APPLICATION FOR BUILDING/USE PERMIT

Part 1

Application No. _____

Date Received _____

Date Approved
Disapproved _____

For Official Use Only

1) Village of
Town of _____ St. Lawrence County, New York

APPLICATION IS HEREBY MADE for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition as herein

2) described, located at _____

The applicant agrees to comply with all applicable laws, ordinances and regulations.

3) _____
(Name of Applicant) *(Name of Owner)*

4) _____
(Address of Applicant) *(Address of Owner)*

5) _____
(Phone Number of Applicant) *(Phone Number of Owner)*

State whether applicant is owner, lessee, agent, architect, engineer or builder:

If owner or applicant is a corporation, give names and titles of two officers and signature of duly authorized officer.

_____

6) Tax Parcel I.D.. # _____ _____
(Name and Title of Corporate Officer)

7) State Existing use and occupancy of premises and intended use and/or occupancy of proposed construction:
   a. Existing use and occupancy _____
   b. Intended use and occupancy _____

8) Nature of work (check one or more): New Building _____ Addition _____ Alteration _____ Repair _____ Removal _____
Demolition _____ Sign _____ Other _____

9) Estimated Cost* _____ _____ Fee _____

10) If dwelling, number of dwelling units _____ Number of dwelling units on each floor _____ if garage, number of cars _____

11) If business, commercial or mixed occupancy, specify nature and extent of each type of use _____

12) Dimensions of entire new construction : Front _____ Rear _____ Depth _____ Height _____ Number of Stories _____

13) Size of lot: Front _____ Rear _____ Depth _____

14) Does proposed construction violate any zoning law, ordinance or regulation? _____

15) Name of Compensation Insurance Carier _____
Number of Policy _____ Date of Expiration _____

16) Name of Architect _____ Address _____ Phone No. _____
Name of Contractor _____ Address _____ Phone No. _____

17) Will electrical work be inspected by, and a Certificate of Approval obtained from the New York Board of Fire Underwriters or other agency or organization? If so, specify:

_____

***Costs for the work described in the Application for Building Permit include the cost of all of the construction and other work done in connection therewith, exclusive of the cost of the land. If final cost shall exceed estimated cost, an additional fee may be required before issuance of Certificate of Occupancy.**

APPLICATION FOR BUILDING PERMIT

Application No. _____

Part 1 Continued

18) PERK Test Required _____
Additional Comments:

19) Amount of Leach Field required _____
Additional Comments:

20) **Plot Plan & Description of Project** - Locate clearly and distinctly all buildings, whether existing or proposed, and indicate all setback dimensions from property lines. Give lot and block numbers or description according to deed, and show street names and indicate whether interior or corner lot.

Provide a description of the project construction to include but not limited to; nature of the work to be performed, materials and equipment to be used, and details of structural, mechanical, electrical and plumbing installations.

More complicated projects will require three complete sets of plans and specifications certified by a New York State Licensed Architect or Professional Engineer.

STATE OF NEW YORK
COUNTY OF ST. LAWRENCE .....

ss.:

..... being duly sworn deposes and says that he is the applicant above
(Name of individual signing application)
named. He is the .....
(Contractor, Agent, Corporate Officer, etc.)
of said owner or owners, and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me

this ..... day of ....

.....

Notary Public, ... County

.....
(Signature of applicant)

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

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

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box):

☐ I am performing all the work for which the building permit was issued.

☐ I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work.

☐ I have a homeowner's insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

- acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a WC/DB-100 exemption form; OR

- have the general contractor, performing the work on the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

_____ _____

(Signature of Homeowner) (Date Signed)

_____ Home Telephone Number _____

(Homeowner's Name Printed)

Property Address that requires the building permit:

_____

_____

_____

_____

Sworn to before me this _____ day of

_____, _____.

_____

(County Clerk or Notary Public)

Once notarized, this Form BP-1 serves as an exemption for both workers' compensation and disability benefits insurance coverage.

LAWS OF NEW YORK, 1998
CHAPTER 439

The **general municipal law is amended by adding a new section 125** to read as follows:

. 125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:

1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR

2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

Implementing Section 125 of the General Municipal Law

1. General Contractors -- Business Owners and Certain Homeowners

For **businesses and certain homeowners listed as the general contractors on building permits,** proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is **ONE** of the following forms that indicate that they are:

- insured (C-105.2 or U-26.3),
- a Board-approved self-insured employer (SI-12), or
- are exempt (WC/DB-100),

under the mandatory coverage provisions of the WCL. Any residence that is not a **1, 2, 3 or 4 Family, Owner-occupied Residence** is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

2. Owner-occupied Residences

For homeowners of a **1, 2, 3 or 4 Family, Owner-occupied Residence,** proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file Form BP-1.

- Form BP-1 shall be filed if the homeowner of a **1, 2, 3 or 4 Family, Owner-occupied Residence** is listed as the general contractor on the building permit, and the homeowner:
  - ◊ is performing all the work for which the building permit was issued him/herself,
  - ◊ is not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping the homeowner perform such work, or
  - ◊ has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- If the homeowner of a **1, 2, 3 or 4 Family, Owner-occupied Residence** is hiring or paying individuals a total of **40 hours or MORE** in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" Form BP-1, but shall either:
  - ◊ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit (Form C-105.2 or Form U-26.3), OR
  - ◊ have the general contractor, performing the work on the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit, provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit.