NOTICE TO APPLICANT

This application must be typewritten or neatly printed (blue or black ink only), and accompanied by (1) complete set of plans and specifications as outlined below and conforming to the requirements of Section 112.9 of the Village Code.

If this application is approved the Superintendent of Buildings will issue a Building Permit to the applicant together with one approved set of plans and specifications.

NO PROPOSED WORK MAY COMMENCE UNTIL A BUILDING PERMIT HAS BEEN ISSUED.

**ALL APPLICATIONS EXPIRE 6 MONTHS FROM SUBMISSION DATE IF NOT APPROVED.**

Please be advised that a building permit application will not be accepted without the following information:

**Interior Alterations/Change of Use**

- Completed application form, signed by the current property owner (original only, no copies accepted).
- Copy of survey, required for all work involving additions or new structures.
- (1) Set of complete plans and specifications, showing information as listed on attached checklist for initial review. Once approved you must supply (2) more complete and collated sets of plans and (1) Electronic Submission.
- Applicant to indicate requested code to be use for review purposes, in accordance with applicable restrictions.
- Project location and occupancy
- Name, Address and Telephone Number of Owner/Lessee
- Description of the proposed work
- Estimated Value of proposed work
- Contractor, Westchester County License Number, address and phone Number
- Architect or Engineer, address and phone number
- Filing Fee Due (Alterations, Additions, Repairs) $150 Filing Fee

Any Apartment/Co-ops/Condo applications must be submitted with a letter from Board approving work and an Asbestos Report. (Asbestos testing must be done on all areas that will be disturbed.)

**Additions/New Construction (ALL ABOVE LISTED ITEMS IN ADDITION TO ITEMS LISTED BELOW)**

- Completed zoning analysis form, including floor area calculation and lot coverage calculations if addition or expansion of finished space.
- Completed F.A.R. Computation form
- Detailed usable open space and building coverage computations (Not applicable to interior renovations)
- Detailed grade plane (Average Grade) computation, (sample attached)
- Filing Fee Due (New Buildings or Structures including swimming pools) $425 Filing Fee
THE FOLLOWING INFORMATION MUST BE SUBMITTED BEFORE THE PERMIT WILL BE ISSUED. TO EXPEDITE THE PERMIT PROCESS HAVE ALL ELECTRICAL AND PLUMBING AND MECHANICAL PERMITS APPLICATIONS FILE AS SOON AS THE BUILDING PERMIT APPLICATION IS SUBMITTED.

CONTRACTOR’S CERTIFICATE OF INSURANCE-VILLAGE OF BRONXVILLE CERTIFICATE HOLDER

BALANCE OF FEE ($15/$1,000 OF ESTIMATED COST)

UPON COMPLETION OF WORK, PRIOR TO OCCUPANCY A CERTIFICATE OF OCCUPANCY APPLICATION AND C.O. FILING FEE MUST BE SUBMITTED ADDITIONAL FEE REQUIRED.

BUILDING PLAN SUBMISSION REQUIREMENTS

Drawings submitted for review shall contain the following MINIMUM information as it applies to the area of work covered under this application. ADDITIONAL INFORMATION MAY BE REQUIRED DEPENDING ON THE NATURE OF THE PROPOSED WORK.

ALL WORK TO COMPLY WITH THE BUILDING CODE OF NEW YORK STATE:

1. Site Plan (Required for all additions and exterior alteration/modification)
   a. Setback Distances
   b. Required Setback Distances
   c. Drywell Locations
   d. Erosion Control Plan

2. Foundation
   a. Footing size and 3'-6” minimum depth
   b. Footing Drain
   c. Reinforcement (Footing, slab & wall as req’d)
   d. Vapor Barrier
   e. Attachment to Structure (Provide Detail)
   f. Insulation and Waterproofing
   g. Column Spacing and Locations
   h. Ventilation and Access

