



Town of Riverhead Building Department

755 East Main Street, Riverhead, New York 11901

(631) 727-3200 Ext. 213, 268, 266, 283

Fax: 631-208-8039

Sharon E. Klos
Building Permits Coordinator

Richard P. Podlas
Building Inspector

Richard E. Gadzinski
Electrical Inspector

Jack Wherry
Inspector

Mark Griffin
Inspector

Requirements for a Manufactured or Mobile Homes Permit

1. Two (2) Page Building Permit Application (signed and notarized);
2. Disclosure Affidavit (signed and notarized);
3. Electrical Application with Dark Skies Compliance Acknowledgement, if applicable (signed and notarized)
Please review Outdoor Lighting Code, Chapter 108-246;
4. Three (3) surveys, one (1) with Health Department Approval when required, showing location of project on premises;
5. Two (2) sets of plans of the Manufactured or Mobile Home specifications, showing New York State design professional stamp and improvements.
6. Relocation of mobile homes fabricated prior to June 15, 1976 require a signed and sealed stamp of a New York state licensed architect or engineer certifying that the mobile home is strictly sound and free of heating and electrical systems hazards.
7. Mobile homes fabricated after June 15, 1976 must comply with Appendix RE of the New York State Building Code titled "Manufactured Housing Used as Dwellings".
8. Unit plans and survey dimensions must comply with Chapter 52-6 (D).
9. Mobile homes located in a mobile home park must comply with Chapter 79 of the Riverhead Town Code.
10. Approvals from Department of Environmental Conservation and Conservation Advisory Council when applicable.
11. Fee is determined based on Chapter 52 of the Town Code;
12. Processing of the application begins when there is a fully completed application and the fee is paid.

PLEASE INSERT PDF FORMATTED - TWO PAGE APPLICATION HERE

**Read this document carefully.
You may consult your attorney before completing.**

Disclosure Affidavit

STATE OF NEW YORK)

SS:

COUNTY OF SUFFOLK)

I, _____ an applicant for the following relief: _____ and being duly sworn, deposes and says: under the penalty of perjury and swear to the truth thereof.

That I understand that this affidavit is required by Section 809 of the General Municipal Law and that a knowing failure to provide true information is punishable as a misdemeanor. Being so warned, I state:

That _____ is a State Officer, is an officer or employee of Riverhead Town
(Name of Relative)
and:

Check here if not applicable (i.e., you have no relative working for the Town of Riverhead.) and please sign below before a notary public.

That this person has an interest in the person, partnership or association requesting the above stated relief.

That for the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant where he, his spouse, or their brothers, sisters, parents, children, grandchildren or the spouse of any of them.

- a. is an applicant,
- b. is an officer, director, partner or employee of the applicant,
- c. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association, applicant, or
- d. is a party to an agreement with such an application, express or implied whereby he may receive any payment or other benefit, whether or not for services rendered, dependant or contingent upon the favorable approval of such application, petition or request.
- e. That ownership of less than five (5) per cent of the stock of a corporation whose stock is listed on the New York or American Stock Exchange shall not constitute an interest for the purpose of this section.

(Signature)

Sworn to before me this _____ day

of _____, 20____

Notary Public

**Town of Riverhead
Building Department**

ZB NO. _____ 4 MONTH EXP. _____ 12 MONTH EXP. _____

**INSPECTION & CERTIFICATE OF OCCUPANCY INFORMATION SHEET FOR
MANUFACTURED OR MOBILE HOMES**

An inspection must be made by the building department within four (4) months. Applicant must notify the building department for inspections. Construction must be completed and certificate of occupancy must be obtained within twelve (12) months.

The following inspections are required. **Three day notice for inspections is necessary.**

1st Inspection: Foundation AND/OR ANCHOR PLAN TO BE approved and/or inspected prior to installation.

2nd Inspection: After Manufactured or Mobile home is installed, electrical inspection is required.

*****DO NOT INSTALL SKIRTING UNTIL INSPECTED AND APPROVED*****

After the required inspections are made, a Certificate of Occupancy must be issued prior to occupying the subject building(s). The following documents are required to be submitted after all of the work is complete:

- Final Survey (by licensed surveyor) when applicable
- Electrical Inspectors Certificate of Compliance (issued by the Town of Riverhead Electrical Inspector)
- Suffolk County Health Department Approval (if required and/or necessary)
- Plumbers Affidavit of lead content (if required and/or necessary)
- Final Floor Affidavit
- Dark Skies Compliance Acknowledgement, if applicable – Please review Outdoor Lighting Code, Chapter 108-246;

The Certificate of Occupancy will be issued after a processing period of at least Seventy-two hours (72) from the time all of the required documents are submitted to this office.

No building may be used or occupied in whole or in part, until a Certificate of Occupancy shall have been issued by the Building Inspector. (All new construction)

No building enlarged, extended or altered, or upon which work has been performed, which required a building permit, shall be occupied or used more than Thirty (30) days after completion, unless a Certificate of Occupancy shall have been issued by the Building Inspector. (All additions, alterations, etc.)

