



WASHINGTON COUNTY
DEPARTMENT OF CODE ENFORCEMENT

Physical Address: 1153 Burgoyne Ave.
Fort Edward, NY 12828
Mailing Address: 383 Broadway
Fort Edward, NY 12828
Phone: (518) 746-2150

BUILDING PERMIT APPLICATION

THIS IS A NON-REFUNDABLE APPLICATION FEE.
INCOMPLETE APPLICATIONS MAYBE CANCELLED 6 MONTHS AFTER INITIAL REVIEW.
PLEASE ALLOW TWO TO FOUR WEEKS FOR PROCESSING AND REVIEW.
DO NOT BEGIN WORK PRIOR TO PERMIT BEING ISSUED – FINES MAY BE ISSUED

BEFORE SUBMITTING YOUR APPLICATION, PLEASE HAVE THE FOLLOWING:

- ☐ Calculate fee & enclose payment. **Make check payable to Washington County Treasurer.** This is a non-refundable application fee.
- ☐ Complete all pages of the application in INK. Verify application has been signed.
- ☐ Attach **TWO** copies of your plans.
- ☐ Your plans **NEED** to be stamped by a NYS licensed architect or engineer if:
 - Your project does not meet the exceptions noted in the application **OR**
 - It exceeds the design limits of the NYS Residential Code
- ☐ Insurance Requirements: **ACORD FORMS ARE NOT ACCEPTABLE PROOF OF COVERAGE**
 - Certificate of Workers Compensation Form C-105.2 or U-26.3 **AND**
 - Certificate of Disability Insurance Form DB-120.1 or DB-155

OR

Exemption of Workers Compensation and Disability Benefits Insurance Coverage: Form CE-200
- ☐ All projects must comply with all town or village local laws.

Local Regulation Compliance sheet (LRCC #1) needs to be signed by your local compliance officer **BEFORE ANY PERMIT CAN BE ISSUED.** This may require additional time depending on your locality. Inquire at your town or village office and have the LRCC #1 completed **BEFORE** submitting your application. Please be sure the LRCC #1 is signed by the applicant, the owner & the local official. A list of the local compliance officers is included in the application.
- ☐ A similar form (LRCC #2) needs to be signed by either the applicant or owner and the local official at the completion of your project, BEFORE a Certificate of Occupancy/Compliance can be issued.
- ☐ Many projects require a new or updated septic system - please submit if required. Your building permit will be held until a septic permit is issued if applicable.
- ☐ DIG SAFELY NEW YORK must be contacted prior to any digging and **CALL 811 BEFORE YOU DIG**
(<http://www.digsafelynewyork.com>)
- ☐ If the proposed work creates additional wastewater design flow a Sewage Disposal System Application will need to be submitted and approved before a building permit can be issued.
- ☐ Water well test data must be provided for new potable water sources prior to the issuance of Certificate of Occupancy/Compliance.

Buildings for residential **storage** purposes of 144 square feet or less, do not require building permits, but may be subject to local zoning setbacks from buildings/structures and property lines.
MOST other projects DO. Change-of-use projects require a permit.

IF YOU ARE IN DOUBT - CALL THIS OFFICE.



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Fee Schedule

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Fees for Towns, Villages, EMS and Fire Dept. have been formally waived per Public Safety Committee 6/26/2012.

Rates effective as of January 1, 2026

Residential Projects	
New One & Two Family Dwelling	30¢/sq. ft. Minimum \$250
New Single/Double & Triple Wide	\$150
New NYS Approved Modular Home	\$200
Additions	30¢/sq. ft. Minimum \$150
Repairs / Alterations	25¢/sq. ft. Minimum \$100
Garage, Storage, and/or Accessory Structure	25¢/sq. ft. Minimum \$100
Demolition	\$100
Solar Panels	\$100
Sewage Disposal System	\$100