3. Structure
   a. Sill size (Press. Treat Lumber in Contact w/ Masonry)
   b. Floor Joist (Size, spacing, span, bridging)
   c. Beam and Column Details
   d. Subfloor and flooring
   e. Wall Construction (Size, spacing, sheathing, insul, vapor barrier, interior finish)
   f. Stairway (Tread & riser sizes, width, landing size, railings)
   g. Rooms (Minimum Size)
   h. Window (Minimum Size, light & vent, egress size)
   i. Door (Size & location)
   j. 2nd Floor Joist (Size, spacing, span, bridging)
   k. Wall Construction (Size, spacing, sheathing, insul, vapor barrier, interior finish)
   l. Ceiling Joist (Size, spacing, span, sheathing, insul, vapor barrier, interior finish)
   m. Attic (Access, ventilation, insulation)
   n. Roof (Sizing, spacing, span, sheathing, material)
   o. Mechanical Equipment (Type, location, manuf info, vent locat, comb air, fireproof)
   p. Electrical (Smoke detect location, GFCI location)
   q. Fireplaces & Chimneys (Manuf. info, construct details)
   r. Plumbing (piping dia, pipe size, mat'l's, Clean Outs)
   s. Garage (Location, fire separation)
   t. Porch, Deck Exterior stairways (Construct details)

4. Energy Compliance Information
   a. R-Values & compliance method, calculations if applicable, applicable ResCheck or ComCheck Software
   b. Energy statement

5. Equipment information
**BUILDING PERMIT APPLICATION**

**Office Use**

<table>
<thead>
<tr>
<th>Date Received:</th>
<th>Application Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appl. Fee:</td>
<td>Check #:</td>
</tr>
<tr>
<td>Permit Fee:</td>
<td>Check #:</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Section:</th>
<th>Block:</th>
<th>Lot(s):</th>
</tr>
</thead>
</table>

1) **Project Street Address:**

Property Owner: _____________________________________________________________

Owner Street Address: _______________________________________________________

City: ___________________________  State: ______________________  Zip: __________

Phone #: ______________________  Email: ________________________________

2) **Lessee (if any):**

Street Address: ___________________________________________________________

City: ___________________________  State: ______________________  Zip: __________

Phone #: ______________________  Email: ________________________________

3) **Architect (if any):**

Street Address: ___________________________________________________________

City: ___________________________  State: ______________________  Zip: __________

Phone #: ______________________  Email: ________________________________

4) **Professional Engineer (if any):**

Street Address: ___________________________________________________________

City: ___________________________  State: ______________________  Zip: __________

Phone #: ______________________  Email: ________________________________

5) **Builder or Contractor:**

Address: _________________________________________________________________

Street Address: ___________________________________________________________

City: ___________________________  State: ______________________  Zip: __________

Office Phone #: ______________________  Cell Phone: _______________________

**Estimated value of proposed work:** (Please round up to the nearest thousand) $__________________________

**Description of Proposed Project:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
BUILDING PERMIT APPLICATION

Use and Occupancy of Premises:

A: Existing Use and Occupancy (List rooms and use by story)

Basement:______________________________________________________________

1st Floor: ______________________________________________________________

2nd Floor: ______________________________________________________________

3rd Floor: ______________________________________________________________

Attic: _________________________________

B: Proposed Use and Occupancy) List rooms and use by story)

Basement:______________________________________________________________

1st Floor: ______________________________________________________________

2nd Floor: ______________________________________________________________

3rd Floor: ______________________________________________________________

Attic: _________________________________

C: Occupancy classification by occupancy or use? (See Chapter 3, Building Code of N.Y.S.)

Existing Building or Structure: ____________________________________________

Proposed Building or Structure: ____________________________________________

D: Construction classification of Building or Structure? (See Chapter 6, Building Code of N.Y.S.)

________________________________________________________________________

E: Does the proposed work violate in anyway any zoning law or other law, rule or regulation applicable to the construction, alteration, moving or demolition of buildings.

No: ___________ Yes: ____________ Section Number(s):________________________

6) Electrical Work to be performed: Yes ☐ No: ☐

7) Plumbing Work to be performed: Yes ☐ No: ☐

8) Heating or Cooling work to be performed: Yes ☐ No ☐

9) Does work include installation or modification or any pre-engineered wood components:

Yes ☐ If yes, must complete Truss Form. No: ☐

Application is hereby made to the Superintendent of Buildings of the Village of Bronxville, New York for the issuance of a Building Permit to Construct, Alter, Move, Demolish, or Change the occupancy of a building or other structure in accordance with the Building Code of New York State as set forth above.