All debris created by land clearing and during construction must be removed from the property. No debris is to be used in backfill of footings and foundation or is to be buried.

The owner/contractor is responsible for all drainage and flooding issues as provided by Section 52-6 (l) of the Town Code.

The person responsible for this site must call in for all inspections listed above.

Signature: _____ **Date:** _____

LAWS OF NEW YORK, 1998
CHAPTER 439

The **general municipal law is amended by adding a new section 125** to read as follows:

125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:

1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR

2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

Implementing Section 125 of the General Municipal Law

1. General Contractors -- Business Owners and Certain Homeowners

For **businesses and certain homeowners listed as the general contractors on building permits**, proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is **ONE** of the following forms that indicate that they are:

- ◆ insured (C-105.2 or U-26.3),
- ◆ a Board-approved self-insured employer (SI-12), or
- ◆ are exempt (WC/DB-100),

under the mandatory coverage provisions of the WCL. Any residence that is not a **1, 2, 3 or 4 Family, Owner-occupied Residence** is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

2. Owner-occupied Residences

For homeowners of a **1, 2, 3 or 4 Family, Owner-occupied Residence**, proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file Form BP-1.

◆ Form BP-1 shall be filed if the homeowner of a **1, 2, 3 or 4 Family, Owner-occupied Residence** is listed as the general contractor on the building permit, and the homeowner:

- ◇ is performing all the work for which the building permit was issued him/herself,
- ◇ is 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 the homeowner perform such work, or
- ◇ has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.

◆ If the homeowner of a **1, 2, 3 or 4 Family, Owner-occupied Residence** is hiring or paying individuals a total of **40 hours or MORE** in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" Form BP-1, but shall either:

◇ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit (Form C-105.2 or Form U-26.3), 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, provide appropriate proof 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.

BP-1 (9-07) Reverse www.wcb.state.ny.us

ZB# _____

TAX MAP# _____

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

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 workers' compensation insurance coverage for such residence because (please check the appropriate box):

I am performing all the work indicated on the building permit myself.

I am not hiring, paying or compensating in any way, the individual(s) that is (are) performing all the work indicated on the building permit or helping me perform such work.

I have homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours, for all workers, per week for the work indicated on the building permit.

I also agree to either;



acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on form 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 hours 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 proof of workers' compensation 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)

Property Address: _____

Home Number: _____

Sworn to before me this ____ day of

_____, _____.

Notary Public

SCTM# _____

ZB# _____

Application for Electrical Inspection

Town of Riverhead

(631) 727-3200 EXT. 213, 268, 266, 283

Fax (631) 208-8039

Owner of Property: _____ Phone No. _____

Mailing Address: _____

Name of Contractor responsible for electrical installation: _____ Electrical License No. _____

Business Name in full: _____ Phone No. _____ Fax No. _____

Mailing Address: _____ Cell No. _____

Location of Job: _____ Hamlet: _____

State use of premises: Residential Commercial

Nature of Work: _____

Exposed Concealed New Old Area of proposed construction in total square feet: _____

Service Information:

Temp Requested

Size of Mains: _____ Feeders: _____

Service Enters Building: Overhead Underground

Application fees are made payable to the Town of Riverhead Fee: _____ Type Code: _____

APPLICATION IS HEREBY MADE to the Building Department as per Chapter 52 of the Code of the Town of Riverhead.

STATE OF NEW YORK COUNTY OF SUFFOLK

_____ being duly sworn deposes and says that he/she is the applicant above named.

He/She is the _____ of said owner or owners, and is duly authorized to perform or have performed the said work and file this application: that all statements contained in this application are true to the best of his/her knowledge and belief: and that all work will be performed in the manner set forth in this application and in the plans and specifications filed herewith.

Sworn to before me this _____ day

Of _____ 20_____

Signature of Electrician _____

Notary Public _____

Request Date:	Inspection	Remarks:

Town of Riverhead
Building Department
755 East Main Street
Riverhead, NY 11901



Phone: 631-727-3200
Ext. 213, 268, 266 or 283
Fax: 631-208-8039

Dark Skies' Compliance Acknowledgement
Town of Riverhead Lighting Ordinance Chapter 108-246

Property Owner

Property Address

Suffolk County Tax Map Number: 0600-_____-_____-_____

Permit No. ZB _____

I, _____, New York License # _____

Electrician or Homeowner

doing business as _____
Name of Business

residing (or doing business) at _____,

being duly sworn, depose and says that;

I am the Electrician for the above referenced property; that I currently have a valid New York State Electrician's License; and

I am the homeowner; and

That the Outdoor Lighting installation is complete, that said installation conforms to the provisions of Chapter 108-246 of the Riverhead Town Code and the National Electrical Code; and that I understand that the Town of Riverhead will rely on this sworn statement as a condition to issuing the Electrical Certificate of Compliance for the above described work:.

Town of Riverhead)
County of Suffolk) ss.
State of New York)

Signature: _____

False statements made herein are punishable as a class "A" misdemeanor pursuant to § 210.45 of the Penal Law, State of New York.

Sworn to before me this _____ day

of _____, 20_____.

(Notary Public, Suffolk County, New York)