Multiple Family Buildings (3+ Units)	
New	35¢/sq. ft. Minimum \$400
Additions	35¢/sq. ft. Minimum \$400
Repairs / Alterations / Alterations with Conversions	30¢/sq. ft. Minimum \$150
Demolition	\$100
Solar Panels	\$100
Sewage Disposal System	\$100

Non-Residential Buildings	
New	40¢/sq. ft. Minimum \$300
Addition	40¢/sq. ft. Minimum \$300
Repairs / Alterations / Alterations with Conversions	35¢/sq. ft. Minimum \$200
Change of Occupancy w/o Alterations	15¢/ sq. ft.
Demolition	\$300
Solar – Onsite Use	65¢/kW Minimum \$600
Solar – Offsite Use (e.g. Solar Farm)	\$3,000/MW
Sewage Disposal System	\$100

Miscellaneous Permits	
Swimming Pools, Hot Tubs, Spas	\$100
Chimney/Woodstove/Heating Equipment	\$100
Masonry Fireplace and Chimney	\$100

Fee schedule changes approved by vote of the members of the Washington County Board of Supervisors
on August 16, 2024, via Resolution No. 246 and December 19, 2025, via Resolution No. 316.

Miscellaneous Fees	
Renewal of Building or Septic Permit	\$50/year
Amendment of Building or Septic Permit	\$50/change
Temporary Certificate of Occupancy (90 days)	\$100/issuance
Building without a Permit Penalty	Equal to 2x the application fee or \$200, whichever is greater
Re-Inspection of Required Construction Stage • 2nd inspection of previously inspected item is not approved • Scheduled appointment for an inspection is not cancelled & the project is not ready for said inspection upon arrival of Code Enforcement Officer	\$50 per instance
Failure to Obtain Inspection Fee	\$75 for first offense/project \$150 for second offense/project \$300 for third & each subsequent offense/project \$500 for repeat offender for missed inspections on multiple projects
Operating Permit	\$100
Certificate of Occupancy Search	\$50 per parcel

Building Fire Prevention Inspections	
School Fire Inspections	\$125 per building
Public Building	\$75 scheduled with 1 st notice \$100 scheduled with 2 nd notice \$125 with final notice, additional fees may apply

Fee schedule changes approved by vote of the members of the Washington County Board of Supervisors on August 16, 2024, via Resolution No. 246 and December 19, 2025, via Resolution No. 316.



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BUILDING PERMIT APPLICATION

FOR OFFICE USE ONLY

APPLICATION NO. _____
DATE RECEIVED: _____
DATE EXAMINED: _____
AMOUNT OF FEE RECEIVED: _____

☐ APPROVED
☐ APPROVED WITH
CORRECTIONS
☐ DISAPPROVED

PERMIT NO. _____
REASONS: _____
EXAMINED BY _____

Project Location:

STREET / ADDRESS

TOWN VILLAGE

TAX MAP SECTION

BLOCK

LOT

APPLICANT IS: OWNER ARCHITECT/ENGINEER BUILDER/CONTRACTOR OTHER: _____

APPLICANT:

NAME: _____

MAILING ADDRESS: _____

HOME / OFFICE PHONE #: _____

CELL PHONE #: _____

EMAIL: _____

OWNER (IF DIFFERENT THAN APPLICANT):

NAME: _____

MAILING ADDRESS: _____

HOME PHONE #: _____

CELL PHONE #: _____

EMAIL: _____

IF OWNER / APPLICANT IS A CORPORATION GIVE THE NAME AND TITLE OF TWO OFFICERS:

Name: _____ Title: _____

Name: _____ Title: _____

OCCUPANCY:

CHECK APPROPRIATE BOX(S)

DESCRIBE

SINGLE FAMILY HOME		BUSINESS	_____	GROUP B
ONE - FAMILY DWELLING	R3	MERCANTILE	_____	GROUP M
TWO - FAMILY DWELLING	R3	FACTORY	_____	GROUP F
MULTIPLE DWELLING:		STORAGE	_____	GROUP S
PERMANENT OCCUPANCY	R2	ASSEMBLY	_____	GROUP A
TRANSIENT OCCUPANCY	R1	INSTITUTIONAL	_____	GROUP I
ADULT RESIDENTIAL CARE		MISCELLANEOUS	_____	GROUP U
(NOT MORE THAN 16 OCCUPANTS)	R4	OTHER	_____	GROUP ____

