

# VILLAGE OF WOODBURY BUILDING DEPARTMENT

**Office Location:** 455 ROUTE 32, HIGHLAND MILLS, NY 10930

**Mailing Address:** P.O. Box 546, Central Valley, NY 10917

Phone: (845) 928-6911 ext. 51 Fax: (845) 928-7263

Email: buildingdepartment@villageofwoodbury.com

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## **SOLAR PANEL INSTALLATION**

### **Commercial**

Revised 06/07/21

### **Permit Requirements:**

#### **1. Building Permit Application:**

- a) Submit completed building permit application.
- b) Submit **TWO HARD COPIES** of Engineered Certification & Diagram to confirm structural adequacy of roof.
- c) Submit **TWO HARD COPIES** of manufacturer's specifications: include warning signage location.
- d) Submit insurances from company performing the installation (Liability, NYS Workman's Comp and NYS Disability).
- e) Submit **TWO HARD COPIES** of Elevation Drawing for panel location on structure.
- f) **Submit ONE DIGITAL COPY OF ALL OF THE ABOVE ON A THUMB DRIVE.**

#### **2. Fee:**

Check or Money Order payable to: **Village of Woodbury**

Cost of Construction:

**Fee is based on \$15.00 per \$1,000 cost of construction (rounded to the nearest thousand) including labor & material.**

**Plus \$100.00 for Certificate of Occupancy Inspection.**

#### **3. Inspections Required:**

- a) After panels are installed and electrical inspection is received, prior to system being energized.

**A REPRESENTATIVE MUST BE ON-SITE FOR INSPECTION**

It is **YOUR** responsibility to call for a **FINAL INSPECTION** by the Building Inspector in order to receive the C of O.

**PLEASE NOTE:** Building Permits **EXPIRE** in two years from date of issue.

# VILLAGE OF WOODBURY, BUILDING DEPARTMENT

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## COMMERCIAL SOLAR PANEL INSTALLATION PERMIT APPLICATION

PERMIT # \_\_\_\_\_

COST OF WORK: \$ \_\_\_\_\_  
Total cost of labor and materials

APPLICATION FEE: \$ \_\_\_\_\_  
Based on \$15 per \$1,000 of total cost of work,  
PLUS \$100.00 fee for Certificate of Occupancy  
(Rounded to nearest thousand)  
Minimum Fee \$ 115.00

CHECK# \_\_\_\_\_

### APPLICATION IS FOR: SOLAR PANEL INSTALLATION

All Construction Shall Conform to Current New York State Building Codes & Village of Woodbury Zoning Codes

Description of Work: (Including Sizes) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PROPERTY DESCRIPTION

Street address: \_\_\_\_\_

TAX MAP: SECTION – BLOCK – LOT \_\_\_\_\_ ZONED AS: \_\_\_\_\_

Type of Construction: Wood  Metal  Concrete  Other \_\_\_\_\_

Present use of property \_\_\_\_\_

Intended use of property \_\_\_\_\_  No Change

Sewage Service  Village/Town  Private (Septic)

Source of Water  Village/Town  Private (Well or Other)

	NAME	ADDRESS	PHONE#
Owner of Premises:	_____	_____	_____

Applicant: \_\_\_\_\_

Contractor: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: IT IS YOUR RESPONSIBILITY TO CALL FOR INSPECTIONS DURING  
CONSTRUCTION AND FOR FINAL CERTIFICATE OF OCCUPANCY UPON COMPLETION.**

Phone: (845) 928 – 6911 Ext. 51 Fax: (845) 928 7263

This application is hereby:	<input type="checkbox"/> APPROVED	OR	<input type="checkbox"/> DENIED
CONDITIONS	_____		
COMMENTS:	_____ _____ _____		
DATE:	_____	SIGNED:	_____

# **RESIDENTIAL**

## **REQUIRED INSURANCE**

### **Liability:**

\_\_\_ Homeowner (DIY'er), Check Home Insurance

\_\_\_ Contractors, Acord certificate holder must be the Village of Woodbury  
\$1 M Gen. Aggregate Limit,  
\$1 M Products – Completed &  
\$ 500,000 – Each Occurrence