The Applicant Hereby consents to the Permit the Superintendent of Buildings and any person authorized by him to enter without a search warrant in the manner prescribed in Section 112-17 of the Village of Bronxville Code of 1981, upon the premises where work proposed is to be conducted.

Signature by or on behalf of Applicant: ______________________________________

Print Name: __________________________________________ Date: ______________

Address of Applicant: ____________________________________________________

City: ___________________________ State: __________________ Zip: ____________

Phone Number of Applicant: _______________________________________________
AFFIDAVIT OF OWNERSHIP

State of New York )
County of Westchester ) SS:

I, ______________________________________________, being duly sworn, deposes and says:
   (Clearly print first and last name of property owner)

(Check appropriate box)

☐ I am the owner of the property for which this application is being submitted.
☐ I am an officer of the corporation that owns the property for which this application is being submitted.

Further (check applicable box):

☐ I am submitting this application on my own behalf.
☐ I am authorizing the following individual to submit this application on my behalf:
   ________________________________________________________________
      (Clearly print name of individual authorized to submit this application)

Further:
To the best of my knowledge, information and belief, all statements contained in this application are true, complete and correct, and all work will be performed in the manner set forth in the application and in the plans and specifications filed therewith, and in accordance will all applicable laws, ordinances and regulations.

__________________________________________________________
(Signature of Owner)

__________________________________________________________
(Print Name of Owner)

Sworn to before me this ______ day of _____________, 20____

__________________________________________________________
(Signature of Notary Public)
ZONING COMPLIANCE ANALYSIS

ZONE: ____________________

Notes: Information must be based on definitions in the current Zoning Law of the Village of Bronxville. If not applicable, leave box blank. Check box in far right column if variance is required (even if already approved by the ZBA).

<table>
<thead>
<tr>
<th>LOT INFORMATION</th>
<th>Existing</th>
<th>Required/Proposed</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot Area (sf)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot Frontage (ft)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yard Setbacks (ft):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Front Yard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rear Yard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Side Yard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second Side Yard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Side Yard Adjoining Street</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| PRINCIPAL BUILDING INFORMATION | | |
|---------------------------------| | |
| Gross Floor Area (sf)           | | |
| Building Height:                | | |
| Stories                         | | |
| Height to Principal Eave (ft)   | | |
| Height to Highest Roof Ridge (ft)| | |

<table>
<thead>
<tr>
<th>ACCESSORY STRUCTURES</th>
<th>Detached Garage</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Setbacks:</td>
<td></td>
<td>---</td>
</tr>
<tr>
<td>To Principal Building</td>
<td></td>
<td>---</td>
</tr>
<tr>
<td>To Side Lot Line</td>
<td></td>
<td>---</td>
</tr>
<tr>
<td>To Rear Lot Line</td>
<td></td>
<td>---</td>
</tr>
<tr>
<td>Building Height:</td>
<td></td>
<td>---</td>
</tr>
<tr>
<td>Height to Principal Eave (ft)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Height to Highest Ridge (ft)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Other Accessory Structure (indicate type of structure – shed, pool, etc.) | | |
|--------------------------------------------------------------------------| | ---|
| Setbacks:                                                                 | | ---|
| To Principal Building                                                   | | ---|
| To Side Lot Line                                                        | | ---|
| To Rear Lot Line                                                       | | ---|
| Building Height:                                                       | | ---|
| Height to Principal Eave (ft)                                          | | ---|
| Height to Highest Ridge (ft)                                           | | ---|

| BUILDING COVERAGE | | |
|-------------------| | ---|
| Principal Building Coverage (sf)                                      | | ---|
| Principal Building Coverage (%)                                      | | ---|
| Accessory Building Coverage (sf)                                     | | ---|
| Accessory Building Coverage (%)                                      | | ---|

| USABLE OPEN SPACE | | |
|-------------------| | ---|
| Impervious Surface Coverage (sf)                                     | | ---|
| Impervious Surface Coverage both (%)                                 | | ---|

Are any variances required (or were any variances approved by the ZBA) that are not listed on the table above? ___Yes ___No
If yes, describe all additional variances: ____________________________________________________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________

All applications for additions to submit complete detailed finished grade and FAR computation worksheet. Submission to be stamped by the design professional.

