

TOWN OF EASTCHESTER BUILDING DEPARTMENT

40 Mill Road
Eastchester, NY 10709

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www.eastchester.org

POOL PERMIT APPLICATION PACKAGE One- and Two-Family Residences

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NOTES:

- When submitting an application, please only include pages relevant to your application. Do not include instruction sheets.
- When manufacturer's information, i.e. specifications, catalogue cuts, drawings, etc. are submitted as part of the application, only submit project specific information. Any prototype or generic information will not be reviewed or accepted.
- For the purposes of this application, the term pool shall also include the term spa.

Permitted Hours of Construction: 8:00 am–6:00 pm, Monday–Friday

SUBMISSION REQUIREMENTS FOR POOL PERMITS One- and Two-Family Residences

ABOVE-GROUND POOLS

1. Submit the following information:
 - a. Pool Permit Application
 - b. Application Fee: \$150.00
 - c. Affidavit of Ownership
 - d. Three collated sets of the following information:
 - A property survey or site plan* of the property showing: (see note regarding required plans below)
 - The proposed location of the above-ground pool
 - The dimensions of the above-ground pool
 - The distance of the outer-edge of the pool from the rear property line, the side property lines and the residence.
 - The proposed location of all pool equipment (e.g., pump and filters). If located within a side yard, the pool equipment must meet the minimum required side yard setbacks for the zone within which the residence is located (see regulations below)
 - The location and height of proposed fencing, if any
 - The location of all proposed patios, decks, etc., if any
 - The location of proposed stormwater facilities (e.g., drywells), if any
 - Construction details for all proposed patios, decks, etc., if any
 - Stormwater management calculations, in accordance with the Zoning Law of the Town of Eastchester, for any net increase in impervious surfaces on the property, if any (see below)
 - Catalogue cut-sheets of the proposed fencing
 - Manufacturer's specifications for the proposed above-ground pool
- ***Note:**
 - The plans do not need to be prepared by an engineer or architect if you are proposing an above-ground pool only (e.g., are not proposing a deck, patio, etc.)
 - The plans must be prepared by an engineer or architect if you are proposing a deck, patio or other site features along with the above-ground pool.
2. Building permit fee: \$100 for the first \$1000 of estimated construction costs plus \$15 for each additional \$1000 of estimated construction costs or any part thereof
3. Once the permit has been issued, construction is complete and all inspections have passed, the applicant must apply for a Certificate of Compliance (CC)

SUBMISSION REQUIREMENTS FOR POOL PERMITS

One- and Two-Family Residences

IN-GROUND POOLS:

1. Submit the following information:
 - a. Pool Permit Application
 - b. Application Fee: \$150.00
 - c. Affidavit of Ownership
 - d. Three collated sets of the following information:
 - A property survey or site plan of the property (prepared by an architect or engineer licensed in the State of New York) showing:
 - The proposed location of the in-ground pool
 - The dimensions of the in-ground pool
 - The distance of the pool from the rear property line, the side property lines and the residence, measured from the water's edge
 - The proposed location of all pool equipment (e.g., pump and filters). If located within a side yard, the pool equipment must meet the minimum required side yard setbacks for the zone within which the residence is located (see pool regulations below)
 - The location and height of proposed fencing
 - The location of all proposed patios, decks, etc., if any
 - The location of all proposed stormwater facilities (e.g., drywells), if any
 - Construction details for all proposed patios, decks, etc., if any
 - Stormwater management calculations, in accordance with the Zoning Law of the Town of Eastchester, for any net increase in impervious surfaces on the property (see note on following page)
 - Catalogue cut-sheets of the proposed fencing
 - Manufacturer's specifications for the proposed in-ground pool
2. Building permit fee: \$100 for the first \$1000 of estimated construction costs plus \$15 for each additional \$1000 of estimated construction costs or any part thereof
3. Once the permit has been issued, construction is complete and all inspections have passed, the applicant must apply for a Certificate of Compliance (CC)

Regulations for Pools in One- and Two-Family Residential Districts

A swimming pool requires a building permit and must comply with the requirements of the Zoning Law of the Town of Eastchester and the 2020 International Residential Code as indicated below. A swimming pool is defined as any structure intended for swimming or recreational bathing capable of containing water over 24 inches deep, including in-ground, above-ground and on-ground swimming pools, hot tubs and spas.

Town of Eastchester Zoning Law requirements:

- ❑ Pools are only permitted within rear yards.
- ❑ Minimum setback requirements by zoning district for residential outdoor pools are listed in the table below.
- ❑ Setbacks are measured from the exterior wall of the residence. Decks are permitted within the setbacks.

Minimum Setback Requirements for Pools

	R5	R6	R7.5	R10	R15	R20	R3
Side Yard Setback	10	10	10	10	12	15	10
Rear Yard Setback	10	10	10	10	12	15	10
Distance to Principle Building	10	10	12	14	16	18	10

- ❑ Minimum setback requirements by zoning district for pool equipment are listed in the table below.

