



# TOWN OF DURHAM

7309 Route 81, East Durham, NY 12423

Building and Code Department

Telephone: 518-239-6122 ext. 4

Fax: 518-239-4140

Email: [durhambldg@durhamny.com](mailto:durhambldg@durhamny.com)

Web: [www.durhamny.com](http://www.durhamny.com)

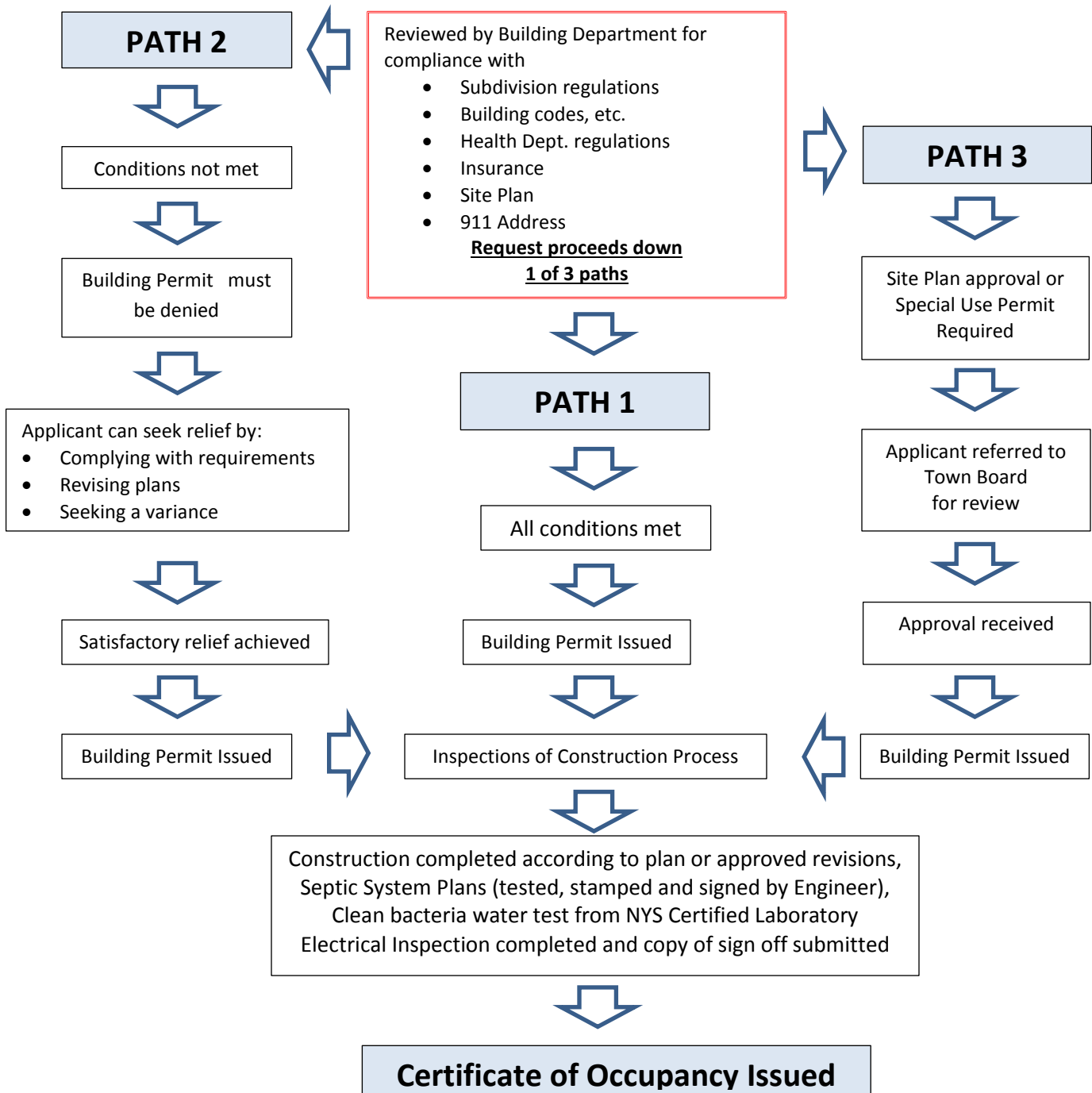
Building Inspector – David Cunningham

Code Officer – Mark Overbaugh

Department Clerk – Lois Rockefeller

## Building Permit Review Procedure

Application made to Building Department





**Building Inspector** – David Cunningham  
**Code Officer** – Mark Overbaugh  
**Department Clerk** – Lois Rockefeller

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## Building Permit Documents Required for Issuance

