

TOWN OF COEYMANS
Coeymans Hamlet Sewer District

18 RUSSELL AVENUE

RAVENA, NEW YORK 12143

Email: buildingdepartment@coeymans.org.

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SEWER PERMIT APPLICATION

DATE: _____ **SEW#:** _____ **PARCEL#:** _____ / _____ / _____

TYPE OF PERMIT REQUESTED

- New Residential Connections (Laterals) ...\$100.00
- New Commercial Connections (Laterals) ...\$200.00
- Industrial Permit (Three Year Maximum) ...\$300.00
- Disconnection Due To Abandonment/Non-payment...\$300.00
- Minor Repairs (Includes Inspection)...\$50.00
- Main Extensions to the System...\$500.00

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

HOME PHONE: () _____ **CELL PHONE:** () _____

ADDRESS OF IMPROVEMENT: _____

ITEMS REQUIRED FOR PERMIT

- COPY OF CERTIFICATE OF LIABILITY INSURANCE
- COPY OF WORKER'S COMPENSATION INSURANCE (FORM C-105.2)
'OR'
- COPY OF WORKER'S COMP INSURANCE EXEMPTED / NO EMPLOYEES (FORM CE-200)
- DRAWINGS SHOWING DIMENSIONS & LOCATION OF WORK BEING PERFORMED
- OWNER'S CONSENT FORM - IF NOT APPLICANT (ATTACHED)

- **PERMIT FEE** \$ _____
- **BONDING (IF REQUIRED)** \$ _____
- **TOTAL AMOUNT** \$ _____

*ALL PAYMENTS MUST BE MADE PAYABLE TO THE TOWN OF COEYMANS
AND SUBMITTED TO THE TOWN CLERK PRIOR TO COMMENCING WORK.*

OWNER / APPLICANT : _____
SIGNATURE

BUILDING DEPARTMENT: _____
SIGNATURE

ANTICIPATED START DATE OF WORK: _____ **20** _____

INSPECTED BY: _____ **TITLE:** _____

Town of Coeymans Building Department

OWNER'S CONSENT FORM

TO BE FILED WHEN THE APPLICANT IS NOT THE BUILDING OR PROPERTY OWNER

TAX MAP # _____ - _____ - _____ PERMIT# _____ - _____

NAME OF APPLICANT: _____

LOCATION: _____

DESCRIPTION OF WORK TO BE PERFORMED:

I / We _____, owner(s) of the above land/building hereby gives my/our permission to _____
(Applicant's name)
to submit the above identified application on my/our behalf and to represent me/us in all proceedings before the Town of Coeymans concerning the reference application.

Owner's Signature

Owner's Signature

Date:_____

PLOT PLAN FOR BP#

TAX MAP#

A large grid for drawing a plot plan. The grid consists of 20 columns and 30 rows of small squares, providing a scale for the drawing.

**Clearly locate and label all existing and proposed buildings and utilities.
Indicate all set back dimensions from property lines.**

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 homeowners 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 CE-200 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 # _____

Property Address that requires the building permit:

Once notarized, this BP-1 form 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),
- ◆self-insured (SI-12), or
- ◆are exempt (CE-200),

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(12/08).

- ◆ Form BP- 1shall 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(12/08), 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 (the C-105.2 or U-26.3 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) 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.