

# Village of Fort Plain Building and/or Zoning Permit Application

Below, please include a brief summary of the work to be performed:

---

---

---

---

---

It is very important that the attached building permit application be fully completed. Please make sure all areas are filled in and completed and the permit application is signed by the homeowner. Please complete the material list with any and all materials that will be used. The graph paper is supplied so that you may include a detailed drawing of the proposed structure. Please include all measurements, (including height, width, etc) and distances from front, side and/or rear property boundaries.

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_  
Please print name

.....  
Village office use  
Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Please print name

Date received by Code Enforcement Officer: \_\_\_\_\_ CEO Initials: \_\_\_\_\_

Amount pd: \_\_\_\_\_ date pd: \_\_\_\_\_

Permit # issued: \_\_\_\_\_ Date issued: \_\_\_\_\_

Code Enforcement Officer

**OFFICE OF  
VILLAGE CODES BUREAU  
168 CANAL STREET  
FORT PLAIN, NEW YORK 13339  
PHONE: (518) 993-4271 FAX (518) 993-2506**

**Request for a Building or Zoning Permit**

Name: \_\_\_\_\_ (Tel): \_\_\_\_\_

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

Contractor's Name: \_\_\_\_\_ (Tel): \_\_\_\_\_

Contractor's Insurance: Liability and Limits: \_\_\_\_\_

Worker's compensation secured by contractor \_\_\_\_\_ YES \_\_\_\_\_ NO

Disability Benefits secured by contractor \_\_\_\_\_ YES \_\_\_\_\_ NO

**Before a permit can be issued, the applicant must submit proof that the applicant has obtained the required worker's compensation and disability coverage or proof that the applicant is not required to provide such coverage.**

Project Location: \_\_\_\_\_ SBL#: \_\_\_\_\_

Architect or Engineer of record: Name, Mailing Address, Telephone No: \_\_\_\_\_

Size of proposed building, structure, or the enlargement, alteration, repair or demolition.: \_\_\_\_\_

Estimated cost : \_\_\_\_\_ Estimated time from start to finish: \_\_\_\_\_

**It is to be understood that all construction, repairs, alterations or demolition will be done in accordance with the New York State Uniform Building and Fire Prevention Code. Inspections will be made by the Code Enforcement Official at regular intervals during construction and prior to the issuance of a Certificate of Occupancy.**

**The Enforcement Official shall act upon all applications within a reasonable time, any refusal shall be given to the owner or authorized representative in writing and will state the reason for denial.**

**Building permits will expire six months from the date of issuance but may be extended by the code enforcement official if work is being done continuously on the project.**

**Fees may be paid in cash or by check made payable to the "Village of Fort Plain."**

# Village of Fort Plain – Building Permit Fees

Effective – 9/18/2008

	<i>Permit Fee</i>
New Home Construction	\$.15 per square foot
Addition to Home	\$.15 per square foot
Manufactured Housing	\$.15 per square foot
New Garage	\$.15 per square foot
<hr/>	
Remodeling or Renovations, I.E. Conversions of Non-Habitable to Habitable Space (Garage to Living Space)	\$25.00
Structural Changes to a Building, Foundation, Door or Window	\$25.00
<hr/>	
Tool Sheds or Storage Buildings (over 150 Square feet)	\$.15 Square foot
<hr/>	
<b>Note: All Storage Buildings regardless of size, building material, permanent or portable must adhere to: Zoning ~ Side and Rear Line Set Backs</b>	
<hr/>	
In Ground Swimming Pools ~ Require a Fence & Alarm	\$75.00
Spas & Hot Tubs ~ Require a Safety cover or Fence	\$10.00
Above Ground Pool 48" & up with Rigid metal Sides ~ No Fence required, an Alarm is required	\$10.00
On Ground Swimming Pools 24" & Up require a Fence & Alarm	\$10.00
<hr/>	
Re-roof ~ Rafters on up	\$50.00
Siding involving material alterations of the Structure	\$25.00
Patios & Decks	\$25.00
Chimneys	\$50.00
Heating/furnaces, ventilation, Central Air Conditioning (Solid fuel burning devices ~ fireplaces, fireplace inserts, wood & pellet stoves/boilers, etc...)	\$50.00
Septic Systems (new or replaced) In compliance with State Department of Health Regulations	\$50.00
Demolition (any)	\$25.00
Miscellaneous Permits	\$25.00
Agriculture Buildings (Qualifying by Ag land Status on Assessment Roll)	No Fee
Certificate of Occupancy	\$10.00
Certificate of Compliance	\$ 5.00

All building permit fees are subject to change as required by The Village Board

owner or authorized representative in writing and will state the reason for denial.  
Building permits will expire 30 months from the date of issuance but may be extended by the code enforcement official if work is being done continuously on the project.  
Fees may be paid in cash or by check made payable to the "Village of Fort Plain."

**Other:**

A flood plain permit may be required. If applicable, the Enforcement Officials will request it.

The applicant shall notify the Department of any change in the information contained in the application during the period for which the permit is in effect. A permit will be issued when the application has been determined to be complete and when the proposed work is determined to conform to the requirements of the Uniform Code. The authority conferred by such permit may be limited by conditions.

A building permit may be suspended or revoked if it is determined that the work to which it pertains is not proceeding in conformance with the Uniform Code or with any condition attached to such permit, or if there has been a misrepresentation or falsification of a material fact in connection with the application for a permit.

A building permit shall expire Thirty-six (36) months from the date of issuance or upon the issuance of a certificate of occupancy (other than a temporary certificate of occupancy) whichever comes first. The permit may, upon written request be renewed for a successive six month period provided that (1) the permit has not been revoked or suspended at the time the application for the renewal is made; (2) the relevant information in the application is up to date; and (3) the renewal fee is paid.

**Submission:**

One set of Plans (including site, landscaping, elevations, sections, details, dimensions and schedules) and specifications describing the proposed work are to be submitted with each application. All plans and specifications shall be in accordance with the State Education Law, Sections 7307 and 7209. The law requires that the seal and signature of a licensed architect or professional engineer be affixed to all plans submitted, except in the case of residential buildings under 1500 square feet of living area or to alterations costing under ten thousand dollars (\$10,000).

**Certification**

I hereby certify that I have read the instructions and examined this application and known the same to be true and correct. All provisions of Laws and Ordinances covering this type of work shall be complied with whether or not set forth herein. The Granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction.

\_\_\_\_\_  
Owner or agent for owner (sign and print name)

Date: \_\_\_\_\_

MATERIAL LIST  
CONSTRUCTION UNDER \$10,000

(Circle 1 or more)

ADDITION: BATH KITCHEN GARAGE BARN  
DECK PORCH OTHER \_\_\_\_\_

Size of addition: \_\_\_\_\_

ALTERATION: BATH KITCHEN BASEMENT DECK  
PORCH OTHER \_\_\_\_\_

Size of addition: \_\_\_\_\_

FOUNDATION FOOTING:

Size \_\_\_\_\_ Concrete strength \_\_\_\_\_ Reinforcing \_\_\_\_\_

FOUNDATION WALL: Concrete \_\_\_\_\_ Size \_\_\_\_\_ Cement block size \_\_\_\_\_

OTHER CONCRETE WORK: Floor \_\_\_\_\_ Sidewalk \_\_\_\_\_

Other \_\_\_\_\_ Reinforcing \_\_\_\_\_

FRAMING:

Outside wall: STUDS \_\_\_\_\_ SHEATING \_\_\_\_\_

Inside Walls: STUDS \_\_\_\_\_

1st Floor Joist \_\_\_\_\_ Subflooring \_\_\_\_\_

2nd Floor Joist \_\_\_\_\_ Subflooring \_\_\_\_\_

Ceiling Joist \_\_\_\_\_ Rafters \_\_\_\_\_

Truss \_\_\_\_\_ Sheating \_\_\_\_\_

Treated Poles \_\_\_\_\_ Size \_\_\_\_\_

INSULATION: Foundation \_\_\_\_\_

1st Floor \_\_\_\_\_ Sidewalls \_\_\_\_\_

Ceiling at Roof \_\_\_\_\_ Other \_\_\_\_\_

**WALL FINISH:**

Outside \_\_\_\_\_ Interior Walls \_\_\_\_\_

Thickness \_\_\_\_\_ Ceiling \_\_\_\_\_

Thickness \_\_\_\_\_ Floor \_\_\_\_\_

**ROOFING:**

Type \_\_\_\_\_ Felt \_\_\_\_\_

Drip Edge \_\_\_\_\_ Other \_\_\_\_\_

**HEATING:**

Type \_\_\_\_\_ New \_\_\_\_\_

Existing \_\_\_\_\_ Supplemental \_\_\_\_\_

**PLUMBING:**

New \_\_\_\_\_ Reuse \_\_\_\_\_

Additional \_\_\_\_\_ Type of Piping \_\_\_\_\_

Sink \_\_\_\_\_ Bathtub \_\_\_\_\_

Lavatory \_\_\_\_\_ Shower \_\_\_\_\_

Water Closet \_\_\_\_\_ Stall Shower \_\_\_\_\_

Laundry \_\_\_\_\_

**ELECTRIC:**

New Service YES \_\_\_\_\_ NO \_\_\_\_\_

New Panel YES \_\_\_\_\_ NO \_\_\_\_\_

Number outlets \_\_\_\_\_ Number switches \_\_\_\_\_

Smoke detector \_\_\_\_\_ Use of C.F.I. \_\_\_\_\_

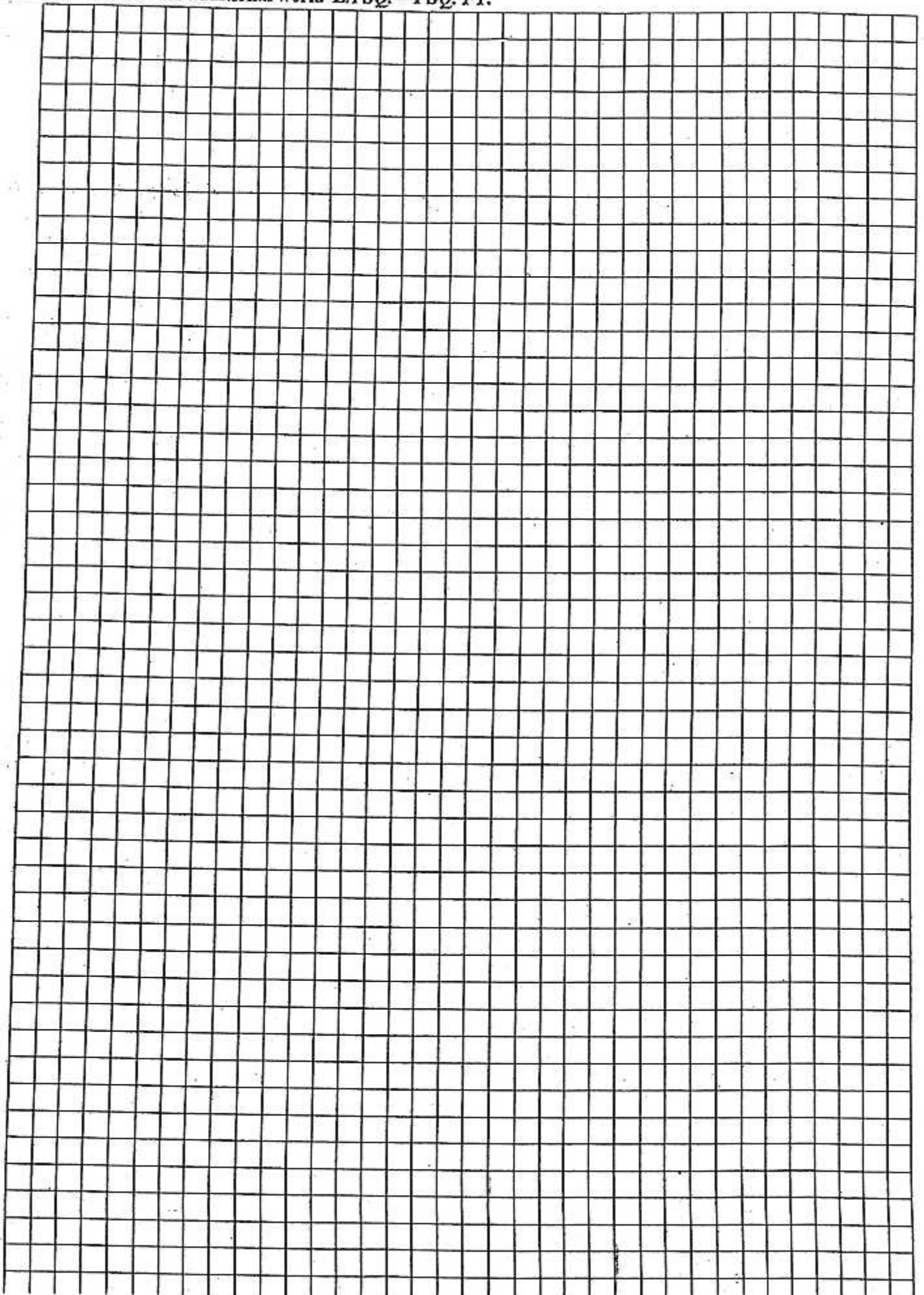
**MISCELLANEOUS:**

Cabinets \_\_\_\_\_ Windows \_\_\_\_\_

Doors \_\_\_\_\_ Stairs \_\_\_\_\_

Driveway \_\_\_\_\_

relationship. Indicate all partitions, new or existing. Indicate all dimensions carefully. Show new plumbing and electric. Use back for additional work.  $EA\ SQ. = 1\ SQ.\ FT.$



**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.



DAVID A. PATERSON  
GOVERNOR

STATE OF NEW YORK  
WORKERS' COMPENSATION BOARD  
20 PARK STREET  
ALBANY, NY 12207



ZACHARY S. WEISS  
CHAIR

December 1, 2008

To all Code Enforcement Officials, Building Departments, and Municipal Entities:

Effective January 18, 1999, Section 125 of the General Municipal Law requires that any individual applying for a building permit must prove to the building department that he/she is in compliance with the mandatory coverage provisions of the Workers' Compensation Law before the building permit is issued.