NATURE OF PROPOSED WORK: (CHECK ANY THAT APPLY) ESTIMATED COST (EXCLUSIVE OF LAND)

DESCRIBE

COST

CONSTRUCTION OF A NEW STRUCTURE	_____	_____
ADDITION TO EXISTING STRUCTURE	_____	_____
ALTERATION TO EXISTING STRUCTURE	_____	_____
CHANGE OF OCCUPANCY	_____	_____
OTHER	_____	_____

ENGINEER, ARCHITECT, AND/OR (SUB) CONTRACTORS:

CHECK IF OWNER BUILT

NAME	PHASE OF WORK	PHONE	EMAIL
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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Existing / Proposed Building Information: (Complete all that apply)

Foundation Type: ☐ Pier ☐ Frost Wall ☐ Full Foundation Wall ☐ Monolithic or Floating Slab ☐ Slab													
Foundation Material: ☐ Stone ☐ Concrete ☐ Wood ☐ Insulated Concrete Forms ☐ Other: _____													
Basement Information: ☐ Crawl Space ☐ Walk Out ☐ Finished ☐ Storage ☐ Bedrooms ☐ Laundry													
Building Construction Type: ☐ Concrete ☐ Steel ☐ Brick ☐ Stone ☐ Wood ☐ Other: _____													
Building Exterior: ☐ Wood ☐ Stone ☐ Brick ☐ Metal ☐ Shingles ☐ Vinyl ☐ Concrete ☐ Composition ☐ Stucco ☐ Other: _____													
Building Roof: ☐ Wood ☐ Stone ☐ Metal ☐ Shingles ☐ Rubber ☐ Other: _____													
Building Heating & Cooling: ☐ Hot Air ☐ Hot Water ☐ Electric ☐ Oil ☐ Gas ☐ Radiant ☐ Solar ☐ Wood ☐ Geothermal ☐ Central Air ☐ Other: _____													
Water Supply: <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>☐ Public</td><td>☐ Community</td><td>☐ Individual</td><td>: ☐ Drilled</td><td>☐ Surface Water</td><td>☐ Well Point</td></tr><tr><td></td><td></td><td></td><td>☐ Spring</td><td>☐ Dug Wells</td><td>☐ Shore Wells</td></tr></table>		☐ Public	☐ Community	☐ Individual	: ☐ Drilled	☐ Surface Water	☐ Well Point				☐ Spring	☐ Dug Wells	☐ Shore Wells
☐ Public	☐ Community	☐ Individual	: ☐ Drilled	☐ Surface Water	☐ Well Point								
			☐ Spring	☐ Dug Wells	☐ Shore Wells								
Sewage: ☐ Public ☐ Holding Tank Size: _____ Gallons ☐ Septic Tank _____ Gallons Number of Trenches _____ Width of Trenches _____ Length of Trenches _____ Percolation Rate _____ Min/Inch Depth to Boundary Layer or water table _____													
Additional: (Write number or value of each or N/A for not applicable) Square Feet of: Basement: _____ 1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____ Bedrooms: _____ Rooms: _____ Full Bathrooms: _____ Half Bathrooms: _____ Fireplaces: _____ Solar Panels: _____ Kitchens: _____ Pools: _____													

Proposed Building Information: (Complete all that apply)

☐ New Structure	☐ Addition	☐ Alteration	☐ Renovation	☐ Repair	☐ Foundation
☐ Reroofing	☐ Attached Garage	☐ Detached Garage	☐ Deck	☐ Sign	☐ Fence
☐ Open Porch	☐ Covered Porch	☐ Enclosed Porch	☐ Pool Fence	☐ Above Ground Pool	
☐ In Ground Pool	☐ Other: _____				



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PLOT DIAGRAM: LOCATE ALL BUILDINGS, APPLICABLE SEPTIC SYSTEMS, AND WATER SUPPLIES (EXISTING AND PROPOSED). SHOW STREET(S)/ROAD(S) AND THEIR NAME(S) AND SHOW SETBACK DISTANCES FROM STREET(S)/ROAD(S) AND ADJACENT PROPERTY LINES.