### To be submitted by the applicant or applicant's representative

1. Building Permit Application completed and signed by all owners
2. Owner Consent Form signed when applicant is **NOT** the building or property owner
3. Site Plan with boundary setbacks for proposed construction
4. Driveway permits for new driveways (state, county or town)
5. Workers Compensation, Disability and Liability Insurance

<http://www.wcb.ny.gov/content/main/Employers/ProveItToMoveIt.pdf>

### Unable to accept Accord Insurance Forms as proof of insurance

6. Stamped set of plans by a NYS licensed design professional for construction valued at \$20,000 and above or detailed sketch plan with material list
7. 911 address on new and existing lots of construction
8. All swimming pool construction needs to have **REQUIRED BARRIERS IN PLACE** and electrical inspection **BEFORE** filling with **WATER**
9. If your construction operation results in the **soil disturbance of 1 (one) acre or greater**, the storm water runoff from your site must be covered by a State Pollutant Discharge elimination System (SPDES) **Permit** for Storm Water Discharges contact DEC at <http://www.dos.ny.gov/DCEA/>

**Free online Building Codes & interpretations, Code Plan Review forms, energy rating information available at** <http://www.dos.ny.gov/DCEA/>



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## **REQUIRED INSPECTIONS FOR RESIDENTIAL CONSTRUCTION**

**FOOTING** - After forming and installation of steel, but before pouring concrete.

**FOUNDATION** - After damp-proofing and before backfilling.

**UTILITIES** - Prior to backfilling or covering up any part of a water line, sewer line or septic system.

**FRAMING** - After rough plumbing, heating, wiring, but before insulation, and

**IF CHECKED**, after satisfactory

- submission of stamped certified truss specifications, and/or
- foundation location.

**HEAT PRODUCING APPLIANCES** - Furnaces, water heaters, and fireplaces, etc. must be inspected and approved. Any concealed piping or vents must be inspected prior to insulation inspection.

**INSULATION** - Prior to sheet rocking or covering any insulation.

**FINAL** - When project is completed, including final electrical inspection and heat producing appliances, if applicable.

Under normal circumstances, your Certificate of Occupancy document will be prepared within forty-eight (48) hours after completion of all of the above.

**IT IS ILLEGAL TO OCCUPY ANY BUILDING WITHOUT A CERTIFICATE OF OCCUPANCY [IN VIOLATION OF THE LOCAL LAW OF THE TOWN OF DURHAM BUILDING LAW #2 OF 1997 SECTION 7(A)].**

- 
- Building permit applicant is responsible for scheduling the indicated inspections.
  - Additional inspections may be required by circumstances, or by the inspector, based on results of above inspections.
  - A forty-eight (48) hour advance notice is required to schedule all inspections.
  - No inspections will be performed unless the building permit card is visible from the street and the **town-approved plans are on site**



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## **REQUIRED INSPECTIONS FOR COMMERCIAL CONSTRUCTION**

Town approved plans must be on the job site for all inspections and all projects will require inspections. The applicant is responsible for scheduling the required inspections with the Building Department at least forty-eight (48) hours in advance. All of the inspections indicated below will be required in order to issue the Certificate of Occupancy or Certificate of Compliance:

**Prior to pouring concrete.** This includes all column pier footings, column piers, footings, reinforced foundation walls, floor slabs, etc., applicable to your project.

**Prior to backfilling foundation walls.** This includes any waterproofing, drain tile, insulation, etc., applicable to your project.

**Underslab plumbing.** All piping below slab is required to be tested and inspected prior to backfilling any piping. This includes waste, storm and supply piping as applicable to your project.

**Framing inspection.** This includes all exterior and interior framing including tenant separation walls. All plumbing above slab must be tested and inspected through the roof. Electrical must be roughed in and have evidence of approved electrical inspection onsite. HVAC system must be roughed in. Truss specifications must be submitted to the building department for review prior to framing inspection.

**Demising walls.** All tenant separation walls must be inspected whether or not you constructed them with your project. Demising walls are required to be smoke-tight with all penetrations and voids filled properly. Ceiling tiles must be removed for inspection.

**Above ceiling.** Pipe hangers, insulation, electrical, HVAC, sprinklers, fire alarm rough ins completed.

**Insulation inspection.** Insulation and vapor barriers must be completed prior to concealing any insulation.

**Utility inspections.** All sewer, water, and storm piping must be inspected prior to backfilling. This includes all grease traps, oil separators, etc. All two-piece structures are required to be water tested prior to backfilling.

**Final inspection.** This includes final electrical inspection, fire alarm certification, sprinkler certification, elevator certification, P.E. or A.I.A. building certification etc., as applicable to your project.

**Updated Blueprint Submission.** At the completion of the project and prior to the issuance of a Certificate of Occupancy, the applicant must submit to the Building Department a copy of all updated blueprints, plans and specifications.

Other: \_\_\_\_\_



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## **FOR ALL PERMITS WHICH REQUIRE THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY OR CERTIFICATE OF COMPLETION:**

It is the responsibility of the applicant that the Building Department receives written approval from the following individuals, agencies, and/or departments prior to occupancy of structure.

- Final electrical inspection by an authorized inspection agency.
- Final inspection letter submitted to the Building Department prior to backfilling of "special" septic systems.
- Final inspection by the Building Department of fireplaces, woodstoves, furnaces, water heaters, or other heat-producing equipment.
- Final inspection by the Building Department when building is completed.

The Building Department will issue a Certificate of Occupancy to an applicant when all the above items have been completed.

**IT IS ILLEGAL TO OCCUPY ANY BUILDING WITHOUT A CERTIFICATE OF OCCUPANCY [IN VIOLATION OF THE LOCAL LAW OF THE TOWN OF DURHAM BUILDING LAW #2 OF 1997 SECTION 7(A)].**

Under normal circumstances, your Certificate of Occupancy document will be prepared within forty-eight (48) hours after completion of all of the above.

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Please be advised that inspections must also be called for at the following intervals:

1. Footings before pour.
2. Foundation after waterproofing, but before backfill.
3. Sewer/septic and water installation (before backfill).
4. Rough frame including plumbing, wiring, and heating, but without insulation.
5. Insulation before sheetrock.
6. Fireplace inspections as required by Building Department.
7. Furnace, water heater, or other heat-producing equipment.
8. Final inspection.

**A FORTY-EIGHT HOUR NOTICE IS REQUIRED TO SCHEDULE ALL INSPECTIONS.**

# NEW YORK STATE DEPARTMENT OF HEALTH

*Bureau of Water Supply Protection  
Flanigan Square, 547 River Street, Troy, New York 12180-2216*

## FACT SHEET'

### Need for Licensed Design Professionals • Residential Onsite Wastewater Treatment Systems

**Purpose:** Provide guidance to regulatory officials and interested parties regarding the need for a licensed professional engineer or architect to design residential onsite wastewater treatment systems (OWTSs). The State Education Department has reviewed this document with the State Department of Health and offers the following as guidance in applying the requirements of the New York State Education Law relating to the design of OWTSs, **Licensed Design Professional:** The Department of Health and the State Education Department: recognize that, generally, OWTS design activities come within the definition of the practice of professional engineering or architecture under Article 145 or 147 of Title VUI of the New York State. Education Law and that OWTS designs must be prepared by a design professional appropriately licensed or otherwise authorized under such law. Please be advised that licensees providing OWTS design services must be qualified to provide those services based upon education, training, and experience. Any licensee providing services that they are not qualified to provide may be subject to professional misconduct charges. OWTS design activities include the evaluation of surface and subsurface site conditions at a defined parcel of land, which may include the investigation of soil characteristics, the performance of soil percolation tests, the determination of subsurface boundary condition and depths, the measurement and recording of existing surface features both natural and manmade, and the subsequent application of these data and the data related to proposed wastewater generation to design OWTS. These activities generally fall within the scope of practice of professional engineering or architecture.

