



**TOWN OF WILTON**  
**22 TRAVER ROAD**  
**GANSEVOORT, NEW YORK 12831-9127**

(518) 587-1939, Ext. 603  
 FAX (518) 587-2837  
 Website: [www.townofwilton.com](http://www.townofwilton.com)  
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**Mark Mykins**  
 Senior Building Inspector  
 Code Enforcement Officer  
 Zoning Officer

**John Herlihy**  
 Building Inspector  
 & Code Enforcement Officer

**Marcus Hart**  
 Asst. Building Inspector  
 & Asst. Code Enforcement Officer

**APPLICATION FOR BUILDING AND ZONING PERMIT**

<b>DATE:</b>	<b>PERMIT NUMBER:</b>
APPLICATION IS HEREBY MADE to the Town of Wilton Building Department for the issuance of a Building and Zoning Permit pursuant to the New York State Building Code for the construction of buildings, additions or alterations, or for the removal or demolition, as herein described. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations and all conditions expressed on the back of this application which are part of these requirements, and will allow all inspectors to enter the premises for the required inspections.	

**NOTE – READ INSTRUCTIONS ON THE REVERSE SIDE**

<b>Applicant's Name:</b>		<b>ZONING DISTRICT:</b>	
<b>Applicants Address:</b>		<b>Lot Size:</b>	<b>Area (sq. ft.):</b>
		<b>Existing Structure Size (sq. ft.):</b>	
<b>Applicant's Phone Number:</b>		<b>Existing Structure Use:</b>	
<b>Owner's Name:</b>		<b>New Structure Size (sq. ft.):</b>	
<b>Owner's Address:</b>		<b>Kind of Structure:</b>	
		<b>NEW STRUCTURE YARDS:</b>	
<b>Owner's Phone Number:</b>		<b>Front Yard Distance (in feet):</b>	
<b>Contractor's Name:</b>		<b>Right Side Yard Distance (in feet):</b>	
<b>Contractor's Address:</b>		<b>Left Side Yard Distance (in feet):</b>	
		<b>Rear Yard Distance (in feet):</b>	
<b>Contractor's Phone Number:</b>		<b>Height (in feet):</b>	
		<b>ACCESSORY STRUCTURE LOCATION:</b>	
<b>Street Address of Property</b>	<b>Left Side Yd.</b>	<b>Right Side Yd.</b>	<b>Rear Yd.</b>
<b>Tax Map Number:</b>	<b>Estimated Cost \$:</b>		
<b>Existing Use:</b>	<b>Living Space (sq. ft.)</b>	<b>Porches (sq. ft.)</b>	
<b>Intended Use:</b>	<b>Decks (sq. ft.)</b>	<b>Other</b>	
<b>Name of Workers Compensation Carrier:</b>	<b>Garage (sq. ft.)</b>	<b>Number of Stalls</b>	
<b>Policy Number (forms must be attached)</b>	<b>Total Square Footage:</b>		
	<b>Fee \$</b>		
<b>Note: THIS BUILDING PERMIT IS EFFECTIVE FOR (1) YEAR FROM DATE OF ISSUANCE.</b>		<b>ALL ELECTRICAL WORK MUST BE INSPECTED BY AND A CERTIFICATE OF APPROVAL OBTAINED FROM A NEW YORK STATE CERTIFIED INSPECTION AGENCY.</b>	
<b>Signature of Owner</b>		<b>Date</b>	
<b>Signature of Applicant</b>		<b>Date</b>	
<b>Signature of Contractor</b>		<b>Date</b>	

The application of \_\_\_\_\_ dated \_\_\_\_\_, 20\_\_\_\_ is hereby approved (disapproved) and permission granted (refused) for the construction or alteration of a building and/or accessory structure as set forth above.

Reason for refusal of permit: \_\_\_\_\_

Dated \_\_\_\_\_, 20\_\_\_\_

Superintendent of Buildings

# **BUILDING APPLICATION REQUIREMENTS**

## **TOWN OF WILTON**

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**THE BUILDING DEPARTMENT MAY TAKE 8 WEEKS OR MORE, NOT INCLUDING WEEKENDS AND/OR HOLIDAYS, TO REVIEW PERMITS.**

### **SUBMISSION**

1. Application for Building and Zoning Permit required for each permit requested on Building Department Forms.
2. Description of Materials specification sheet required for each permit requested. (Photocopies are not allowed, plans and spec. sheets shall match and be completely filled out for each application.)
3. A minimum of two sets of Building Plans with original stamp and signature of a New York State licensed Engineer or Architect. (One set shall be returned to the applicant to be located on site for the use of the building department.)
4. Building plans shall include:
  - a. Construction documents shall show the size, section and relative locations of structural members with floor levels, column centers and offsets fully dimensioned. The design loads and other information pertinent to the structural design required by §1603.1.1 through §1603.1.8 of the Building Code of New York State shall be clearly indicated on the construction documents for parts of the building or structure.
  - b. Mechanical Plans as required to determine compliance with the applicable code of New York State.
  - c. Plumbing diagrams as required to determine compliance with the applicable code of New York State.
  - d. Electrical Plans as required to determine compliance with the applicable code of New York State.
  - e. Energy Code Compliance check list, including ResCheck or ComCheck.
  - f. Light & Ventilation Schedule - room by room, including emergency egress when required.
  - g. Stair and guard detail
5. Survey showing proposed house location with all setbacks, finished basement floor elevation, finished foundation elevation and road/street elevation.

6. Certification of Seasonal High Groundwater Elevation by a licensed professional (P.E. or P.L.S.)
7. Well tests for individual lots including water flow and coliform bacteria testing, per New York State Department of Health standards.
8. Septic system designed by a Licensed Professional.
9. Certificate of Insurance Liability/Worker's Compensation with Town of Wilton listed as certificate holder.