APPLICATION is hereby made to the Washington County Department of Code Enforcement for the issuance of a building permit pursuant to the provisions of Washington County Local Law No. 3 of 2007, and the Building Codes of New York State. The applicant agrees to comply with all applicable provisions of said law and code as well as all applicable local, county or state laws and/or ordinances: and swears/attests that all statements contained in this application are true to the best of his/her knowledge and belief.

APPLICANT'S SIGNATURE

DATE

IMPORTANT - PLEASE TAKE NOTICE

- ⇒ ALL APPLICATIONS MUST BE ACCOMPANIED BY TWO (2) SETS OF PLANS OF THE PROPOSED PROJECT AND SPECIFICATIONS OF THE MATERIALS TO BE USED.
- ⇒ PLANS SUBMITTED MUST BE SIGNED AND SEALED BY AN ARCHITECT OR ENGINEER LICENSED BY THE STATE OF NEW YORK. EXCEPTIONS TO THIS REQUIREMENT ARE:
- New residential construction - 1,500 gross sq. ft. or less
 - Alterations costing \$20,000 or less, which do not involve structural changes or affect public safety.
 - If plans exceed design limits of the applicable NYS Uniform Fire Prevention and Building Codes and/or NYS Energy Codes.

Certificate of Attestation of Exemption



Workers' Compensation Board

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.



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**TRUSS TYPE, PRE-ENGINEERED WOOD OR TIMBER CONSTRUCTION IN
RESIDENTIAL & COMMERCIAL STRUCTURES**

FOR OFFICE USE ONLY	
APPLICATION NO. _____	DATE RECEIVED: _____

Project Location:

STREET / ADDRESS _____		TOWN _____	VILLAGE _____
TAX MAP SECTION _____	BLOCK _____	LOT _____	

OWNER INFORMATION:

NAME: _____

MAILING ADDRESS: _____

TELEPHONE # _____

E-MAIL: _____

PLEASE TAKE NOTICE THAT THE STRUCTURE IS (CHECK EACH APPLICABLE LINE):

- | | |
|---|---|
| ☐ NEW STRUCTURE | ☐ ADDITION TO EXISTING STRUCTURE |
| ☐ EXISTING STRUCTURE | ☐ REHABILITATION TO EXISTING STRUCTURE |

**TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE
(CHECK EACH APPLICABLE LINE):** *(see back for sign designation)*

- | | |
|---|--|
| ☐ TRUSS TYPE CONSTRUCTION (TT) | ☐ PRE-ENGINEERED WOOD CONSTRUCTION (PW) |
| ☐ TIMBER CONSTRUCTION FLOOR (TC) | ☐ OTHER: _____ |

IN THE FOLLOWING LOCATION(S) (CHECK EACH APPLICABLE LINE): *(see back for sign designation)*

- | | |
|---|---|
| ☐ FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS (F) | ☐ ROOF FRAMING (R) |
| ☐ FLOOR FRAMING AND ROOF FRAMING (FR) | ☐ OTHER: _____ |

STRUCTURE CONSTRUCTION TYPE: (CHECK APPLICABLE LINE): *(see back for sign designation)*

- | | | |
|---|---|---|
| ☐ TYPE I NONCOMBUSTIBLE | ☐ TYPE III NONCOMBUSTIBLE EXTERIOR WALLS | ☐ TYPE V (COMBUSTIBLE)
OR ANY MATERIAL
PERMITTED BY CODE |
| ☐ TYPE II NONCOMBUSTIBLE | ☐ TYPE IV HEAVY TIMBER | |

APPLICATION is hereby made to the Washington County Department of Code Enforcement for the issuance of a building permit pursuant to the provisions of Washington County Local Law No. 3 of 2007, and the Building Codes of New York State. The applicant agrees to comply with all applicable provisions of said law and code as well as all applicable local, county or state laws and/or ordinances: and swears/attests that all statements contained in this application are true to the best of his/her knowledge and belief.