**New Residential Construction:** The design of all new residential OWTSs (including conventional systems) shall be performed by an appropriately licensed design professional, as defined above. The design may also be issued/approved by county health departments where such issuance/approval is performed and authorized by an appropriately licensed design professional on staff. Private practice engineers and architects, and engineering and architectural firms with appropriately licensed design professionals may also provide such services. .

**Additions or Alterations:** An OWTS evaluation shall be performed and submitted by a licensed design professional for home alterations resulting in an increase in the number of bedrooms, for complete home replacements (including those resulting in the same number of bedrooms) and for alterations resulting in significant increases in wastewater generation. The evaluation must document if the existing OWTS complies with applicable State and local design standards, if the OWTS and its components are in satisfactory condition and functioning properly and if the existing OWTS can properly treat the proposed increase in wastewater generation. If the existing OWTS does not comply with regulatory design standards or needs significant modification, the licensed design professional shall prepare plans and oversee the installation of the alterations to the OWTS. This may include incorporating appropriate mitigative measures and/or designs as such ordinarily come within the scope of practice of professional engineering.

**Repairs and Replacements;** The repair or replacement of OWTS components "in kind" or "like-for-like" may not require the involvement of a licensed design professional. However, repair or replacement of any type of absorption field that involves relocating or extending an absorption area to a location not previously approved for such, does require a licensed design professional. A licensed design professional is required when repair or replacement involves installation of a new subsurface treatment system at the same location or the use of an alternative system (i.e., raised system, mounds, or sand filter) or innovative system design or technology.

**Note:** In all cases: 1) local government, watershed protection agencies or other jurisdictional agency rules and regulations may also apply; 2) All OWTS design plans must be prepared by a design professional licensed to practice in New York State; 3) When no regulatory agency is responsible for inspection of a constructed OWTS, it is recommended that a written certificate of compliance submitted by a New York State licensed professional engineer or architect prior to occupancy.

### **For questions concerning this Fact Sheet:**

Residential Sanitation Section

Bureau of Water Supply Protection

New York State Department of Health (518) 402-7650 or FAX (518) 402-7659

E-mail; bpwsp@health.state.ny.us

0 1/13/04



New York State Department of Labor

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## BUILDING DEMOLITION/RENOVATION

Industrial Code Rule 56 established work practice, asbestos contractor license, and asbestos worker training and certification requirements that protect the public from cancer causing airborne asbestos fiber that can arise from various construction activities, including the demolition/renovation of a building. One very important aspect of the Code covers requirements that specifically address the potential public health hazards associated with the significant amount of airborne asbestos fiber that can be released during the demolition/renovation of a building that contains asbestos or asbestos-containing materials.

New York State Labor Law (Article 10, Section 241 section 241.10) and the Code require a survey of the impacted portion of the building to identify the presence of asbestos prior to advertising for bids or contracting for or commencing work on any demolition/renovation work on a building. **The Code requires that this survey must be sent to the local government unit responsible for issuing the demolition/renovation permit. Note that only copies of the demolition or pre-demolition survey must be sent to the Department of Labor, Asbestos Control Bureau.** Also, prior to commencement of demolition/renovation work, the impacted asbestos identified in the survey must be removed in compliance with the Code. Your assistance, as specified below, would facilitate our enforcement efforts and help avoid the necessity of citing building owners who violate the statute and code:

1. Share this information with the individuals on your staff responsible for issuing demolition/renovation permits. Encourage your staff to contact the appropriate District Office of the Asbestos Control Bureau on the enclosed list should any asbestos issues arise, specifically those related to demolition/renovation.
2. Consider establishing a policy of not issuing a demolition/renovation permit until compliance with Industrial Code Rule 56 is achieved.
3. Call the appropriate District Office of the Asbestos Control Bureau when a demolition/renovation permit is issued to a contractor that has **failed** to provide a survey or has **not removed** the identified asbestos. Any cooperation you can provide will not only assist in our enforcement efforts but protect the health of your community.