Form Prepared by Name (Please Print) ________________________________________________________________

Signature: ________________________________
### Zoning F.A.R. Calculation

<table>
<thead>
<tr>
<th></th>
<th>EXISTING</th>
<th>PROPOSED</th>
<th>SUB TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASEMENT(^{(b)})</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1(^{ST}) FLOOR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2(^{ND}) FLOOR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3(^{RD}) FLOOR (^{(d)})</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATTIC (^{(d)})</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GARAGE (^{(c)})</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ACTUAL TOTAL BUILDING FLOOR AREA =**

**ACTUAL LOT AREA =**

**PERMITTED F.A.R. (From Table, interpolate if necessary) =**

**MAXIMUM PERMITTED BUILDING FLOOR AREA**

\((\text{ACTUAL LOT AREA} \times \text{PERMITTED F.A.R.}) =\)**

---

Floor Area Ratio (for a lot whose principal use is a one or two family dwelling): The ratio of the gross floor area of all buildings on a lot to the area of the lot on which the buildings are located. For the purpose of determining the floor area ratio (FAR), all floor areas of each floor of all principal and all accessory structures on the lot shall be included. Any interior space with a floor-to-ceiling height in excess of 14 feet shall be counted twice. Notwithstanding the preceding the following shall be excluded from the calculation of floor area:

**a)** The aggregate area of all unroofed structures such as decks and patios and all spaces in unenclosed porches and porticos, except that existing unenclosed porches may be enclosed and the enclosed area excluded from the FAR calculation provided that the exterior walls of the unenclosed porch and the walls of the dwelling to which the porch is attached are not relocated closer to the lot lines of the subject property than the existing unenclosed porch.

**b)** The aggregate area of any cellar regardless of its use or of any basement unless it is defined as a story. See Basement definition.

**c)** The aggregate area of grade level garage parking (whether attached or detached) or basement level parking, in either case, up to a maximum of 400 square feet. In those instances where an additional story is provided above a garage (whether attached or detached) such floor area shall be subject to the attic and sloping roof limitations in \((d)\) below.

**d)** The aggregate area of all unfinished or finished space in an attic or under a sloping roof provided that the total exterior width of all dormers does not exceed 30% of the exterior linear width of the portion of the roof upon which they are situated. The exterior linear width of the roof shall be measured from end to end at the widest point of the roof. Where the linear width of the dormers exceeds the limitation above, the total area in the attic or under the sloping roof shall be included in the calculation of FAR, except where floor area between the top of the floor beams and the structural ceiling level is five (5) feet or less.

---

Calculations Prepared By: Name (Print): ___________________________

Signature: ___________________________
Village of Bronxville Construction Inspection Checklist

The following inspections are required, advance notice of 48 hours is to be provided to be scheduled:

1) **Soil, forms & footings:** All soils are to be inspected by design professional and certified to meet NYS criteria. The footing forms shall be excavated to design depth and all forms formed up. No trench pours will be allowed and any re-bar properly supported by wire ties or re-bar chairs.

2) **Foundation Walls:** All foundation walls shall be installed after footing forms have been removed. The foundation forms shall be braced properly and any footing drains and foundation insulation installed, along with waterproofing at this time prior to any backfilling.

   NOTE: Foundation survey is required depicting all setbacks to property lines prior to any framing.

3) **Basement Slab:** Prior to pouring any concrete basement must be conducted of the gravel subbase and vapor banish along with any designed slab improvements and any underground plumbing within the building for underground waste & vent piping a minimum if an eight (8) foot water head shall be provided and pre-formed by a licensed Westchester County Plumber.

4) **Underground Drywells/Infiltrators & Leader pipes:** All underground drywells, infiltrators & leader piping shall be inspected to verify installation with approved drawings. Any changes shall be obtained prior to field modifications.