OWNER OR OWNER'S REPRESENTATIVE SIGNATURE

DATE

OWNER OR OWNER'S REPRESENTATIVE PRINT

Revised January 2025

IDENTIFICATION OF BUILDINGS UTILIZING TRUSS TYPE CONSTRUCTION (check appropriate symbol)

	TYPE I NONCOMBUSTIBLE	TYPE II NONCOMBUSTIBLE	TYPE III NONCOMBUSTIBLE EXTERIOR WALLS	TYPE IV HEAVY TIMBER	TYPE V ANY MATERIAL PERMITTED BY	
Floor Construction						Floor Construction
Roof Construction						Roof Construction
Floor & Roof Construction						Floor & Roof Construction

Required Sign Location(s)

Residential Construction

Affixed to electric meter box attached to the exterior of the structure or affixed to the exterior wall of the residential structure at a point immediately adjacent to the electric box or a location likely to be seen by first responders with approval by the authority having jurisdiction.

The construction type designation shall be "I", "II", "III", "IV" or "V" to indicate the construction classification of the structure under section 602 of the BCNYS

DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION

"F"	FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS
"R"	ROOF FRAMING
"FR"	FLOOR AND ROOF FRAMING

Commercial Construction

Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached to the door, or attached to a sidelight or the face of the building, not more than 12 inches (305 mm) horizontally from the latch side of the door jamb, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.
Exterior building entrance doors, exterior exit discharge doors, and exterior roof access doors to a stairway	Attached at each end of the row of doors and at a maximum horizontal distance of 12 feet (3.65M) between signs, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.
Fire department hose connections	Attached to the face of the building, not more than 12 inches (305 mm) horizontally from the center line of the fire department hose connection, and not less than 42 inches (1067 mm) nor more than 60 inches (1524 mm) above the adjoining walking surface.

ROMAN ALPHANUMERIC DESIGNATION OF CONSTRUCTION TYPE BASED ON SECTION 602 OF THE BUILDING CODE OF NEW YORK STATE

DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS CONSTRUCTION



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LOCAL REGULATION COMPLIANCE CERTIFICATE
TO BE SUBMITTED PRIOR TO ISSUING PERMIT

LRCC #1

TOWN / VILLAGE OF:

Tax Map No. _____

THIS IS TO CERTIFY that the proposed construction described in Washington County Building Permit complies with all Town and/or Village zoning laws and/or other applicable local requirements.

Applicant: _____

Owner: _____

Property Address: _____

Project Description: _____

SIGNATURE OF APPLICANT

SIGNATURE OF OWNER

DATE

TO BE COMPLETED BY LOCAL COMPLIANCE OFFICIAL OR CHIEF ELECTED OFFICIAL:

Flood Plain Law: ☐ This parcel **IS** in a flood plain ☐ This parcel **IS NOT** in a flood plain

☐ Zoning Ordinance ☐ Site Plan Review ☐ Other Local Laws

☐ No Local Town / Village requirements apply to proposed construction.