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## Building Permit Application

Date \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Building Permit # \_\_\_\_\_ Septic Permit # \_\_\_\_\_ Other Permit # \_\_\_\_\_

### Applicant's Information

Tax Id # \_\_\_\_\_ - \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Applicant Phone Number Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Owner Phone Number Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

Is the Property Currently in applicant's Name \_\_\_\_ yes \_\_\_\_ no

*If no, please complete and attach the required consent of authorization form*

**Free online Building Codes & interpretations, Code Plan Review forms, and energy rating information available at <http://www.dos.ny.gov/DCEA/>**

### Nature of Proposed Work

#### New Construction

\_\_\_\_\_ Principal Building \_\_\_\_\_ Accessory Structure \_\_\_\_\_ Heating Type \_\_\_\_\_ A/C

\_\_\_\_\_ No. of Bedrooms \_\_\_\_\_ No. of Bathrooms \_\_\_\_\_ Fireplace Type

#### Size of Construction

\_\_\_\_\_ sq ft \_\_\_\_\_ Type of Construction (ie; stick, prefab)

#### Garage

\_\_\_\_\_ Attached \_\_\_\_\_ Detached \_\_\_\_\_ sq ft \_\_\_\_\_ Location

#### Deck

\_\_\_\_\_ Size of Construction \_\_\_\_\_ Location

#### Renovation/Addition

\_\_\_\_\_ Principal building \_\_\_\_\_ Accessory Structure \_\_\_\_\_ Size of Construction (sqft)

Explain \_\_\_\_\_

#### Swimming Pool

\_\_\_\_\_ In Ground \_\_\_\_\_ Above Ground \_\_\_\_\_ Size \_\_\_\_\_ Construction Type

(ie:Liner, gunite)



**Nature of Proposed Work – continued**

**Alternative Energy**

\_\_\_\_ Biomass \_\_\_\_ Wind \_\_\_\_ Solar \_\_\_\_ Geothermal \_\_\_\_ Hydroelectric

**Septic** (*stamped engineered plans required*)

New \_\_\_\_ Replacement \_\_\_\_

Explain \_\_\_\_\_

**Furnace** (*manufacture specs must accompany the application*)

\_\_\_\_ Wood \_\_\_\_ Gas \_\_\_\_ Oil \_\_\_\_ Electric

**Project Setbacks**

Front \_\_\_\_ ft. Rear \_\_\_\_ ft. Left Side \_\_\_\_ ft. right Side \_\_\_\_ ft.

**Demolition/Removal**

Explain \_\_\_\_\_

**Construction Information**

Estimated Cost of Proposed Work: \_\_\_\_\_

Architect or Engineer of Record: \_\_\_\_\_

Address and Telephone: \_\_\_\_\_

Prime Contractor/Builder: \_\_\_\_\_

Address and Telephone: \_\_\_\_\_

Additional contractors, ie, plumber, electrician, site, etc \_\_\_\_\_

**Site Information**

Lot size: \_\_\_\_\_

List all structures currently on lot: (include pools, sheds, barns etc.) \_\_\_\_\_

Is the site within the flood plain? \_\_\_\_ Yes \_\_\_\_ No

Is the site within a protected wetland? \_\_\_\_ Yes \_\_\_\_ No

Are you in the Historic District \_\_\_\_ Yes \_\_\_\_ No

Signature of Applicant: \_\_\_\_\_

Date \_\_\_\_\_

Signature of Co-Applicant: \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_ Approved \_\_\_\_ Denied

Building Inspector/Code Officer



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## Building Permit Fee Schedule

