

OTHER IMPORTANT REQUIREMENTS:

Prior to issuance of a permit, the following Insurance Certificates are required
(ACORD Forms are not acceptable proof of NYS Worker’s Compensation or Disability benefits insurance coverage)

- a. NYS WORKER’S COMPENSATION INSURANCE:
NYS Form C-105.2, NYS GSI-105.2 (2/02), NYS Form U-26.3, or if exempt, signed & dated NYS Form CE-200
- b. NYS DISABILITY INSURANCE:
NYS Form DB-120.1, NYS Form DB-155, or if exempt, signed & dated NYS Form CE-200
- c. EXCEPTION: If demolition work to be done by property owner, an original BP-1 insurance waiver signed by Property Owner is required.

I understand that the Town is relying on the information provided herein, any inaccuracy may cause delays and/or additional fees. I swear this application is a true and complete statement of all work on the desired premises. This permit issuance expressly implies approval by the landowner of inspections required of the premises.

By submitting this application, I acknowledge and agree that a modification or addition may be made to the Certificate of Occupancy/Compliance. No further notice of any resultant modification or addition shall be required.

Applications that are dormant in excess of 180 days are considered abandoned and, once abandoned, are subject to be destroyed after 30 days’ notice. Refunds will not be given.

PROPERTY OWNER:

CONTRACTOR:

PRINT SIGNATURE

PRINT SIGNATURE SC HOME IMPROVEMENT LICENSE #

SWORN TO ME ON THIS ____ DAY OF _____, 20____

SWORN TO ME ON THIS ____ DAY OF _____, 20____

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC SIGNATURE