## FEES

<b>Residential:</b>	\$ .20 sf. Minimum Fee \$50.00 (Total sq. ft. including garages, decks, porches and any covered area)
<b>Commercial</b>	\$ .30 sf. Minimum Fee \$150.00

## GENERAL REQUIREMENTS

1. Minimum of three (3) #4 or two (2) #5 reinforcement bar in footings, to be determined by Building Department.
2. Basement floor elevation must be minimum 3' above seasonal high ground water.
3. Poured foundations must be keyed or pinned.
4. Minimum 10" block or 8" poured foundations for all main structures.
5. Block foundations must be parged and tarred or other acceptable equivalent.
6. Poured foundations must be tarred or other acceptable equivalent.
7. All foundations must be pitched from the block or poured wall to the edge of the footing to ensure water run-off.
8. Finished floor elevation must meet approved subdivision requirements or minimum 2' above road elevation unless prior written approval by the building department.
9. All exhaust fans must be vented directly to outdoors.
10. Only ONE heating appliance per masonry chimney flue.
11. All single wall steel pipes must be at least 24 gauge.
12. Factory built chimney must be "listed" by national testing agency.
13. "Listed" chimney must be triple insulated as it passes through the structure.
14. Wall nearest stovepipe must be protected by a non-combustible material with 1" min. air space.
15. Non-combustible flooring for woodstoves must extend 18" beyond ash door and extend 6" beyond sides and back.
16. Fireplace hearth minimum width 16" and extend at least 8" beyond each side of the fireplace opening. (Where opening is six square feet or larger hearth shall have a minimum width 20" and extend at least 12" beyond each side of the fireplace, R1003.10)
17. All "fuel chimneys" must maintain a 2" clearance from all combustibles.
18. Masonry chimney clay flue must be 5/8" thick minimum.

19. Chimneys, factory built and/or masonry, must extend 3' above highest point that it passes through, and minimum 2' higher than any portion of the building within 10'.
20. Factory built chimneys - if in chase - must have a fire stop every 8' maximum.
21. All fireplaces must have fresh air, glass doors, and a clean out.
22. **Written Certification by the installer of the chimney, fireplace, insert, and/or woodstove certifying the installation was done to NFPA 211 and State and Local Codes.**
23. A copy of the manufacturer's installation manual **MUST** be submitted for all woodstoves, inserts and/or factory built fireplaces.
24. Minimum 3" vent pipe as it passes through the roof.
25. Water supply system copper piping must be K or L.
26. Basement/Cellar Walls - Minimum depth of insulation **below grade**:
27. Basement/Cellar Wall Insulation Minimum R-11 consisting of either:
28. Leach field must be a minimum 4' above seasonal high ground water.
  - a. Vapor barrier and 15 minute thermal barrier
  - b. 0-25 flame spread rating foil faced
29. Septic System Diagram showing actual location on minimum 8 1/2" X 11" or larger sheet which shall include:
  - a. Delineating property lines, street lines, building location and dimensions, and driveway and/or parking area.
  - b. Lot number and street address.
  - c. Distance of septic tank, distribution box, and leach field from foundation.
  - d. Diagonals to clean out of septic tank and distribution box from foundation corners.
  - e. Distance of well location from house, septic tank and leach fields.
  - f. Name, address, and phone number of the Septic System Contractor.
  - g. Signature of actual installer of the septic system.
30. Septic System Diagram designed by an Engineer showing actual location on minimum 8 1/2" X 11" or larger sheet which shall include:
  - a. Delineating property lines, street lines, building location and dimensions, and driveway and/or parking area.
  - b. Lot number and street address.
  - c. Distance of septic tank, distribution box, and leach field from foundation.
  - d. Diagonals to clean out of septic tank and distribution box from foundation corners.
  - e. Distance of well location from house, septic tank and leach fields.
  - f. Name, address, and phone number of the Septic System Contractor.
  - g. Signature of actual installer of the septic system.

## INSPECTIONS

By the Building Department are required at the following schedule (a **MINIMUM** 24 hours notice for all required inspections, voice mail inspection requests are not allowed). Additional inspections will not be scheduled until the prior inspection passes. The Building Department may impose a fine on contractors who make appointments for inspections and then do not notify said Department if, for some reason (including work not being completed), the inspection should have been cancelled or postponed:

1. Footings - before pouring.
2. Foundation - prior to backfill (foundations shall be capped or properly braced prior to inspection.)
3. Slab before pour.
4. Framing, Rough Plumbing and Heating. (Truss certificates are required to be provided prior to framing inspection. Will also be checking for house wrap.) Approved plans shall be located on site to the inspector's use during inspection.
5. Ice and Water Barrier
6. Insulation and Vapor Barrier, to be completed in conjunction with the MecCheck or ResCheck as provided with application.
7. Other inspections deemed necessary by the Building Department.
8. Septic system to be inspected and certified by the designing engineer and the building inspector.
9. Final Inspection for Certificate of Occupancy.

Building Permits and Building Plans are to be posted on the site, covered for protection against the weather and accessible to the Building Inspector. If the permit and plans are not available, the inspection will not be performed.

**CERTIFICATE OF OCCUPANCY** - Prior to scheduling an inspection the following items must be on file with Town of Wilton Building Department:

**1. For Commercial Applications:**

- a. Truss certificates.
- b. Water test results: quality and quantity. (New test)
- c. Written certification, by a Licensed Professional Engineer, that the septic system has been installed as per the Town of Wilton and the New York State Department of Health Appendix 75-A.9
- d. A registered design professional shall provide to the code enforcement official a written certification that the required HVAC tests, system balancing, etc., have been performed and that, in the professional opinion of the registered design professional, the system is operating as designed. The registered design professional shall retain copies of the test reports to be provided to the code enforcement official, if requested.
- e. Certification from the plumbing, sprinkler, fire alarm and other building system installers that the system was installed and tested as per the requirements of the code and the system is operating as required.
- f. Certification from the roofing contractor that an ice barrier was installed as per the requirements of the code.
- g. Stamped as-built plans for the building.
- h. Stamped as-built site plan with certification from the designing engineer that the site substantially complies with the approved site plan.

- i. List of all interior finishes with a manufacturer's specification sheet indicating the flame spread.
- j. Proof of final electrical inspection.
- k. Such other information and/or certification deemed necessary by the Building Inspector to establish compliance of work performed.
- l. Premises identification as required by code.

**2. For Residential Applications:**

- a. Truss certificates. (Provided prior to framing inspection.)
- b. Water test results: quality and quantity. (Tested within four weeks of submission for C.O.)
- c. Written certification, by a Licensed Professional Engineer, that the septic system has been installed as per the Town of Wilton and the New York State Department of Health Appendix 75-A.9
- d. Manufacturer's installation manual for woodstove, insert and/or factory-built fireplace (if applicable)
- e. Written certification by the installer certifying the installation of the chimney, fireplace, factory-built fireplace, insert and/or woodstove.
- f. Stamped final survey.
- g. Proof of final electrical inspection.
- h. Premises identification as required by code.



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**DESCRIPTION OF MATERIALS**

SUBMIT WITH CORRESPONDING PLANS AND APPLICATION FOR BUILDING AND ZONING PERMIT ALL APPLICABLE SECTIONS MUST BE COMPLETED **BEFORE** BUILDING PERMIT CAN BE ISSUED.

**1. EXCAVATION:**

Type of Soil

**2. FOUNDATION:**

All concrete to be a min. 3000 P.S.I.

Footing Sizes:	Portland Cement Coat:	Yes	No
Foundation wall size & material:	Damp proofing material:		
Column Footing Size:	Termite Protection:		
Column size & material: /Spacing	Anchor Bolts:		O.C.
Girder size & material:	Footing drainage size (3" min. if req'd.)		
Footing depth: (min. 48" from grade to top of footing)			

**3. SLAB ON GRADE:**

Vapor barrier:	Perimeter insulation:
	Size & type:

**4. CRAWL SPACE:**

Clearance (30" min.):	Vapor barrier:	Yes	
Insulation:	Ventilation:	Yes	No
Footing depth:	Concrete Floor:	Yes	No

**5. CHIMNEY'S:**

Material: masonry metal	Flue size:
Thimble size:	Flue lining: clay metal
Prefabricated: Single Double Triple (wall)	Cleanout: yes no

**6. FIREPLACES:**

Type: solid fuel gas burning	Type: masonry prefabricated
Flue lining: clay metal	Fresh air: yes no
Flue size:	Ash dump & cleanout:
Hearth: yes no	Distance from firebox opening: Width Distance beyond each side
Fireplace facing:	

**7. WOODSTOVES:**

Woodstove:	yes	no	Insert:	yes	no
Make & Model:				New	Used

NOTE: A COPY OF THE MANUFACTURES INSTALLATION MANUAL **MUST** BE SUBMITTED WITH APPLICATION.

**8. FLOOR FRAMING:**

<b>SILL:</b>				
Size:	Type:	Sealant:	Yes	No

**1<sup>ST</sup> FLOOR:**

Joist grade:	Size & spacing:	OC	Bridging:
Sub-floor (material & size):	Finish floor material:		

**2<sup>ND</sup> FLOOR:**

Joist grade:	Size & spacing:	OC	Bridging:
Sub-floor (material & size):	Finish floor material:		

**9. EXTERIOR WALLS:**

Wood frame grade & species:	Stud size & spacing:	OC
Corner bracing: Yes No Material	Sheathing (thickness & type):	
Building paper:	Siding:	
Masonry veneer:	Brick ties:	

**10. INSULATION and VAPOR BARRIER (See also N.Y.S. Energy Code)**

(Size, material & R-factor)			
Roof:	Ceiling:		
Walls:	Slab (Perimeter):		
Foundation Walls:	Proper Vent:	Yes	No
Floors over unheated basement or garage:			

**11. PARTITION FRAMING:**

Stud grade:	Size & spacing:	OC
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**12. CEILING JOIST:**

Grade:	Size & spacing:	OC	Bridging:
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**13. ROOF FRAMING:** Minimum design for 50 lb. per sq. foot ground snow load:

Rafters, size & grade:	Ridge size:				
Collar ties: size OC	Trusses: OC	H Clip:	Yes	No	
Sheathing (thickness & type):					

**14. ROOFING:**

Material:	Weight:
Felt (15# min.):	Ice and water barrier required:

**15. INTERIOR FINISH (Sheetrock, size, etc.):**

Walls:	Ceiling:
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**16. STAIRS:**

Main:	Width:	Rise:	Run:	Headroom:
Basement:	Width:	Rise:	Run:	Headroom:
Other:	Width:	Rise:	Run:	Headroom:
	Width:	Rise:	Run:	Headroom:

NOTE: Maximum rise 8- 1/4 Minimum Run 9"+ 1- 1/4 nosing.

**17. PLUMBING: (Vent size through roof minimum 3")**

Sink drain size:	Vent size:	Lavatory drain size:	Vent size:
Water closet drain size:	Vent size:	Bathtub drain size:	Vent size:
Stall shower drain size:	Vent size:	Laundry drain size:	Vent size:
Water system piping:	Copper K L	Plastic	
Water heater:	Electric Gas	Other	

**BUILDING HOUSE DRAIN – SIZE & MATERIAL:**

4" House trap location (also show on plans):

**18. SEWAGE DISPOSAL:**

County/Town Sewer	Engineered and approved septic system:
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**19. HEATING**

BTUH RATING	Flue type & size:			
Type:	Heat Pump	Electric	Hot Water	Other
Fuel:	Electric	Gas	Oil	Other

**20. ATTIC VENTILATION:**

Ridge Vent:	Yes	No	Gable:	Yes	No
Soffit:	Yes	No	Other (description):		

**21. EXTERIOR DOORS:**

Main Entry Door size (min. 36")
House Door to Attached Garage size (min. 3/4 hr. fire rated, self closing & latching):
Other (specify type & size): 1.
2.
3.

**22. ELECTRICAL WIRING – Outside agency inspection by town approved agency:**

Safety switch for oil / gas burner:	Yes	No
Number of smoke and CO detectors (show on plans):		

**23. PORCHES:**

Footing size:	Footing Depth:
Foundation:	Size:

**24. GARAGE:**

Attached	Detached	Under living space	No. of stalls:
Footing size:	Footing Depth:		
Foundation size:	Poured	Block	
Sheetrock (size & fire rating):	Wall:	Ceiling:	
House Door to Attached Garage size (min. 3/4 hr. fire rated, self closing & latching):			

**REMARKS:**

I, THE UNDERSIGNED, DO HEREBY AGREE TO FURNISH, SUPPLY AND INSTALL THE AFOREMENTIONED MATERIALS AND COMPLY WITH THE SPECIFICATIONS SET FORTH ABOVE IN CONJUNCTION WITH THE ERECTION AND CONSTRUCTION OF THE BUILDING(S) FOR WHICH PLANS WERE SUBMITTED AND APPROVED. ALL ITEMS COMPLY WITH THE NEW YORK STATE UNIFORM FIRE PREVENTION & BUILDING CODE AND THE TOWN OF WILTON BUILDING APPLICATION REQUIREMENTS.

Date:

20

Applicant



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**Applicant's Responsibility Regarding  
Determination of Seasonal High Groundwater Elevation**

It is the responsibility of the Applicant to have the appropriate professional(s) determine the USGS elevation of the seasonal high groundwater of proposed buildings:

The basement or slab elevation for all buildings is required to be a minimum of three (3) feet above the seasonal high groundwater table elevation. All buildings constructed with a basement or slab elevation between three (3) and five (5) feet above the seasonal high groundwater table elevation shall be equipped with a sump pump which discharge to a closed drainage system or an adequate outfall as approved by the licensed professional and the Building Inspector of the Town of Wilton.

My acknowledgement of this responsibility is indicated by my professional signature (P.E. or approved Soils Scientist) for the property listed below:

Name of Applicant: \_\_\_\_\_

Location of Property: \_\_\_\_\_

USGS elevation of seasonal high groundwater: \_\_\_\_\_

Proposed basement/slab USGS elevation: \_\_\_\_\_

\* Verification of foundation/slab elevation:

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the foundation bottom was measured at USGS elevation of \_\_\_\_\_. This will result in a top of slab elevation of \_\_\_\_\_, based on the design plans for the building.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Professional (with stamp if by P.E.)

*Optional space below for additional stamp and signature if L.L.S. was involved:*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Stamp of L.L.S.

*\* Note: This portion of the form must be completed, recertified, and resubmitted prior to scheduling of footing inspection.*



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Applicant/Contractor:

The following is a list of items that must be met prior to the issuance of the Certificate of Occupancy:

1. Certification of the sprinkler system.
2. Certification of the electrical inspection.
3. A physical inspection for the placement of fire extinguishers.
4. Emergency lighting and fan shutdown tests.
5. Store must be stocked.
6. Any other items that may be deemed necessary.

The Town reserves the right to add any additional emergency lighting, exit lighting and fire extinguishers after the store has been stocked.

Effective: July 3, 1997

**NYS UNIFORM FIRE PREVENTION AND BUILDING CODE**  
**COMMERCIAL & MULTIPLE DWELLING OCCUPANCIES**

Owner/Project:  
 Building location:  
 Date:  
 Reviewer:

NYS BUILDING CODE (B)  
 NYS FIRE CODE (F)  
 NYS PLUMBING CODE (P)  
 NYS MECHANICAL CODE (M)  
 NYS FUEL GAS CODE (FG)  
 NYS ENERGY CODE (E)

No	Topic	Section	Req'd or Allowed	Actual
1	<b>Occupancy</b>	B-302		
2	<b>Type of Construction</b> Materials Comb/Non  <u>Fire Resistance</u> Structural Frame Bearing walls Floors Roof construction	B-602  B-Table 601		
3	<b>Bldg Height &amp; Area</b> Tabular Height (feet) Tabular Height (story) Tabular Area	B-503 B-Table 503		
4	<b>Height Modifications</b> Increase allowed  <b>Total Height Allowed</b>	B-504.2	Sprinkler	
5	<b>Area Modifications</b> <u>Area increase formula</u>  <u>Frontage Increase</u> (P) perimeter of bldg (F) frontage of bldg (W) average width  <u>Sprinkler Increase</u> Single story Multi story  <b>Total Area Allowed</b>	B-506.1 Eq 5-1  B-506.2 Eq 5-2  B-506.3	$A_a = \{A_t + [A_t \times I_f] + [A_t \times I_s]\}$  $I_f = [F/P - 0.25]W/30$  Min 20' Max 30'  300% ( $I_s = 3$ ) 200% ( $I_s = 2$ )	

No	Topic	Section	Req'd or Allowed	Actual
6	<b>Area Determination</b> (Cumulative)  <u>Mixed Occupancy</u> Non-separated  Separated uses	506.4  506.4.1	3 stories or more $3 \times A_s = \underline{\hspace{2cm}}$  Most restrictive x 3  Sum of Ratios x 2 (2 story) X 3 (3 story)	
7	<b>Multiple Use Bldg</b> <u>Incidental Use Areas</u>  <u>Mixed Occupancy</u> Accessory Occupancy  Non-separated  Separated Uses Rating required	B-508.2 B-Tbl 508.2  508.3 508.3.1  508.3.2  508.3.3 Tbl 508.3.3	No effect on Bldg Area Separate/Protect  <10%, no effect on area Story height limited - T503  Most restrictive height and building area  Sum of Ratios < 1	
8	<b>Atriums</b>  Definition Sprinkler Protection Smoke Control Enclosure Interior Finish Travel Distance	B- 404  B- 404.1.1 B- 404.3 B- 404.4 B- 404.5 B- 404.7 B- 404.8		
9	<b>Location on Property</b>  Fire Separation Distance Wall rating  Exterior Wall Openings	  B-Tbl 602  B-Tbl 704.8		



No	Topic	Section	Req'd or Allowed	Actual
13 (a)	<b>Exits - Occupant Load</b>  Egress Width (per occupant)  Number of Exits Spaces with one Buildings with one  Ceiling Height  Egress Illumination Emergency Power Exit Signs - where Emergency Power	B-Tbl 1004.1.1  B- 1005.1 B-Tbl 1005.1  B Tbl 1019.1 B Tbl 1015.1 B Tbl 1019.2  B- 1003.2  B- 1006.1 B-1006.3 B- 1011.1 B- 1011.5.3		
13 (b)	<b>Egress Components</b>  <u>Doors</u> Door Size Door Swing Operation (locks) Panic Hardware  <u>Stairs</u> Width Headroom Tread /Riser Vertical Rise  Handrails	  B- 1008.1.1 B- 1008.1.2 B- 1008.1.8 B- 1008.1.9   B-1009.1 B-1009.2 B-1009.3 B-1009.6  B-1012		
13 (c)	<b>Exit Access</b> Remoteness Travel Distance  Corridors Fire Rating  Width Dead ends	B-1015.2 B-1016.1 B-Tbl 1016.1  B-1017.1 Tab 1017.1 B-1017.2 B-1017.3		



No	Topic	Section	Req'd or Allowed	Actual
14	<b>H/C ACCESS</b> Exempt Spaces  Route Multilevel exception  Public Entrances  Parking  Dwelling/sleeping units Group R-1, R-2 #/type of units  Additional Facilities Toilet Facilities	B-1103.2  B-1104.1 B-1104.4  B-1105.1  B-Tbl 1106.1  B-1107 B-1107.6 B-Tb 1107.6.1.1  B-1109 B-1109.2	  3000SF aggregate  60% accessible        	
15	<b>Exterior Wall</b> Water resistive barrier  Condensation protection Class III allowed  Combustible Finishes  Balconies & projections	1403.2  B-1407.3 B-Tab 1407.3.1  1406.2 B-T 1406.2.1.2 B-1406.3		
16	<b>Roof Assemblies</b> Performance Req'ts Gravel/Stone limitation  Installation by Material	Chapt 15 Section 1504 B-1504.8 B-Tab 1504.8 B-1507		

17	<b>Structural Documentation 1603.1</b>				
	<b>Topic</b>	<b>Information required</b>	<b>Designer documentation</b>	<b>Required/Local conditions</b>	
	1603.1.1 Floor Live	Uniform distributed  Concentrated  Impact		Table 1607.1   1607.8	
	1603.1.2 Roof live				
	1603.1.3 Roof snow	Ground snow $P_g$  Flat roof $P_f$ ( $P_f = .7 P_g C_e / C_t$ ) Exposure $C_e$ Importance $I$ Thermal $C_t$		Fig 1608.2  ASCE 7 Sec. 7.3  Table 7-2 Table 7-4 Table 7-3	
	1603.1.4 Wind loads	Wind speed  Occupancy Category Importance factor $I$  Exposure  Internal pressure  Components, Cladding		Fig 1609  Tab 1604.5 ASCE 7, Tab 6-1  1609.4	

17	Structural Documentation 1603.1																																																								
	Topic	Information required	Designer documentation	Required/Local conditions																																																					
	1603.1.5 Earthquake design	Occupancy Category <i>Importance Factor I</i>  $S_s$ and $S_1$  Soils/Site Class  $S_{ds}$ and $S_{d1}$  Seismic Design Cat'y  Force resisting system  Design base shear  Response coef't, $CS$  Response factor(s), $R$  Analysis procedure		Table 1604.5: _____  Zip _____ $S_s$ _____ $S_1$ _____ SDC per Tab's 1613.5.6 (1)&(2) Completed by CEO <table border="1"> <tr> <th rowspan="2">Site</th> <th rowspan="2"><math>S_{ds}</math> <math>S_{d1}</math></th> <th colspan="3">SDC</th> </tr> <tr> <th>I&amp;II</th> <th>III</th> <th>IV</th> </tr> <tr> <td rowspan="2">A</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">B</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">C</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">D</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="2">E</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Site	$S_{ds}$ $S_{d1}$	SDC			I&II	III	IV	A									B									C									D									E								
Site	$S_{ds}$ $S_{d1}$	SDC																																																							
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	1603.1.6 Flood load (1612.5)	Flood Hazard Y/N Elev'n lowest floor Elev'n dry floodproof  High velocity wave Y/N Elev'n lowest horizontal member		FIRM/FBFM map date																																																					
	1603.1.7 Special loads	List loads and applicable code sections																																																							
	1603.1.8 Special Inspections (Seismic)	Submittal Required FOR: SDC $\geq$ C Resisting Sys SDC $\geq$ D Designated Sys SDC $\geq$ C Components																																																							

No	Topic	Section	Req'd or Allowed	Actual
18	<b>Fire Protection Eq'p Supervisory Service</b>	B-901.6		
	Sprinkler Systems Where required	F/B-903 F/B-903.2		
	Alt. Extinguishing Syst's	F/B-904		
	Standpipe Systems	F/B-905		
	Fire Extinguishers	F-906		
	Fire Alarm Systems Where required	F/B-907 F/B-907.2		
	Smoke Alarms	F/B-907.2.10		
	Visible Alarms	F-907.10.1 B-907.9.1		
	Smoke Control System	F-909		
	Smoke Vents	F-910		
	Kitchen Hood Ext'	F-609.8		

No	Topic	Section	Req'd or Allowed	Actual
19	<b>Plumbing Code</b> <u>Fixture Count</u>  <u>General Requirements</u> Pipe Freezing Pipe Hangers  <u>Water Supply</u> Service Pipe Size Fixture Pipe Size Pipe Material Valves required  <u>Sanitary Drainage/Vent</u> DWV Pipe Material Drain Fixture Units Bldg Drain Sizes  Stack and Branch size  Fixture vent location Waste Vent Size Air Admittance Valves	P-Tbl 403.1   P-305.6 P-Tbl 308.5  P-603.1 P-Tbl 604.5 P-Tbl 605.4 P-606.1, 606.2  P-702 P-Tbl 709.1 P-Tbl 710.1(1)  P-Tbl 710.1(2)  P-Tbl 906.1 P-Tbl 910.4 P-917		
20	<b>Mechanical Code</b> Ventilation Rates  Propane Ventilation Dryer Exhaust  Kitchen Exhaust Kitchen Hoods Kitchen Make-Up Air Cooking Fire Supres'n  Plenums Fire & Smoke Dampers  Combustion Air Confined Spaces--Def.	M-Tbl 403.3  M-502.9.10.1 M-504  M-506 M-507 M-508 M-509  M-602 M-607.5  M-701 M-202	Type 1 hood	

No	Topic	Section	Req'd or Allowed	Actual
21	<b>Fuel Gas Code</b> Appliance Location  Combustion Air Clearance Reductions Pipe Material Shut Off Valves  Chimney Termination Gas Vent Termination Exit Terminal Location Clothes Dryer Exhaust Unvented Room Heater	FG-303  FG-304 FG-Tbl 308.2 FG-403 FG-409  FG-Fig. 503.5.4 FG-Fig. 503.6.4 FG-503.8 FG-614 FG-621		
22 (a)	<b>Energy Code</b>  Climate Zone <u>Compliance Path</u> <input type="checkbox"/> ASHRAE  <input type="checkbox"/> Prescriptive  <input type="checkbox"/> Total Performance (Mandatory issues) <input type="checkbox"/> ComCheck	E-Tab 301.1  <i>ASHRAE</i>  E-502 - 505  E-506 E-501.2 except Software		
23 (b)	<b>Energy Code Prescriptive</b> <u>Building Envelope</u> Opaque elements    Fenestration  Vapor retarder  Mechanical System  Service Water Heating  Lighting and Power	E-502 E-Tab 502.2(1)    E-Tab 502.3  E-502.5  E-503  E-504  E-505		

# CERTIFICATION LIST

PROJECT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

FINAL SIGN OFF: \_\_\_\_\_ BY: \_\_\_\_\_

	Applicable	Non-Applicable	Received
1. <b>Soil Bearing Data</b>			
2. <b>Concrete</b>			
a. Footing (poured)			
b. Foundation (poured)			
c. Floors (poured)			
d. Precast			
3. <b>Steel</b>			
a. Reinforcement			
b. Column			
c. Beam			
d. Roof			
e. Connections			
4. <b>Electrical</b>			
a. Rough			
b. Final			
5. <b>Plumbing</b>			
a. Waste			
b. Vent			
c. Water Distribution			
d. Testing			

	Applicable	Non-Applicable	Received
6. <b>Energy Code Requirements</b>			
a. Floor			
b. Wall			
c. Ceiling			
d. Window & Door			
e. Design Criteria			
7. <b>Elevator</b>			
a. Installation			
b. Testing			
8. <b>Sprinkler &amp; Standpipe</b>			
a. Installation			
b. Testing			
9. <b>Fire Alarm System</b>			
a. Installation			
b. Testing			
10. <b>Design Loads</b>			
a. Snow			
b. Floor			
c. Wind			
d. Roof Drainage			
11. <b>Fire Suppression System</b>			
a. Installation			
b. Testing			



	Applicable	Non-Applicable	Received
12. <b>Rated Assemblies</b>			
a. Door			
b. Walls			
c. Fire & Smoke Dampers			
13. <b>Interior Finishes</b>			
a. Floor			
b. Wall			
c. Ceiling			
14. <b>Heating</b>			
a. Equipment			
b. Chimney/Flue/Gas Vent			
15. <b>HVAC</b>			
a. Equipment			
b. Installation			
c. Balancing			
d. Fan Shutdown			
16. <b>Fire Safety</b>			
a. Exit Signs			
b. Emergency Power			
c. Emergency Lighting			
d. Automatic Vents			
e. Smoke Doors			
17. <b>Septic System</b>			

