

VILLAGE OF THOMASTON  
100 EAST SHORE ROAD  
GREAT NECK, NY 11023  
(516) 482-3110  
FAX (516) 829-5011

**BUILDING PERMIT LIST**

PLEASE NOTE:

Deliver all the below listed items at the same time. **The Building Department cannot accept incomplete applications nor applications not accompanied by fees.**

- The single page Application for a Permit must have both sides completed.
- Exterior Work-three (2) sets of complete drawings, Interior Work- two (2) sets of complete drawings, disclosing all necessary details and specifications, signed and sealed by a registered architect or licensed professional engineer in the State of New York. F.A.R. calculations to be included, if applicable.
- Certificate of Compliance with the New York State Energy Conservation Code, prepared and signed by a registered architect or professional engineer. (This is not required for demolition, sanitary systems or unheated structures.)
- Certificates of Insurance covering Contractor's Liability, Property Damage, Workmen's Compensation and Disability Insurance. Certificates must name the Village of Thomaston as additional insured.
- FILING FEE- schedule attached. **ALL FEES ARE NON REFUNDABLE**  
Fees are doubled for work begun prior to the issuance of a permit
- A copy of the contract or estimate for the proposed work.
- New York State Department of Environmental Conservation SEQRA form for **all new construction.**
- Disclosure Affidavit- **for all new construction**
- For DEMOLITION, a separate requirement list and application must be obtained.
- **For residential applications contractor must submit copy of valid Nassau County home improvement license.**

## **Building Department:**

### **Fees for work begun without a valid building permit are doubled:**

**Building Permit**                      **\$200 for first \$1,000 of cost  
plus \$20 per \$1,000 for the next \$24,000 of cost;  
plus \$30 per \$1,000 for the next \$150,000 of cost;  
plus \$20 per \$1,000 for the remaining cost.**

*For example, if the total cost of the job is \$200,000, the fee would be calculated as follows:*

*\$ 200 (first \$1000)  
\$ 480 (next \$24,000)  
\$4,500 (next \$150,000)  
\$ 500 (remaining \$25,000)  
\$5,680 Total Building Permit Fee*

**In addition, if the Village needs special services of outside consultants to act on permit, expense deposit required equal to \$1,500 plus \$5 per \$1,000 of cost.**

**Demolition Permit**                      **\$1,000**

**Dumpster Permit**                      **\$25 (if larger than 10 cu. yds.)**

**Construction Trailer**                      **\$350**

### **Building Permit Amendment**

**1 and 2 Family**                      **\$200 for first \$1,000 of cost;  
plus \$20 per \$1,000 for the next \$24,000 of cost;  
plus \$30 per \$1,000 for the next \$150,000 of cost;  
plus \$20 per \$1,000 for the remaining cost.;  
plus deposit, if required, as per above.**

**All Other**                      **\$200 plus \$15 per \$1,000 of cost up to \$150,000;  
plus \$20 per \$1,000 of remaining cost;  
plus deposit, if required, as per above.**

### **Building Permit Extension**

**Residential:**    **1<sup>st</sup> Extension 50% of original permit fee  
2<sup>nd</sup> Extension 50% of original permit fee**

**Commercial**    **1<sup>st</sup> Extension 25% of original permit fee  
2<sup>nd</sup> Extension 25% of original permit fee**

*\*Maximum of two (2) extensions for six (6) months each. Once expired, a new permit application and fee are required.*

### **Miscellaneous Building Permits**

**\$100 plus \$10.00 per \$1,000 of cost**

**Plumbing**                                **\$50 plus \$10 per Fixture**

**Heating Replacement or New Boiler / Hot Water Heater**

**Residential                                \$100**  
**Commercial                                \$200**

**Air Conditioning**

**Single Family                                \$200 plus \$15 per \$1,000 of cost**  
**All Other                                        \$200 plus \$15 per \$1,000 of cost**

**Generator**

**Single Family                                \$100 plus \$15 per \$1,000 of cost**  
**All Other                                        \$200 plus \$15 per \$1,000 of cost**

**Other Types of Required Permits**

**Fence    \$ 50**

**Swimming Pool                                \$300 plus \$25 per \$1,000 of cost**  
**Plus Required Special Permit from Bd. of Trustees (\$500)**

**Signs    \$75 plus \$15 per square foot**

**Restaurant License                                \$ 150**

**Permit to Conduct Canvassing  
Operations within the Village  
of Thomaston                                        \$ 500**