Minimum Setback Requirements for Pool Equipment

	R5	R6	R7.5	R10	R15	R20	R3
First Side Yard Setback	5	5	6	8	12	15	5
Second Side Yard Setback	5	5	6	8	12	15	5
Side Yard Adjoining a Street	5	5	6	8	12	15	5
Rear Yard Setback	5	5	6	8	12	15	5

Note: See Section 9.S. of the Zoning Law for a complete list of requirements for swimming pools in residential areas.

New York State Building Code Requirements

All pool applications filed after May 12, 2020 shall conform with the requirements of Section R326 of the 2020 Residential Code of New York State.

Stormwater Calculations

- ❑ Stormwater facilities (e.g., drywells) must be provided to accommodate stormwater runoff from any net increase in impervious surfaces on the site based on zero increase in the rate of discharge for the site and designed for a 50-year storm event (7.55 inches of rainfall).
- ❑ To determine increased stormwater volumes and required storage capacities for drywells/rechargers multiply the total increase of impervious surface area (in sf) by .235 to determine the number or gallons that must be accommodated.

POOL PERMIT APPLICATION

Application Fee: \$ _____ Date Received: _____

Building Permit Fee: \$ _____

Legalization Fee: \$ _____

Total Fee Due: \$ _____ Date Received: _____

Property Address: _____

Section: _____ Block: _____ Lot(s): _____ Zone: _____

Property Owner Name: _____

Property Owner Address: _____

Phone #: _____ Email: _____

Contractor Company Name: _____

Contractor Company Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Office Phone #: _____ Email: _____

Cell Phone#: _____

Description of Proposed Scope of Work: _____

Estimated Cost of Construction/Installation*: \$ _____

*Note: The estimated cost of construction shall include all costs related to the above described project and shall include design, installation and all other materials and labor that is utilized, whether donated or contracted, including that of the property owner. If a reasonable estimate for construction is not provided, the amount shall be determined by the Building Inspector. Before a CC can be issued, a signed and notarized Affidavit of Final Construction Costs must be submitted to the Building Department. If the actual cost of construction is greater than the estimated cost of construction, additional fees will be required.

Clearly Print Name: _____ Sign Name: _____

INSURANCE REQUIREMENTS

In accordance with Workers' Compensation Law §57 and §220(8)

CONTRACTORS MUST PROVIDE THREE (3) SEPARATE INSURANCE CERTIFICATES:

1. LIABILITY INSURANCE: ONLY Liability Insurance is permitted on the **ACORD** form.

2. WORKERS' COMPENSATION INSURANCE, ONLY the following forms are accepted:

- **CE-200:** Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage. (Instructions on how to create Exemption form are attached)
- **C-105.2:** Certificate of Workers' Compensation Insurance
Note: The State Insurance Fund provides its own version of the form, the **U-26.3**
- **SI-12:** Certificate of Workers' Compensation Self-Insurance
- **GSI-105.2:** Certificate of Participation in Workers' Compensation Group Self-Insurance

3. DISABILITY INSURANCE, ONLY the following forms are acceptable:

- **CE-200:** Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage. (Instructions on how to create Exemption form are attached)
- **DB-120.1:** Certificate of Disability Benefits Insurance
- **DB-155:** Certificate of Disability Benefits Self-Insurance

HOME OWNERS:

For Building Permits only, home owners may apply to work on their residences.

The application for a Certificate of Attestation of Exemption, Form **CE-200**, from Workers' Compensation and/or Disability and Paid Family Leave Benefits coverage may only be completed by entities with no employees and/or out-of-state entities obtaining a contract or license in which all the work is being performed outside of New York State. (Instructions on how to create Exemption form are attached)

Note: On all insurance certificates, the **CERTIFICATE HOLDER** must be listed as:

**Town of Eastchester
40 Mill Road
Eastchester, NY 10709**



Certificate of Attestation of Exemption

Instructions for obtaining and filing a Certificate of Attestation of Exemption from Workers' Compensation and/or Disability and Paid Family Leave Benefits (CE-200) through New York Business Express

Follow these steps:

1. Go to businessexpress.ny.gov.
2. Select **Log in/Register** in the top right-hand corner. A NY.gov Business account is required.
3. If you **do not have** a NY.gov business account, go to **step 4** to set up your account. If you **have** a NY.gov log-in and password, go to **step 16**.
4. Select **Register with NY.gov** under New Users.
5. Select **Proceed**.
6. Enter the following:
 - First and Last Name
 - Email
 - Confirm Email
 - Preferred Username (check if username is available)
7. Select **I'm not a robot**.
 - You may have to complete a Captcha Verification before proceeding.
8. Select **Create Account**.
 - If you already have a NY.gov account, the screen will display your existing accounts, either Individual or Business.
 - Do one of the following:
 - If the account(s) shown is a NY.gov Individual account, select **Continue**.
 - If the account(s) shown is a NY.gov Business account, select **Email Me the Username(s)**.
9. Verify that the account information is correct.
 - Select **Continue**.
10. An activation email will be sent.
 - If you do not receive an email, see the **No Email Received During Account Creation** page.
11. Open your activation email and select **Click Here**.
 - Specify three security questions.
 - Select **Continue**.
12. Create a password (must contain at least eight characters).
13. Select **Set Password**. You have successfully activated your NY.gov ID.
14. Select **Go to MyNy**.
 - At the top of the screen select **Services**.
 - Select **Business**.
 - Select **New York Business Express**.
 - Select **Log in/Register**.
15. On the New York Business Express home page, do one of the following:
 - Scroll down to Top Requests and select **Certificate of Attestation of Exemption, or**
 - Search Index A-Z for **CE-200**.
16. Under **How to Apply**:
 - Select **Apply as a Business, or**
 - Select **Apply as a Homeowner** (applies to those obtaining permits to work on their residence).
17. Complete application screens.
18. Review Application Summary.
19. Attest and submit.

