

TOWN OF GLENVILLE
18 Glenridge Road, NY 12302-4518
(518) 688-1200, Ext. 405 ~ Fax (518) 384-0140
www.townofglenville.org

**APPLICATION FOR
DECK ~ PORCH**

**A detailed plot plan must be submitted with this application
Please read the supplemental information prior to applying for a building permit.**

Date _____

1) **Building Site Address** _____

2) **Does this deck provide access (direct or indirect) to a swimming pool?** Yes _____ No _____

If yes, this deck must meet the barrier requirements per the NYS Building Code.

Instructions can be found attached to the supplemental information for swimming pools – in particular the pool barriers and gates section

3) **Type of Deck:**

_____ Attached to dwelling Dimensions _____

_____ Freestanding (minimum of 10' to dwelling) Dimensions _____

_____ Swimming Pool Deck Dimensions _____

4) **Property Owner's Name** _____

Phone _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

5) **Contractor's Name** _____ **Phone** _____

(All contractors must provide proof of workers compensation and disability insurance)

Mailing Address _____ **City** _____ **State** _____ **Zip** _____

6) **Construction Data: (completion of this portion is required in addition to plans)**

Size and depth of footings _____ Type of footing forms _____

Size and spacing of posts _____ Size of beams _____

Size and spacing of joists _____

Is the deck off a cantilever? Yes OR No If yes, how will joists be supported? _____

Height of deck off ground _____ Height of guardrail _____

7) **Estimated Value Of All Work** (labor and materials) \$ _____

8) **Certification:**

I certify that the construction plans and all other information submitted as part of this permit application are accurate.

Signature Of Property Owner _____

(Contractor signature accepted with a copy of the signed agreement with the property owner)

FOR OFFICE USE ONLY:

Date Approved: _____ Fee: _____ Date Denied: _____

Authorized Signature: _____

Notes or Comments: _____