N/A YES NO

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| ⇒ If a Flood Hazard Area Permit is required through your local municipality, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ If a Permit is required from the Adirondack Park Agency, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ If a Permit is required from the Lake George Park Commission, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ If a Permit is required by the NYS Dept. of Environmental Conservation, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ If a Permit is required by the NYS Dept. of Health, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ If a Permit is required for a new driveway or road access from NYS D.O.T., Washington County D.P.W. or your local Town or Village, has one been issued? | ☐ | ☐ | ☐ |
| ⇒ The Town of Greenwich requires an additional Building Permit Application and a Driveway Permit Application. Have these been submitted to and approved by the Town of Greenwich? | ☐ | ☐ | ☐ |
| ⇒ The Town of Argyle requires an additional Building Permit Application, a Driveway Permit Application, a Local Compliance Checklist and a complete set of prints. Have all of these been submitted to and approved by the Town of Argyle? | ☐ | ☐ | ☐ |
| ⇒ The Town of Hampton requires a Construction Use Verification Form. Has this been submitted to and approved by the Town of Hampton? | ☐ | ☐ | ☐ |
| ⇒ If located in a sewer district, has the project been reviewed and approved by the applicable Sewer System Operator? | ☐ | ☐ | ☐ |

Other remarks by Local Official: _____

SIGNATURE OF LOCAL COMPLIANCE OFFICIAL, OR CHIEF ELECTED OFFICIAL

DATE

Compliance Officer Contacts for
Local Regulation Compliance Certificate “LRCC” #1 & #2

TOWN/VILLAGE	CONTACT	PHONE NUMBER / EMAIL
Argyle Village	Mayor, Darren Smith	(518) 955-2766 (Village Clerk)
Argyle Town	Supervisor, Robert Henke	(518) 638-8681 ext. 12
Cambridge Town	Supervisor, Catherine Fedler	(518) 677-5532 (Town Clerk)
Cambridge Village	William Reagan	(518) 677-2622 zeo@cambridgeny.gov
Dresden	Supervisor, Charles Tall	(518) 499-1813 (Town Clerk)
Fort Ann Village	Mayor, Jon Lashinsky	(518) 639-4416 (Office)
Fort Ann Town	Paul Milligan	(518) 223-2659 codeenforcement@townoffortannny.gov
Granville Village	Curt Pedone	(518) 642-2640
Granville Town	Bill Humphries	(518) 642-1500 / 361-8685
Greenwich Village	Andrew Mollica	(518) 692-2755 zoningofficer@villageofgreenwich.org
Greenwich Town	Andrew Mollica	(518) 692-7611 ext. 106 / 335-9786 andrew.mollica@greenwichny.org
Hampton	Supervisor, David O’Brien	(518) 282-9830 (Town Office)
Hartford	Supervisor, Scott Hahn	(518) 632-9151 (Town Office)
Hebron	Supervisor, Brian Campbell	(518) 415-7039
Jackson	Supervisor, Jay Skellie	(518) 854-7883
Putnam	Supervisor, Darlene Kerr	(518) 547-8317
Salem	Mario Canalini	(518) 854-3277 (Town Office) marioc333@yahoo.com
White Creek	Supervisor, Lance Allen Wang	(518) 677-8545 (Town Office)
Whitehall Village	Jessie Neddo	(518) 499-0871 / 681-6553
Whitehall Town	Jessie Neddo	(518) 499-1535 (Town Office)

Revised Sept 2026



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LOCAL REGULATION COMPLIANCE CERTIFICATE
TO BE SUBMITTED AFTER PROJECT COMPLETION

LRCC #2

TOWN / VILLAGE OF _____

THIS IS TO CERTIFY that the completed construction project described in Washington County Building Permit# _____ Issued on (date) _____ complies with all town and/or village zoning laws or requirements. Project is described as follows:

Applicant: _____

Site Property Address: _____

Project Description: _____

SIGNATURE OF LOCAL COMPLIANCE OFFICIAL, OR CHIEF ELECTED OFFICIAL

DATE

Completed construction project complies with all local Town or Village requirements.



No Local Town or Village requirements apply to completed construction project.



Other remarks by Local Official: _____

⇒ Complete and return to Washington County Code Enforcement, 383 Broadway, Fort Edward, NY 12828.

⇒ Please be advised that **NO** Certificate of Occupancy nor Certificate of Compliance will be issued until this form is submitted.

SIGNATURE OF APPLICANT / OWNER

DATE