



**TOWN OF ISLIP
DEPARTMENT OF PLANNING AND DEVELOPMENT
DIVISION OF BUILDING**

One Manitton Court, Islip, New York 11751
Plans Examiners – 631-224-5467

PLACE STICKER HERE

**MINIMUM REQUIREMENTS FOR SUBMISSION
RESIDENTIAL PLANS
INTERNAL USE ONLY**

DATE RECEIVED:		
_____	_____	_____
1st Review	2nd Review	3rd Review

The following information is required in order to make a building permit application. If an item is marked as “complete”, that does not mean it meets code; rather, its inclusion with the submission is acknowledged. Please note, the NYSUC does not address deferred and/or delegated submittals.

PERMIT APPLICATION	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
Email Address of homeowner/Design Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper description of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Board of Health requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ELEVATION & GRADING	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
Plot Plan, 11” x 17”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dwelling entrance platform does not exceed 3’ above grade	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ARCHITECTURAL PLANS	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
Town of Islip Plans Examiner Note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All applicable NYS Codes and Reference Standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NYS Registered Design Professional Energy Code Compliance Statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Energy Codes used – 3 stories or less - Standard 2015 IECC Residential Provisions, Chapter 11 Reference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy Certificate & Energy Certificate Application Statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Allowable Building Area Calculations, including interior alterations, covered porches, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window & door schedules with manufacturer, model, sizes, egress, projection factor & calculations, U Value, SHGC, VT, design pressure, and guard information type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STRUCTURAL PLANS	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
Method used for structural design (material specific; refer to 2015 WFCM –or- 2015 IRC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building components for lateral (shear walls or braced walls) and uplift resistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drawings signed and sealed by a NYS Registered Design Professional for all pre-engineered assemblies including wood roof and floor trusses, cold formed construction, open web steel trusses, canopies & awnings, and pre-engineered buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MECHANICAL/ELECTRIC/PLUMBING PLANS	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
Town of Islip Geographical Tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building heat/cooling loads and systems and duct sizing calculations ASHRAE 183 or Manuals J, S, & D residential up to an including 3 stories. All equipment clearly identified on the plans. Specifications, including but not limited to type, power, fuel, capacity, BHP, HP, KW, and efficiency along with Control Narrative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy Code mandatory sections addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
R Occupancies for whole house ventilation systems (new residential homes only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing and gas supply risers, sanitary drainage and venting risers with sizes, pitches and quantifying values along with reference standard sections/tables used for design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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ENERGY CODE	1 st Review			2 nd Review			3 rd Review		
	Complete	Incomplete	N/A	Complete	Incomplete	N/A	Complete	Incomplete	N/A
All sections of referenced codes noted as mandatory clearly addressed by the Registered Design Professional on the plan (even if a computer analysis is submitted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air sealing details and Table 402.4.1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thermal barrier clearly identified, along with insulation types, thickness, and R (or U) Values noted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air barrier compliance including methods (materials or testing). If materials: provide details including clearly defining location in the building, thermal barriers, allowed material types & how applied, and sealing of penetrations. If testing: specific testing to be used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- This submittal meets the minimum requirements for submission.
Note: this does not constitute an approval. Only a cursory review of the plans has been conducted to ascertain whether the minimum components of the construction plans have been provided
- This submittal DOES NOT meet the minimum requirements for submission.
All items marked Incomplete must be addressed in order to meet the minimum submission requirements. Please revise your plans accordingly and bring them back to the Building Division.

Plans Examiner: _____ Date: _____
Signature

Architect/Engineer of Record: _____

Applicant: _____ Affiliation: _____
Print Name

Applicant: _____ Date: _____
Signature