### **Workers' Compensation:**

\_\_\_ Homeowner (DIY'er) Form BP – 1 (Available from Bldg. Dept.)  
<http://www.wcb.ny.gov/content/main/forms/bp-1.pdf>

\_\_\_ Contractors (No employees) get form (CE – 200) from [www.wcb.ny.gov](http://www.wcb.ny.gov)

\_\_\_ Contractors With Employees: Obtain forms from your ins. carrier:

Form # C – 105.2 or U – 26.3 **OR** Self-Insurance GSI – 105.2 or SI – 12

### **Disability Benefits:**

\_\_\_ Homeowner (DIY'er) Form BP – 1 (Available from Bldg. Dept.)  
<http://www.wcb.ny.gov/content/main/forms/bp-1.pdf>

\_\_\_ Contractors (No Employees) get form (CE – 200) from [www.wcb.ny.gov](http://www.wcb.ny.gov)

\_\_\_ Contractors With Employees: Obtain forms from your ins. carrier:

Form # DB – 120.1 **OR** Self-Insurance form DB - 155

**BUILDING PERMITS SHALL NOT BE ISSUED  
WITHOUT PROPER INSURANCE FORMS**

Required under General Municipal Law §125, & WCL §57 & §220 for  
Workers' Compensation and Disability Benefits

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(Phone)

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BUILDING DEPARTMENT

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## **APPROVED ELECTRICAL INSPECTION AGENCIES –** **Effective 06/09/2021**

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### **\*COMMONWEALTH ELECTRICAL INSPECTION SERVICE, INC.**

James Cocks  
1209 Route 17A, P.O. Box 1291  
Greenwood Lake, NY 10925

Phone - 845-325-0158  
Email - [jfcloul@yahoo.com](mailto:jfcloul@yahoo.com)

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### **\*ELECTRICAL UNDERWRITERS OF NEW YORK**

Ernie Bello  
50 HyVue Drive  
Newburgh, NY 12550

Phone - 845-569-1759  
Email - [ernie@eu-ny.com](mailto:ernie@eu-ny.com)

John Taylor

Phone - 845-597-5072  
Email - [chelseat84@gmail.com](mailto:chelseat84@gmail.com)

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### **\*INSPECTIONS ON TIME**

Emmanouil Zervakis  
809 Highland Lake Rd.  
Middletown, NY 10940

Phone - 845-233-6711  
Fax - 845-262-0732  
Email - [manny@inspectionsontime.com](mailto:manny@inspectionsontime.com)

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### **\*N.Y. BOARD OF ELECTRICAL INSPECTORS**

Gerald Caliendo  
203 Purgatory Road  
Campbell Hall, NY 10916

Phone - 845-294-7695  
Fax - 845-294-0026  
Email - [nybeil@live.com](mailto:nybeil@live.com)

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### **\*NY ELECTRICAL INSPECTIONS & CONSULTING**

John W. Wierl  
1 Wedgewood Lane  
Middletown, NY 10940

Phone - 845-343-6934  
Fax - 845-343-4834  
Email - [jwierlnyeic@gmail.com](mailto:jwierlnyeic@gmail.com)

Andrew Traverse

Phone - 845-343-6934  
Email - [andytraverse92@yahoo.com](mailto:andytraverse92@yahoo.com)

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**\*SWANSON CONSULTING INC.**

Joe Swanson  
P.O. Box 1361  
Northville, NY 12134

Phone - 845-496-4443  
Email - [service@swansonconsulting.biz](mailto:service@swansonconsulting.biz)

John Hamilton  
Adam Frank

Phone - 845-549-0708  
Phone - 845-494-6255

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**\*SWITCH-ON-ELECTRIC**

Frank X. Schmaus  
P.O. Box 191  
Bloomingburg, NY 12721

Phone - 845-733-4926  
Email - [sgsfxs@hotmail.com](mailto:sgsfxs@hotmail.com)

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**\*TRI-STATE INSPECTION SERVICES, INC.**

Victor Ambrosio  
P.O. Box 1034  
Warwick, NY 10990

Phone - 845-544-2180  
Fax - 845-544-7257  
Email - [theoffice@tristateinspec.com](mailto:theoffice@tristateinspec.com)