was sent to Suffolk County to be recorded is required. If property owner is a corporation or LLC, legal paperwork stating the person signing the application is an authorized signatory for the Corporation or LLC is required.

I understand that before a building permit can be issued, adjoining street must meet minimum Town standards or be bonded for same and that a Certificate of Occupancy for work done under this permit will not be issued until road damage caused during construction is repaired or bonded for same. This permit issuance expressly implies approval by the landowner of inspections required of the premises. I understand that the Town is relying on the information provided herein, any inaccuracy may cause delay or additional fees. I swear that this application is a true and complete statement of all proposed work on the described premises, that I have in effect all required insurance, including workers compensation insurance, and that I presently possess a valid Suffolk County home improvement license, if applicable (not required for new home construction). By submitting this application, I acknowledge and agree that a modification or addition may be made to the Certificate of Occupancy/Compliance. No further notice of any resultant modification or addition shall be required.

### PROPERTY OWNER:
- **Print Name:**
- **Signature:**
- **Notary Stamp:**
- **Notary Public:**

### CONTRACTOR:
- **Print Name:**
- **Signature:**
- **Notary Stamp:**
- **Notary Public:**

### EXPEDITOR/DESIGN PROFESSIONAL:
- **Print Name:**
- **Signature:**
- **Notary Stamp:**
- **Notary Public:**