**All Permits Are Valid For One Year Or Upon Expiration Of Insurance Whichever Is First**

MINIMUM BUILDING PERMIT FEE.....	\$ 50.00	\$ _____
RESIDENTIAL:		
<ul style="list-style-type: none"> <li>All Construction Or Renovations..... (Including additions, basements, cellar or deck)</li> </ul>	\$ .20	\$ _____ PER SQ FT
NON-RESIDENTIAL BUILDINGS (ALL WORK)		
<ul style="list-style-type: none"> <li>New Construction Or Renovation..... (Including additions, basements, cellar or deck)</li> </ul>	\$ .30	\$ _____ PER SQ FT
BARN/POLE BARN/STORAGE SHED ( <b>AGRICULTURAL USE</b> ).....	\$ 15.00	\$ _____
BUILDING PERMIT RENEWAL.....	\$100.00	\$ _____
CELL TOWERS.....	\$250.00	\$ _____
CERTIFICATE OF OCCUPANCY SEARCH.....	\$ 30.00	\$ _____
CHIMNEYS & WOOD BURNING APPLIANCES.....	\$ 25.00	\$ _____
DEMOLITION/REMOVAL.....	\$ 25.00	_____
POOLS: (above and in ground).....	\$ 50.00	\$ _____
SEPTIC SYSTEMS (new or replacement).....	\$ 50.00	\$ _____
SITE PLAN REVIEW.....	\$ 50.00	\$ _____
<ul style="list-style-type: none"> <li>Required for all construction other than a one or two family residence</li> </ul>		
SPECIAL USE/VARIANCE PERMIT.....	\$ 50.00	\$ _____
TRUSS PERMIT.....	\$ 50.00	\$ _____
TRUSS SIGNS.....	\$ 7.00	\$ _____ each
TOTAL FEE.....		\$ _____

**Your Construction May Require Special Inspections, the Fee for which will be paid by you in advance.**

**Building Department Approval:** \_\_\_\_\_

**Date** \_\_\_\_\_



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## Affidavit of Exemption to Show Special Proof of Workers' Compensation Insurance

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, owner-occupied residence including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of worker's compensation insurance coverage for such residence because (please check the appropriate box):

- I am performing all the work for which the building permit was issued.
- I am not hiring, paying or compensating in any way, the individual(s) that is (are) performing all the work for which the building permit was issued or helping me perform such work
- I have a homeowner's insurance policy that is currently in effect and covers that property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

**Also agree to either:**

- Acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage of forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate housing for all paid individuals on the jobsite) for work indicated on the building permit; OR
- Have the general contractor, performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate process of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

\_\_\_\_\_  
(Signature of Homeowner)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Homeowner's Name Printed)

\_\_\_\_\_  
(Home Phone No.)

Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Property Address that requires the building permit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

(County Clerk or Notary Public)



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## Owner Consent Form

*To be filed when the applicant is not the building or property owner*

Tax Id # \_\_\_\_\_ - \_\_\_\_\_

Permit # \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Location: \_\_\_\_\_

Description of work to be performed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/We, \_\_\_\_\_, owner(s) of the above land/building hereby give my/our permission to \_\_\_\_\_

(applicant name) to submit the above identified application on my/our behalf and to represent represent me/us in all proceedings before the Town of Durham Planning Board concerning the reference application.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

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Code Plan Review forms, energy rating  
information available at  
<http://www.dos.ny.gov/DCEA/>**

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_  
(County Clerk or Notary Public)

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**“As Built” Certification of Construction Compliance**

Date \_\_\_\_\_

Tax Id # \_\_\_\_\_ . \_\_\_\_\_ - \_\_\_\_\_ Building Permit # \_\_\_\_\_

**Section A - Project Information**

Name of Property Owner: \_\_\_\_\_

Street Address \_\_\_\_\_

Tax Map No \_\_\_\_\_

Email Address \_\_\_\_\_

**Section B – Supporting Documentation**

% “As Built” plans are attached \_\_\_\_ YES \_\_\_\_ NO

% Other \_\_\_\_\_

**Section C – Exceptions or Deviations from APPROVED PLANS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section D – Certification**

I, \_\_\_\_\_, hereby certify that the above described project is constructed under my direction and responsibility and any amendments thereto.

\_\_\_\_\_  
Signature Date