**SARATOGA COUNTY SEWER DISTRICT #1  
CONSTRUCTION PERMIT APPLICATION**

Permit Number: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Project: \_\_\_\_\_

Project's Proponent: \_\_\_\_\_

Location of Project: \_\_\_\_\_

Tax Map Number (SBL) of Project's Location: \_\_\_\_\_

Projected Design Flow: \_\_\_\_\_ gpd      Projected Discharge Rate: \_\_\_\_\_ gpm

Name of Entity that will own sewer system through completion of construction: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of Project: \_\_\_\_\_

For each phase of project or connection, state the projected design flows and discharge rates:

Phase 1: Projected Design Flow: \_\_\_\_\_ Projected Discharge Rate: \_\_\_\_\_

Phase 2: Projected Design Flow: \_\_\_\_\_ Projected Discharge Rate: \_\_\_\_\_

Phase 3: Projected Design Flow: \_\_\_\_\_ Projected Discharge Rate: \_\_\_\_\_

Phase 4: Projected Design Flow: \_\_\_\_\_ Projected Discharge Rate: \_\_\_\_\_

Total Projected Design Flow: \_\_\_\_\_ Total Projected Discharge Rate: \_\_\_\_\_

Is sewer system proposed to be dedicated to Saratoga County Sewer District #1?

( ) Yes      ( ) No

Name of entity that will own sewer system if not dedicated to SCSD #1:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Contractor:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Property Owner/Developer:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Design Engineer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

Saratoga County Sewer District #1 requires the applicant for construction permit and the project's proponent to designate an agent to whom SCSD #1 shall direct all written, verbal and electronic communications to regarding the proposed project or sewer connection. **NOTE:** By naming such designated agent, the applicant and the project's proponent agree to be bound by all decisions communicated by said designated agent to SCSD #1 regarding the proposed project.

**Designated Agent:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Note:** SCSD #1's permit to construct sanitary sewer facilities or connections shall expire one (1) year from the date of its execution by SCSD #1 and the permittee.

**Applicant's Signature:** \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_

(please print)

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

For Office Use Only: Engineering Certification Required Yes \_\_\_\_\_ No \_\_\_\_\_

Special Conditions Attached Yes \_\_\_\_\_ No \_\_\_\_\_

**Fee:** \$ \_\_\_\_\_ **Days:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_ **Insp. Engr:** \_\_\_\_\_

**Check #** \_\_\_\_\_

**Insurance Certificate Approved Date:** \_\_\_\_\_ **Checked By:** \_\_\_\_\_

\_\_\_\_\_  
Permit Administrator

\_\_\_\_\_  
Date of Issue

**SPECIAL CONDITIONS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TEXT OF RULE**  
**Effective December 29, 2004**  
**19 NYCRR Part 1264**

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Subchapter C of Chapter XXXIII of Title 19 of the Official Compilation of Codes, Rules and Regulations of the State of New York is amended by adding a new Part 1264 to read as follows:

**Part 1264**

**IDENTIFICATION OF BUILDINGS UTILIZING TRUSS TYPE CONSTRUCTION**

**1264.1 Introduction.** Section 382-a of the Executive Law provides that commercial and industrial buildings and structures that utilize truss type construction shall be marked by a sign or symbol that informs persons conducting fire control and other emergency operations of the existence of truss construction. Section 382-a further directs the State Fire Prevention and Building Code Council to promulgate rules and regulations it deems necessary to carry into effect the provisions of the statute. This Part establishes certain requirements pertaining to the identification of buildings and structures that utilize truss type construction.

**1264.2 Enforcement.** (a) Subdivision 4 of section 382-a of the Executive Law directs local governments to provide for enforcement of the statute. Enforcement of section 382-a of the Executive Law shall include enforcement of the provisions of this Part. A fee of fifty dollars shall be paid by the owner of a building with truss type construction to the authority having jurisdiction for enforcement of section 382-a of the Executive Law prior to the issuance of a building permit.

(b) This Part shall not apply within a city with a population of one million or more persons.

**1264.3 Definition.** For the purposes of this Part, truss type construction shall mean a fabricated structure of wood or steel, made up of a series of members connected at their ends to form a series of triangles to span a distance greater than would be possible with any of the individual members on their own. Truss type construction shall not include:

- (1) individual wind or seismic bracing components which form triangles when diagonally connected to the main structural system; and
- (2) structural components that utilize solid plate web members.

**1264.4 Identification of truss type construction.** (a) Truss type construction shall

be identified by a sign or signs in accordance with the provisions of this Part.

(b) Signs shall be affixed where a building or a portion thereof is classified as Group A, B, E, F, H, I, M, or S occupancy, and in hotels and motels classified as Group R-1 or R-2 occupancy, in accordance with the provisions for the classification of buildings set forth in chapter 3 of the Building Code of New York State (see 19 NYCRR Part 1221).

(c) Signs shall be provided in newly constructed buildings that utilize truss type construction and in existing buildings where an addition that extends or increases the floor area of the building utilizes truss type construction. Signs shall be affixed prior to the issuance of a certificate of occupancy or a certificate of compliance.

(d) Signs identifying the existence of truss construction shall consist of a circle 6 inches (152.4 mm) in diameter, with a stroke width of ½ inch (12.7 mm). The sign background shall be reflective white in color. The circle and contents shall be reflective red in color, conforming to Pantone matching system (PMS) #187. Where a sign is directly applied to a door or sidelight, it may be a permanent non-fading sticker or decal. Signs not directly applied to doors or sidelights shall be of sturdy, non-fading, weather resistant material.

