

VILLAGE OF UPPER NYACK
328 NORTH BROADWAY
UPPER NYACK, NY 10960
INCORPORATED 1872

Tel. 845-358-0084 FAX. 845-358-0741

www.uppernyack-ny.us

BUILDING PERMIT APPLICATION FOR
ABOVE GROUND POOLS AND HOT TUBS

PART 1: SUBMISSION MATERIALS

Submit the following:

- 2 copies of this application
- 1 copy of deed to current owner
- 2 copies of a current survey showing the location and size of the proposed above ground pool or hot tub, equipment (ie: filtering systems, heater, etc...), any related deck, patio or walkway construction, and proposed fencing and pool screening. Include all distances from lot lines.
NOTE: Above ground pools and hot tubs (including all equipment) are prohibited in all required Yards and within the Front Building Setback. *See Village of Upper Nyack Zoning Law § 4.5.6.1.*
- Copy of pool brochure, along with the manufacturer's specifications, and installation instructions, including cover, if applicable.
- Proof of compliance with ASTM F 1346 reference standard for all safety covers.
- Contractor Documentation: Rockland County License, proof of General Liability insurance coverage and Workers Compensation Insurance coverage. Proof of insurance **must** show the Village as an additional insured.

Further information may be required by the Building Department if necessary for review of this application.

PART 2: PROPERTY INFORMATION

Project Street Address: _____

County Tax Id. No. _____ Zoning District: _____

Owner: _____

Address: _____

Phone #: _____ Email: _____

Agent (if applicable): _____

Address: _____

Phone #: _____ Email: _____

Description of the Proposed Work:

Deck or Patio: (describe location and materials)

Proposed Screening: (describe)

Pool Discharge: (method and location)

Pool/Hot Tub Manufacturer:

Estimated Cost of Construction: _____

Method of Sewage Deposal (check applicable): ☐ public sewer ☐ onsite septic

Distance to nearest stream, river or waterway_____

PART 3: CONTRACTOR INFORMATION

General Contractor	
Name	
Address	
Phone	
Email	
Mechanical Contractor / Plumber	
Name	
Address	
Phone	
Email	
Electrician	
Name	
Address	
Phone	
Email	
Other	
Name	
Address	
Phone	
Email	

PART 4: OWNER/APPLICANT CERTIFICATION

OWNER-APPLICANT CERTIFICATION

I, _____, hereby certify that I am the (* _____)
owner in the fee simple of premises located at:

I hereby certify that the statements of facts contained in this application are true to the best of my knowledge and belief.

Owner Signature: _____

Owner Name: _____

Sworn to before me this ____ day of _____ 20__.

Notary Public

NON-OWNER APPLICANT'S CERTIFICATION

I, _____, hereby certify that I am the applicant herein and that I make this application with the knowledge, authorization and consent of the owner of the premises. I hereby certify that the statements of facts contained in this application are true to the best of my knowledge and belief.

Applicant Signature: _____

Applicant Name: _____

Sworn to before me this ____ day of _____ 20__.

Notary Public

CERTIFICATION OF OWNERSHIP/OWNER'S CONSENT

I, _____, hereby certify that I am the (* _____)
owner in the fee simple of premises located at:

I hereby authorize _____ to make this application and I understand that any decision on this application is binding on the Property.

Owner Signature: _____

Owner Name: _____