

REQUIREMENTS FOR SUBMISSION OF AN APPLICATION
FOR
DESIGN REVIEW BOARD MINOR APPLICATION

1. Application and fee (\$50) is filed with the Building Department. After review by the Inspector for compliance with zoning, it will be forwarded to the Village Clerk for referral to the Design Review Board.
2. Provide color photographs of the existing structure or building to be altered depicting current conditions of the structure or building. The photographs should also depict the materials to be altered or replaced.
3. Samples of all materials proposed and cut sheets identifying the make and model of each material.
4. The Building Inspector or Board shall be entitled to require the applicant to provide any additional plans deemed necessary for a proper review of the application.

NOTE: ALL OF THE ABOVE DOCUMENTS MUST BE SUBMITTED BEFORE ANY ACTION WILL BE TAKEN ON YOUR APPLICATION.

YOU ARE REQUIRED TO CONTACT THE BUILDING DEPARTMENT FOR THE NECESSARY INSPECTIONS FOR SAID PERMIT.

Appointment is to be made with the Building Inspector for final inspection. A Fire Underwriter's Certificate is required where necessary.

INC. Village of Russell Gardens
6 Tain Drive, Great Neck, NY 11021
516-482-8246

Permit No: _____

CO/CC No: _____

Village of Russell Gardens
6 Tain Drive
Great Neck, NY 11021

APPLICATION FOR DESIGN REVIEW BOARD

ALL FEES ARE DUE AT THE TIME OF FILING AND ARE NON-REFUNDABLE

TO BE MADE OUT ON BOTH SIDES. Please see attached requirements which must accompany this application (**Incomplete applications will be returned.**).

The New York State Law requires that a Certificate of Workers Compensation Insurance, General Liability and Certificates of Disability be filed with this application as well.

Application is hereby made to the Design Review Board of the Village of Russell Gardens for the approval of the detailed statement and plans herewith submitted for the construction herein described.

New Building _____ Addition _____ Alteration _____ Demolition _____ Repair _____

ADDRESS: _____

ZONING DISTRICT: _____

SECTION: 2 BLOCK: _____ **LOT(S)** _____

DESCRIPTION OF WORK: _____

Estimated Construction Cost: _____

Total Floor Area of Proposed Building or Alteration: _____

Total Existing Building Area _____

No. Square Feet Additional Habitable Space: _____

Identify Required Variances: _____

Name & Address of Owner: _____

Telephone: _____ E-Mail Address: _____

Name & Address of Architect: _____
 _____ Phone No: _____

Name & Address of Contractor: _____
 _____ Phone No: _____

Contractor's Nassau County Home Improvement License: _____

STATE OF NEW YORK }
 } SS:
 COUNTY OF NASSAU }

_____ being duly sworn says he/she is _____
 _____ of the property described above.
 OWNER

That all statements made in the application are true to the best of his/her knowledge and belief.

Sworn to me this _____ day of _____, 2_____

NOTARY

APPLICANT

PERMIT NO: _____ DATED: _____ CONST. COST: _____

FEE: _____

_____ Building Inspector

This application is subject to all terms & conditions of: _____

(Village office use only)

Final Survey Dated: _____ Electrical Certificate No: _____

Additional Building Permit Fee of: _____ Required

I have examined this application and the accompanying Final Survey & Electrical Certificate (here applicable) and have found tem to be in order and thereby authorize the issuance of a:

Certificate of Occupancy Certificate of Completion

Signed: _____, Bldg Inspector

Dated: _____

(Design Review Board use only)

I have examined this application and have determined that it is a (check one)

| | |
|--------------------------|--------------------------|
| MAJOR APPLICATION | MINOR APPLICATION |
| <input type="checkbox"/> | <input type="checkbox"/> |

Signed: _____ DRB Dated: _____