You will receive an email when your certificate has been issued.

To view your certificate:

- Select **Access Recent Activity** from your email, **or**
- Access businessexpress.ny.gov, and then access your **Dashboard** (under your login name on right).

Print and **sign** the **Certificate of Attestation of Exemption**.

Submit your **CE-200** for your license, permit or contract to the issuing Agency.



Workers' Compensation Board

**Certificate of Attestation of Exemption
from New York State Workers' Compensation and/or
Disability and Paid Family Leave Benefits Insurance Coverage**

****This form cannot be used to waive the workers' compensation rights or obligations of any party.****

The applicant may use this Certificate of Attestation of Exemption ONLY to show a government entity that New York State specific workers' compensation and/or disability and paid family leave benefits insurance is not required. The applicant may NOT use this form to show another business or that business's insurance carrier that such insurance is not required. Please provide this form to the government entity from which you are requesting a permit, license or contract. This Certificate will not be accepted by government officials one year after the date printed on the form.

<p align="center">In the Application of (Legal Entity Name and Address):</p> <p>John Smith Electric Corp 123 Main Street Eastchester, NY 10709 PHONE: 111-111-1111 FEIN: XXXXX7718</p>	<p align="center">Business Applying For: Electrical Permit</p> <p>From: Town of Eastchester</p> <p>The location of where work will be performed is 999 Main Street, Eastchester, NY 10709</p> <p>Estimated dates necessary to complete work associated with the building permit are from September 12, 2022 to December 31, 2022. The estimated dollar amount of project is \$0 - \$10,000</p>
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Workers' Compensation Exemption Statement:

The above named business is certifying that it is **NOT REQUIRED TO OBTAIN NEW YORK STATE SPECIFIC WORKERS' COMPENSATION INSURANCE COVERAGE** for the following reason:
The business is a one person owned corporation, with that individual owning all of the stock and holding all offices of the corporation. Other than the corporate owner, there are no employees, day labor, leased employees, borrowed employees, part-time employees, other stockholders, unpaid volunteers (including family members) or subcontractors.

Disability and Paid Family Leave Benefits Exemption Statement:

The above named business is certifying that it is **NOT REQUIRED TO OBTAIN NEW YORK STATE STATUTORY DISABILITY AND PAID FAMILY LEAVE BENEFITS INSURANCE COVERAGE** for the following reason:
The business **MUST** be either: 1) owned by one individual; OR 2) is a partnership (including LLC, LLP, PLLP, RLLP, or LP) under the laws of New York State and is not a corporation; OR 3) is a one or two person owned corporation, with those individuals owning all of the stock and holding all offices of the corporation (in a two person owned corporation each individual must be an officer and own at least one share of stock); OR 4) is a business with no NYS location. In addition, the business does not require disability and paid family leave benefits coverage at this time since it has not employed one or more individuals on at least 30 days in any calendar year in New York State. (Independent contractors are not considered to be employees under the Disability and Paid Family Leave Benefits Law.)

I, Robert C. Chilleli, am the President with the above-named legal entity. I affirm that due to my position with the above-named business I have the knowledge, information and authority to make this Certificate of Attestation of Exemption. I hereby affirm that the statements made herein are true, that I have not made any materially false statements and I make this Certificate of Attestation of Exemption under the penalties of perjury. I further affirm that I understand that any false statement, representation or concealment will subject me to felony criminal prosecution, including jail and civil liability in accordance with the Workers' Compensation Law and all other New York State laws. By submitting this Certificate of Attestation of Exemption to the government entity listed above I also hereby affirm that if circumstances change so that workers' compensation insurance and/or disability and paid family leave benefits coverage is required, the above-named legal entity will immediately acquire appropriate New York State specific workers' compensation insurance and/or disability and paid family leave benefits coverage and also immediately furnish proof of that coverage on forms approved by the Chair of the Workers' Compensation Board to the government entity listed above.

SIGN HERE	Signature: <i>John Smith</i>	Date: September 9, 2022
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<p align="center">Exemption Certificate Number 2022-062483</p>	<p align="center">Received September 9, 2022 NYS Workers' Compensation Board</p>
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