**Tree Removal                                        \$25 1-2 Trees (No fee if tree is dead)**

**Street Opening                                        \$ 500 plus \$5,000 deposit**

**Small Cell Site Permit**

**Up to five (5) proposed facilities located on existing poles or structures:**

**\$500, plus \$3,000 expense deposit\*\*\***

**For location on a new pole or structure:**

**\$1,000 per unit, plus \$3,000 expense deposit\*\*\***

**Annual renewal of Small Cell Site Permit:**

**\$270 per facility\*\*\*\***

over →

**In addition to the above fees:**

**For applications which require discretionary relief from a Village board or agency, the application fee shall also include the fee customarily charged by the Village for such application.**

**For all applications, an advance deposit of \$3,000 shall be included with the application fee in the event the Village requires the services of professional consultants for the review of the application. Any unused portion of such deposit shall be refunded.**

**Certificate of Occupancy or Completion with Special Inspection**

<b>Single Family</b>	<b>\$125</b>
<b>Two Family</b>	<b>\$200</b>
<b>Others</b>	<b>Greater of \$300 per floor level or \$50 per 1,000 sq. ft.</b>

<b>C.O. SEARCH - Residential</b>	<b>\$50</b>
<b>C.O. SEARCH – Non-Residential</b>	<b>\$100</b>

**Application to Zoning Board of Appeals**

<b>Residential</b>	<b>\$500 plus \$3,000 expense deposit</b>
<b>Commercial</b>	<b>\$3,000 plus \$3,500 expense deposit</b>

**All applications to the Board of Trustees  
for any type of permit i.e., Special Use  
Permit. Etc. \$500**

**Incentive Zoning Permit \$1,000**

**Subdivision of Land:**

**Preliminary Subdivision Approval \$1,250 per lot**

**Final Subdivision Approval \$1,250 per lot**

**Waiver of Subdivision Approval \$1,250 per lot, but not to exceed \$5,000**

**In addition to the foregoing fees, an expense deposit in an amount to be  
determined by the Village Clerk, but not less than \$5,000.**

**PERMITTED WORK HOURS  
VILLAGE OF THOMASTON**

**MONDAY – FRIDAY 8:00 AM - 8:00 PM  
SATURDAY 10:00 AM – 6:00 PM**

**NO WORK PERMITTED ON SUNDAYS AND LEGAL HOLIDAYS**

**VILLAGE OF THOMASTON**  
**DISCLOSURE AFFIDAVIT**  
General Municipal Law § 809

\_\_\_\_\_  
**In the Matter of the Application of**

\_\_\_\_\_  
**STATE OF NEW YORK:**  
**COUNTY OF NASSAU**

\_\_\_\_\_  
Being duly sworn, deposes and says:

1. I am the (applicant) with respect to (owner of) the premises which are the subject of (cross out whichever is not applicable) the within application.
2. I make this affidavit for the purpose of comply with the requirements of General Municipal Law § 809
3. No officer of the State of New York, and no officer or employee of the County of Nassau, the Town of north Hempstead or the Village of Thomaston, and no party officer of any political party, had an interest in the within application with the meaning of General Municipal Law § 809, except as stated hereinafter (if none, state "NONE"):

NAME	ADDRESS	POSITION	NATURE OF
INTEREST			
N/A			

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

4. In the event there is a change in the information set forth herein between the date hereof and the final determination of this application, a supplemental affidavit will be filed to provide that further information.

\_\_\_\_\_  
Signature

Sworn to before me on

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public



**VILLAGE OF THOMASTON**  
**DEPARTMENT OF BUILDINGS, SAFETY INSPECTION AND CODE ENFORCEMENT**  
**100 EAST SHORE ROAD, GREAT NECK, NY 11023**  
**516-482-3110 FAX: 516-829-5011**

**APPLICATION FOR A PERMIT**

Owner(s) \_\_\_\_\_ Check One: ☐ Private ☐ Corporate  
Full Name/DBA: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

Applicant (Other than Owner) \_\_\_\_\_ (check one ) Private ☐ Corporate ☐  
Full Name/DBA: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

Responsible Corporate Officer:

Name: \_\_\_\_\_ Position \_\_\_\_\_

Does the owner(s) of the lot(s) covered by this application own any land adjacent to, or contiguous with such lot?  
☐ Yes ☐ No