5) **Electrical:** All electrical inspections throughout the Village shall be conducted by an approved third party inspection agency approved by the New York Board of Underwriters. The electrician of record must file all work with the Village prior to any inspection request being scheduled. A roughing inspection sticker of approval shall be placed in a window or equal to alert inspector that an inspection was conducted. Prior to any Certificate of Occupancy being granted a final certificate of approval shall be issued and submitted to the building inspector.

6) **Rough Framing/Rough Plumbing:** All rough framing shall be conducted concurrently with the rough plumbing. The building shall be sheathed and roofed along with all windows being installed prior to scheduled inspections being conducted. Any changes to the approval framing plan shall be evaluated by the design professional and design modifications submitted for approval prior to proceeding further. Rough plumbing shall be tested with water up to and thru the roof for any waste and vent piping and pressure tested for any domestic or heating piping.

   NOTE: Fire stopping is required to be installed at this stage throughout.

7) **Gas Testing:** All gas piping shall be tested per NYS codes with a manometer or approved pressure measuring device designed and calibrated to read, record or indicate a pressure loss caused by leakage during the pressure test period. Testing shall include all piping associated with the meter line being tested unless otherwise approved.

8) **Insulation:** Insulation inspections shall be done once all framing & plumbing approvals have been secured. The installation shall be secured in place and all vapor barriers installed per code. Foam type insulation shall be specified and any exposed foam in attic treated with a thermal barrier or approval equal.

9) **Mechanical:** All mechanical work shall be inspected and certified by design professional as to its installation and operation. Any safety devices will also be tested at this point to verify operation.

10) **Final Survey:** Final survey will be required to verify setbacks and structures zoning compliance (As determined by building department)

11) **Final:** Final inspection shall be required to determine compliance with approved plans. Any modifications must be submitted /filed prior to the issuance of a Certificate of Occupancy.

12) **Certificate of Occupancy:** A Certificate of Occupancy will be granted by the department prior to any occupancy unless specifically approved.

   NOTE: A charge of $50 for each missed re-inspection or proceeding without proper approval will be assessed. Furthermore, no work shall be performed on weekends & holidays.
GRADE PLANE. A reference plane representing the average of finished ground level adjoining the building at exterior walls. Where the finished ground level slopes away from the exterior walls, the reference plane shall be established by the lowest points within the area between the building and the lot line or, where the lot line is more than 6 feet (1829 mm) from the building, between the building and a point 6 feet (1829 mm) from the building.

PLAN VIEW OF LIMITS OF AREA FOR CALCULATING GRADE PLANE
DIAGRAM #2
BASEMENT COUNTED AS A STORY ABOVE GRADE
UNDER THE FOLLOWING CONDITIONS

ATTIC

1ST FLOOR ABOVE
FINISHED
SURFACE OF
FLOOR

MORE THAN 6
FEET ABOVE
FINISHED GRADE

AVG.
FINISHED GRADE

BASEMENT

ATTIC

1ST FLOOR ABOVE
FINISHED
SURFACE OF
FLOOR

MORE THAN 6 FEET ABOVE FINISHED GROUND LEVEL FOR MORE THAN 50% OF THE TOTAL BUILDING PERIMETER

ATTIC

1ST FLOOR ABOVE
FINISHED
SURFACE OF
FLOOR

MORE THAN 12 FEET ABOVE FINISHED GROUND LEVEL AT ANY POINT

FINISHED GRADE

BASEMENT
GRADE PLANE WORK SHEET

<table>
<thead>
<tr>
<th>WALL DESIG</th>
<th>LOWEST or AVERAGE ELEVATION</th>
<th>WALL LENGTH</th>
<th>WEIGHTED PERIMETER</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>(97 + 96.86)/2=96.9</td>
<td>X</td>
<td>19.5</td>
</tr>
<tr>
<td>B</td>
<td>97.7</td>
<td></td>
<td>7.41</td>
</tr>
<tr>
<td>C</td>
<td>97.6</td>
<td></td>
<td>4.25</td>
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<tr>
<td>D</td>
<td>98.0</td>
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<tr>
<td>E</td>
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<td></td>
<td>3.41</td>
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<td>I</td>
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<td>N</td>
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<td>S</td>
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<td></td>
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<tr>
<td>T</td>
<td>96.1</td>
<td></td>
<td>15.82</td>
</tr>
</tbody>
</table>

