



**TOWN OF BABYLON
DEPARTMENT OF PLANNING & DEVELOPMENT
BUILDING DIVISION**
200 East Sunrise Highway
Lindenhurst, NY 11757-2598

BUILDING PERMIT APPLICATION

For

BULKHEADING

GENERAL INSTRUCTIONS AND INFORMATION

Whenever a structure is built, altered or demolished, certain permits, certificates of occupancy or letters of compliance are required. This keeps our town attractive, orderly and safe. The permit process also lets us assure you and your neighbors that the appropriate state, county and town building codes are met.

The information listed is specific to the installation of bulkheading on private property. Whether you are installing new bulkheading or replacing existing bulkheading, various permits and approvals are required. If you are only refacing existing bulkheading, then the Army Corp of Engineers approval is not required.

The goal of the Building Division is to insure the safety and quality of the premises in our town. Our staff is ready to assist you. If you have any questions regarding the application process, please call (631) 957-3058.

FEES

- Application fee - \$25.00 (non-refundable)
- Building Permit Fee
The permit fee is dependent upon the cost of the demolition as calculated by the Town of Babylon Plans Examiner. You will be notified of the balance due if a permit is granted. The \$25.00 application fee is applied toward the permit fee and is non-refundable.
- Certificate of Occupancy Fee - \$20.00
This fee will be added to the building permit fee.
Note: if more than one Certificate of Occupancy is issued for the building permit, an additional \$20.00 will be required for each Certificate of Occupancy issued

REQUIREMENTS

1. Building Permit Application Form - must be completed, signed and notarized
2. Owner's Endorsement, if applicable – must be completed, signed and notarized
Note: if there is a new property owner within the past six months, a copy of the new deed or certificate of title is required so we may verify the current owner
3. Contractor's Information
Must provide an individual's name and the business name, if applicable, address and license number on the building permit application and copies of the contractor's Workers' Compensation Insurance, Disability Insurance and Liability Insurance forms. The Liability Insurance must name the Town of Babylon as additional insured.
4. Surveys - 3 full size originals
Signed and sealed by a professional surveyor
Older surveys that do not show all current improvements to the property are not acceptable.
The survey of the property must include the following:
 - all existing and proposed structures, i.e. dwelling, additions, garages, decks, sheds, pool, fence, etc.
 - the sizes of the structures and setbacks to front, rear and side property lines
 - existing and proposed elevations
 - **A FINAL SURVEY WILL BE REQUIRED WHEN THE PROPOSED WORK HAS BEEN COMPLETED**
5. Construction Plans – 2 sets
Signed and sealed by a licensed architect or engineer
Drawn to 1/4" = 1'
6. Approvals
The following permits/approvals are required and must be submitted with a completed building permit application submission:
 - Army Corp of Engineers
 - New York State Department of Environmental Conservation at Stony Brook
 - Town of Babylon Department of Environmental Control

GENERAL INFORMATION

WORKERS' COMPENSATION AND DISABILITY BENEFITS LAW

(Effective December 1, 2008)

New York State amended the general municipal law regarding Workers' Compensation and the Disability Benefits Law which affects the issuance of building permits.

Any business, contractor or general contractor applying for a permit must comply with the coverage provisions of the Workers' Compensation and Disability Benefits Law and provide one of the following forms to the Town:

Workers' Compensation Law (Section 57)

1. C-105.2 - Certificate of Workers' Compensation Insurance (the State Insurance Fund provides its own version of this form, the U-26.3); or
2. SI-12 - Certificate of Workers' Compensation Self-Insurance (call the Board's Self-Insurance office at 518-402-0247) or GSI-105.2 – Certificate of Participation in Workers' Compensation Group Self-Insurance

Disability Benefits Law (Section 220 Subd. 8)

1. Either DB-120.1 - Certificate of Disability Benefits Insurance or the DB-820/829 Certificate/Cancellation of Insurance; or
2. DB-155 - Certificate of Disability Benefits Self-Insurance (call the Board's Self-Insurance office at 518-402-0247)

NOTES: ACORD forms are not acceptable proof of New York State Workers' Compensation or Disability Benefits Insurance coverage.

General contractors must get a workers' compensation insurance policy if they hire any subcontractors or independent contractors.

LIABILITY INSURANCE

The contractor must provide the town with liability insurance naming the Town of Babylon as additionally insured and Suffolk County as the certificate holder. In order to protect yourself and/or your property, you may also want to obtain a copy of the contractor's liability insurance.

IF YOU HAVE ANY QUESTIONS OR REQUIRE ADDITIONAL INFORMATION, PLEASE CALL THE NYS WORKERS' COMPENSATION BOARD, BUREAU OF COMPLIANCE AT (518) 486-6307