If so, provide details \_\_\_\_\_

Brief Description of work: \_\_\_\_\_

Construction cost: \$ \_\_\_\_\_

**PROPERTY INFORMATION**

Lot Area \_\_\_\_\_ sq. ft. Lot coverage \_\_\_\_\_ %

Floor Area Ratio \_\_\_\_\_

IS THIS PERMIT TO LEGALIZE EXISTING WORK ☐ Yes ☐ No

WILL ANY TREES BE CUT DOWN? ☐ Yes TREE PERMIT # \_\_\_\_\_ ☐ No

**PERMITTED WORK HOURS: MONDAY - FRIDAY 8:00 AM - 8:00 PM**  
**SATURDAYS 10:00 AM - 6:00 PM**

**CONSULTANTS / CONTRACTORS**

☐ Architect: ☐ Engineer:

Name: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

**CONTRACTORS:**

**General Construction**

Name: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

**Plumbing**

Name: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

**Electrical**

Name: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

**HVAC**

Name: \_\_\_\_\_

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

Phone No: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_  
Beeper \_\_\_\_\_ Fax \_\_\_\_\_

Location of Work - Number \_\_\_\_\_ Street \_\_\_\_\_  
Sec: \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District \_\_\_\_\_

**TO BE COMPLETED BY VILLAGE STAFF, FOR OFFICE USE ONLY**  
**Type of Permit (check whichever type applies)**

**BUILDING**  
☐ New Building  
☐ Addition  
☐ Alteration  
☐ Amendment  
☐ Site Plan

**USE**  
☐ Change of Use  
☐ Restaurant  
☐ Retail Food  
☐ Entertainment

**MISC**  
☐ Plumbing  
☐ Heat/Fuel  
☐ Demolition  
☐ Fence  
☐ Other \_\_\_\_\_  
☐ Road Opening  
☐ Curb Cut  
☐ Tree Removal

Permit Number: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Date of Issue: \_\_\_\_\_  
Date of Expiration: \_\_\_\_\_  
Fee Paid: \$ \_\_\_\_\_

**AFFIDAVIT OF PROPERTY OWNER / AUTHORIZATION**  
(ALL OWNERS must sign either as owner or applicant.)

STATE OF NEW YORK }  
COUNTY OF NASSAU } SS:

(I) (We) \_\_\_\_\_ being duly sworn, state:

**(COMPLETE ITEM 1, 2, or 3 as applicable then item 4.)**

1. (I am) (We are) the owner(s) of the property described in this application known as \_\_\_\_\_, and designated \_\_\_\_\_ on the Nassau county Land and Tax Map as: SEC. \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT(S) \_\_\_\_\_
2. If the applicant is a corporation, the deponent is a officer thereof, to wit the \_\_\_\_\_, and is authorized by the Board of Directors of the \_\_\_\_\_ corporation to execute this application on behalf of the corporation.
3. If the applicant is a partnership, the deponent, \_\_\_\_\_ is a general partner thereof, and has authority to execute this application in the name of partnership.
4. (I) (We) hereby authorize \_\_\_\_\_ to submit this application.

\_\_\_\_\_  
(Signature of Owner)

Sworn before me this \_\_\_\_\_ day  
Of \_\_\_\_\_ 200

\_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_  
(Notary Public)

**ALL STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE  
TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

Sworn before me this \_\_\_\_\_ day  
Of \_\_\_\_\_ 200

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Notary Public)

**FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A  
CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE  
PENAL LAW OF THE STATE OF NEW YORK**

(FOR OFFICE USE ONLY)

Certificate of Occupancy issued (date) \_\_\_\_\_

Certificate of Completion issued (date) \_\_\_\_\_

**NO WORK MAY START UNTIL PERMIT HAS BEEN  
RECEIVED BY APPLICANT**

**THIS APPLICATION WHEN APPROVED BECOMES YOUR PERMIT**

Worker's Compensation/Disability certificate provided ? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If no, is waiver filed? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**APPROVAL BY THE BUILDING INSPECTOR SUBJECT TO THE  
APPROVAL OF THE BUILDING COMMISSION**

BUILDING INSPECTOR	DATE
_____	_____

**APPROVED BY THE DESIGN REVIEW BOARD**

CHAIRPERSON	DATE
_____	_____

**APPROVED BY THE BUILDING COMMISSION**

NAME	DATE
_____	_____

NAME	DATE
_____	_____

NAME	DATE
_____	_____

**Not valid unless signed and dated herein. This permit expires one (1) year after  
issuance for residential construction and two (2) years after issuance for all other  
construction. Construction must be in progress within three (3) months of the  
date of issuance for this permit to remain in force.**