TOTAL 189.1 183778.0

GRADE PLANE ELEVATION = TOTAL WEIGHTED PERIMETER / TOTAL WALL LENGTH
= 183778.0 / 189.1
GRADE PLANE ELEVATION = 97.2

Where the finished ground level slopes away from the exterior walls, the reference plane shall be established by the lowest points within the area between the building and the lot line or, where the lot line is more than 6 feet from the building, between the building and a point 6 feet from the building.

GRADE PLANE CALCULATION TO BE PREPARED BY NYS LICENSED DESIGN PROFESSIONAL AND TO BE FILED UNDER DESIGN PROFESSIONALS SEAL AND SIGNATURE SEE DIAGRAM #2 TO DETERMINE NUMBER OF STORIES ABOVE GRADE
HALF AND FULL STORY CALCULATION FOR ATTIC AREA

IF ATTIC AREA WITH CEILING HEIGHT OF GREATER THAN 5 FEET IS LESS THAN 50% OF FLOOR AREA OF THE FLOOR BELOW (AREA "B") THEN THE ATTIC CONSIDERED A 1/2 STORY

IF ATTIC AREA WITH CEILING HEIGHT OF GREATER THAN 5 FEET IS MORE THAN 50% OF FLOOR AREA OF THE FLOOR BELOW (AREA "B") THEN THE ATTIC CONSIDERED A FULL STORY

IF TOTAL DORMER WIDTH EXCEEDS 30% OF LINEAR ROOF WIDTH THAN THE ATTIC FLOOR AREA WITH CEILING HEIGHT GREATER THAN 5 FEET IS INCLUDED IN F.A.R. COMPUTATION

ATTIC FLOOR AREA

FINISHED ATTIC FLOOR

2ND FLOOR
AREA "B"

FLOOR AREA OF FLOOR IMMEDIATELY BELOW

1ST FLOOR

BASEMENT

5'-0" CEILING HEIGHT

DORMER AREA

ROOF RAFTERS
DIAGRAM #5
DORMER WIDTH LIMITATION

EXTERIOR LINEAR WIDTH OF ROOF

DORMER WIDTH #1

TOTAL DORMER WIDTH NOT TO EXCEED 30% OF LINEAR ROOF WIDTH

DORMER

DORMER

DORMER

DORMER WIDTH #2

IF TOTAL DORMER WIDTH EXCEEDS 30% OF LINEAR ROOF WIDTH THAN THE ATTIC FLOOR AREA WITH CEILING HEIGHT GREATER THAN 5 FEET IS INCLUDED IN F.A.R. COMPUTATION

EXTERIOR LINEAR WIDTH OF ROOF

DORMER WIDTH

TOTAL DORMER WIDTH NOT TO EXCEED 30% OF LINEAR ROOF WIDTH

DORMER

IF TOTAL DORMER WIDTH EXCEEDS 30% OF LINEAR ROOF WIDTH THAN THE ATTIC FLOOR AREA WITH CEILING HEIGHT GREATER THAN 5 FEET IS INCLUDED IN F.A.R. COMPUTATION
TABLE 3.1: (1)

<table>
<thead>
<tr>
<th>Category</th>
<th>Winter damage to Paradise Road</th>
<th>Winter damage to Paradise Road</th>
<th>Winter damage to Paradise Road</th>
<th>Winter damage to Paradise Road</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example</td>
<td>This is an example of how to fill in the table.</td>
<td>This is an example of how to fill in the table.</td>
<td>This is an example of how to fill in the table.</td>
<td>This is an example of how to fill in the table.</td>
</tr>
<tr>
<td>Another</td>
<td>Example of how to fill in the table.</td>
<td>Example of how to fill in the table.</td>
<td>Example of how to fill in the table.</td>
<td>Example of how to fill in the table.</td>
</tr>
<tr>
<td>Example</td>
<td>This is another example of how to fill in the table.</td>
<td>This is another example of how to fill in the table.</td>
<td>This is another example of how to fill in the table.</td>
<td>This is another example of how to fill in the table.</td>
</tr>
</tbody>
</table>

Legend:
- [Example] This is an example of how to fill in the table.
- [Another Example] This is another example of how to fill in the table.
- [Example 2] This is a third example of how to fill in the table.