(e) Signs identifying the existence of truss construction shall contain the roman alphanumeric designation of the construction type of the building, in accordance with the provisions for the classification of types of construction set forth in section 602 of the Building Code of New York State (see 19 NYCRR Part 1221), and an alphabetic designation for the structural components that are of truss construction, as follows:

"F" shall mean floor framing, including girders and beams

"R" shall mean roof framing

"FR" shall mean floor and roof framing

The construction type designation shall be placed at the twelve o'clock position over the structural component designation, which shall be placed at the six o'clock position.

(f) Signs identifying the existence of truss construction shall be affixed in the locations specified in Table I-1264.

**TABLE I-1264**  
**TRUSS IDENTIFICATION SIGN LOCATIONS**

Sign location	Sign placement
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.
Multiple contiguous exterior building entrance or exit discharge doors	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

# 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)

\_\_\_\_\_  
(Homeowner's Name Printed)

Home Telephone Number \_\_\_\_\_

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.





# Forms

## Workers' Compensation Forms

### Applicant Instructions for Form CE-200 – Effective December 1, 2008

Form CE-200 reflects a totally new process for granting exemptions from workers' compensation and disability benefits insurance coverage requirements. Effective December 1, 2008, **exemptions** will no longer be valid for multiple permits, licenses or contracts for which the applicant applied. Further, exemptions no longer have to be notarized; nor do they have to be stamped by the NYS Workers' Compensation Board. (Please note that **government agencies may continue to use insurance and Self-Insurance certificates** for multiple permits, licenses or contracts issued to a specific legal entity during the coverage period listed on insurance/self-insurance related certificates).

**Starting December 1, 2008, ONLY** applicants eligible for **exemptions** must file a **new CE-200** for **each** and **every** new or renewed permit, license or contract issued by a government agency. Each CE-200 will specifically list the issuing government agency and the specific type of permit, license or contract requested by the applicant. Applicants for building permits will also need to supply additional information including identifying the specific job location and the estimated cost of the project.

Please ensure that the legal entity name on Form CE-200 exactly matches the legal entity name that is applying for the permit, license or contract. Please also ensure that the applicant signs and dates Form CE-200.

Each CE-200 will have a certificate number printed on it. Form CE-200s may be verified on the Board's web site at [www.wcb.state.ny.us](http://www.wcb.state.ny.us).

The applicant attests under penalty of perjury that the information contained in the CE-200 is accurate – the Board does not initially verify this information. However, Board staff may investigate applicants filing Form CE-200.

Government agencies have the authority to verify that the business is eligible for the workers' compensation and/or disability benefits exemption reason described on the CE-200 and notify the Board's investigative staff if there are discrepancies. For example, if you are applying for a license for a 150 seat restaurant and indicate on the CE-200 exemption form that you are a sole proprietor with no employees, this may indicate a problem.

To make this process as easy and as efficient as possible for business owners, the vast majority of these forms will be processed electronically on-line. Applicants having access to the internet will be able to fill out the CE-200 on the internet and immediately upon completion, be able to print out a hard copy of the CE-200 that they will then submit to the government agency issuing the permit, license or contract. Computers with internet access will also be available for CE-200 electronic application processing at Customer Service Centers located in Workers' Compensation Board District Offices.

Filling out the electronic Form CE-200 on the internet is very similar to filling out a hotel reservation request on the internet for frequent travelers. The applicant will create a pin and password so that they can easily access their information. Once an applicant enters his/her basic information on the Board's web site, it can be retrieved by that applicant in the future by using that pin number and password when the applicant is applying for another permit, license or contract.

Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the Customer Service Center at any District Office of the Workers' Compensation Board. Applicants using the manual process may wait up to four weeks before receiving a CE-200. Once the applicant receives the CE-200, the applicant can then submit that CE-200 to the government agency from which he/she is getting the permit, license or contract. This delay results from Workers' Compensation Board staff having to manually enter information from the applicant's paper application into the web based application.

**Employees of the Workers' Compensation Board cannot assist applicants in answering questions about this form. Please contact an attorney if you have any questions regarding Form CE-200.**

**However, if you have questions regarding workers' compensation coverage requirements, please call the Bureau of Compliance at (866) 546-9322.**

# **ELECTRICAL INSPECTION AGENCY**

## **COMMONWEALTH ELECTRICAL INSPECTION SERVICE, INC.**

Scott Honsinger  
(518) 225-2538 Cell

Damon Dzembo (Residential Only)  
(518) 858-4253 Cell

Ronald Mumblo (Residential Only)  
(518) 791-1348 Cell  
(518) 798-0905 Office

## **THE INSPECTOR, LLC**

David Irwin  
(518) 797-3520 Direct Line  
(518) 788-6235 Cell

Ken Vanderhoef  
(518) 674-2097 Direct Line  
(518) 339-4798 Cell

William McPartlon  
(518) 481-5300 Office  
(518) 229-7733 Cell

## **MIDDLE DEPARTMENT, INC.**

Joseph Holmes  
(518) 860-5705 Cell  
(518) 854-9290 Office

Martin Sawyer  
(518) 703-1244 Cell  
(518) 273-0861 Office

## **Z3 CONSULTANTS INC. Main Office (845) 471-9370**

Jon Ariel  
(518) 584-2189 Home  
(518) 527-5728 Cell

Gary E. Beck, Jr.  
(845) 518-2142 Cell

James Greaves (Residential Only)  
(914) 456-2221 Cell

**THIS IS A LIST OF THE INSPECTION AGENCIES APPROVED BY THE TOWN BOARD TO WORK IN THE TOWN OF WILTON. THIS DOES NOT CONSTITUTE A RECOMMENDATION OF ANY SPECIFIC AGENCY.**