**BUILDING PERMIT  
RESIDENTIAL PROPERTY  
DEPARTMENT OF ASSESSMENT  
NASSAU COUNTY**

240 Old Country Road, Mineola, NY 11501

TOWN - CITY - VILLAGE OF: \_\_\_\_\_

NBHD# (ASSESSOR USE ONLY)

DATE REC'D (ASSESSOR USE ONLY)

SECTION		BLOCK	LOT (S)	SCH DIST #	PERMIT #	SPECIFIC ZONING DESIGNATION
Location of Building		N.E.S.W. SIDE OF (OR CORNER OF)			N.E.S.W. SIDE OF	
ADDRESS OF PROPERTY				Check one	NAME OF BUSINESS	
CITY, TOWN, VILLAGE			ZIP	<input type="checkbox"/> OWNER OR <input type="checkbox"/> LESSEE	CONTACT PERSON/OWNER	
ESTIMATED COST OF CONSTRUCTION:				ADDRESS		
WORK MUST BEGIN BY				PRINCIPLE TYPE OF CONSTRUCTION	CITY, STATE, ZIP	
					PHONE	
PERMIT EXP DATE				<div style="text-align: center;">IF YOU WISH TO GROUP OR APPORTION LOTS PLEASE CALL 516-571-1500 FOR FURTHER INFORMATION</div>	EMAIL	
LOT SIZE S.F.						
# BLDGS ON LOT						
DETAILED DESCRIPTION OF WORK (PLEASE PRINT CLEARLY)						
*INCLUDING, BUT NOT LIMITED TO: LOCATION, TYPE AND DIMENSIONS OF IMPROVEMENT						
PERMIT TYPE - CHECK ALL ITEMS THAT APPLY					DOES RESIDENCE HAVE THE FOLLOWING	
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION (CHANGE IN S.F.) <input type="checkbox"/> DEMOLITION <input type="checkbox"/> ALTERATION (NO CHANGE IN S.F.) <input type="checkbox"/> MAINTAIN (PRE-EXISTING) <input type="checkbox"/> RECONSTRUCTION <input type="checkbox"/> DECK, TERRACE, PORCH, CARPORT <input type="checkbox"/> DORMERS <input type="checkbox"/> OTHER _____</div><div><input type="checkbox"/> FIRE DAMAGE <input type="checkbox"/> GARAGE/ OUT BUILDING <input type="checkbox"/> HVAC <input type="checkbox"/> PLUMBING <input type="checkbox"/> RELOCATION <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> TENNIS COURT <input type="checkbox"/> CHANGE IN USE</div></div>					CENTRAL AIR    YES <input type="checkbox"/> NO <input type="checkbox"/>	
					FINISHED ATTIC    YES <input type="checkbox"/> NO <input type="checkbox"/>	
					BASEMENT FINISH	
					1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> FULL <input type="checkbox"/>	
PROPOSED TOTAL PLUMBING FIXTURES						
FLOOR/FIXTURE	BASEMENT	1ST FLOOR	2ND FLOOR	3RD FLOOR		
BATHROOM SINK						
TOILET						
BATHTUB						
STALL SHOWER						
BIDET						
KITCHEN SINK						
WET BAR						
NUMBER OF EXISTING AND PROPOSED BATHS						
NUMBER OF EXISTING FULL BATHS			NUMBER OF PROPOSED FULL BATHS			
NUMBER OF EXISTING HALF BATHS			NUMBER OF PROPOSED HALF BATHS			
HALF BATH EQUALS TWO FIXTURES, FULL BATH EQUALS THREE OR MORE FIXTURES						
NEW C/O NEEDED		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
VARIANCE OBTAINED		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
CONSTRUCTION/RENOVATION IN EXCESS OF 50%		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
SURVEY ENCLOSED		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
PLEASE ATTACH ALL PERMITS & SURVEY IF AVAILABLE						
DATE OF GRANTING OF PERMIT _____				Signature of Applicant/Contact Person - Sign & Print		
SEPARATE APPLICATION SHALL BE MADE FOR EACH BUILDING				Address of Applicant/Contact Person _____ Telephone _____		
FIELD REPORT ON REVERSE						