Notes:
- The table contains data related to climate and geographic design criteria.
- Each category includes examples of how to fill in the table.
- The table is designed to provide a comprehensive overview of the design criteria for Paradise Road.

For the complete table, please refer to the original document.
LICENSE AND INSURANCE REQUIREMENTS

In accordance with Workers’ Compensation Law §57 and §220(8)

LICENSES

- A WESTCHESETR COUNTY CONTRACTORS LICENSE IS REQUIRED FOR ALL ONE AND TWO FAMILY HOMES.

- A WESTCHESTER COUNTY TRADE LICENSE IS REQUIRED FOR ALL PLUMBING AND ELECTRICAL PERMIT APPLICATIONS.

INSURANCES

THREE SEPARATE INSURANCE CERTIFICATES ARE REQUIRED:

1. LIABILITY INSURANCE: ONLY liability insurance is permitted on the ACORD form.

2. For WORKERS’ COMPENSATION INSURANCE, ONLY the following forms are acceptable:
   - CE-200 - Certificate of Attestation of Exemption from NYS Workers’ Compensations and/or Disability Benefits Coverage
   - C-105.2 – Certificate of Workers’ Compensation Insurance (Note: the State Insurance Fund provides its own version of the form – the U-26.3)
   - SI-12 – Certificate of Workers’ Compensation Self-Insurance
   - GSI-105.2 – Certificate of Participation in Workers’ Compensation Group Self-Insurance

3. For DISABILITY INSURANCE, ONLY the following forms are acceptable:
   - CE-200 - Certificate of Attestation of Exemption from NYS Workers’ Compensations and/or Disability Benefits Coverage
   - DB-120.1 – Certificate of Disability Benefits Insurance
   - DB-155 – Certificate of Disability Benefits Self-Insurance

   For building permits ONLY, certain homeowners of 1, 2, 3, or 4 family owner-occupied residences serving as their own General Contractor may be eligible to file Form BP-1. (A copy of the form can be obtained from the Building & Planning Department).

Note: On all insurances, the certificate holder must be listed as:
   Village of Bronxville
   200 Pondfield Rd
   Bronxville, NY 10708

ALL INSURANCES MUST BE HANDED IN WITH APPLICATION – DO NOT FAX
NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION, PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION

To: Village of Bronxville Building Department

Architect/Engineer: ____________________________________________________________

Street Address: ________________________________________________________________

City: ____________________________ State: _______________________ Zip: _______________

Phone #: _____________________________  Email: ______________________________________

Subject Property: ______________________________________________________________

Please take notice that the (check applicable line):

__ New residential structure
__ Addition to existing residential structure
__ Rehabilitation to existing residential structure

To be constructed or performed at the subject property reference above will utilize (check each applicable line):

__ Truss type construction (TT)
__ Pre-engineered wood construction (PW)
__ Timber construction (TC)

In the following location(s) (check applicable line):

__ Floor framing, including girders and beams (F)
__ Roof framing (R)
__ Floor framing and roof framing (FR)

Please call Fire Department with complete details of location – 914-723-2784

Date: ________________________________

Signature: ______________________________

Name: _______________________________

Capacity: ______________________________

** A COPY OF THIS FORM SHALL BE CONCURRENTLY SUBMITTED VIA EMAIL TO**  FIREPREVENT@EASTCHESTERFD.COM
TRUSS IDENTIFICATION SIGN
COMPLIANCE WITH 19 NYCRR PART 1264

NOT TO SCALE

EXAMPLE TRUSS IDENTIFICATION SIGN  DATE:03/08/2005

NEW YORK STATE DEPARTMENT OF STATE
DIVISION OF CODE ENFORCEMENT
AND ADMINISTRATION