#### General Background

Under Section 57 of the Workers' Compensation Law, businesses listed as the general contractors on building permits are required to submit proof of compliance with the mandatory coverage provisions of the Workers' Compensation Law to the building department before a building permit is issued. Section 125 of the General Municipal Law is specifically targeted at ensuring that all applicants who list themselves as the general contractors on the building permit are in compliance with the mandatory coverage provisions of the Workers' Compensation Law.

For homeowner applicants, the instruction manual includes a link to form BP-1 Affidavit of Exemption to Show Specific Proof of Workers' Compensation Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence. The law requires homeowners to provide proof of workers' compensation compliance when applying for a building permit. If the homeowner qualifies for an exemption, the homeowner must either complete this form and file it with the local building department; or the homeowner must complete Form CE-200 and file it with the local building department.

#### Implementing Section 125 of the General Municipal Law

##### 1. General contractors and Business Owners

Businesses listed as the general contractors on building permits, must prove that they are in compliance with the mandatory coverage requirements and also Section 57 of the Workers' Compensation Law (WCL) by producing ONE of the following forms indicating that they are:

- insured (Form C-105.2 or U-26.3 – the business's insurance carrier will send this form to the building department upon the business's request) All private carriers and their licensed insurance agents are authorized to issue the form C-105.2 as their Certificate of NYS Workers' Comp Insurance. The State Insurance Fund uses the U-26.3 form as its Certificate of NYS Workers' Compensation Insurance.
- self-insured (Form SI-12 -- Certificate of Workers' Compensation Self-Insurance (the business calls the Board's Self-Insurance Office at 518-402-0247), OR Form GSI-105.2 -- Certificate of Participation in Workers' Compensation Group Self-Insurance) (the business's Group Self-Insurance Administrator will send this form to the government entity upon request).
- exempt (Form CE-200 – {Form CE-200 is available on the Board's website, [www.wccb.state.ny.us](http://www.wccb.state.ny.us), under the heading "Forms." Paper applications for this form are available by writing or visiting any Customer Service Center at any District Office of the Workers' Compensation Board.})

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. (Please note: ACORD forms are **NOT** acceptable proof of workers' compensation coverage!)

Owner-occupied Residences

Homeowners of a 1, 2, 3, or 4 Family, Owner-occupied Residence, must file form BP-1 when applying for a building permit when they are:

- 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, 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 must either:
  - acquire appropriate workers' compensation coverage and provide, to the government entity issuing the building permit, appropriate proof of that coverage, on forms C-105.2 or U-26.3, OR
  - have the general contractor performing the work provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage, to the government entity issuing the building permit.

**Background on Coordinating the Implementation of Section 125 of the General Municipal Law with Existing Statutes**

To ensure that homeowners are not required to have duplicate workers' compensation coverage, the implementation form attempts to coordinate compliance with Section 125 of the Municipal Law with coverage provided under Section 3420(j) of the Insurance Law, which is the homeowner's policy's workers' compensation insurance rider.

As of March 1, 1985, New York State Insurance Law § 3420(j) provides that every policy of comprehensive personal liability insurance (i.e., homeowner's insurance) on a 1, 2, 3, or 4 Family owner-occupied dwelling (including condominiums) will also provide workers' compensation benefits. This section was added to protect the homeowner from unexpected liability when the Board determines that a person, whom the homeowner did not believe required coverage, is found to be entitled to benefits. To receive benefits under this policy, the employee must be found by the Board to have been injured in employment of the policyholder and employed for less than 40 hours a week in and about the owner's 1, 2, 3, 4 family residence in this State.

Form BP-1 is available on the Board's website, [www.wcb.state.ny.us](http://www.wcb.state.ny.us), under the heading "Forms." Please make as many copies of the BP-1 as you require. The BP-1 form reflects the minimum standard to be applied statewide. If a municipality wishes to collect a copy of the certificate of insurance from a building permit applicant's homeowner's insurance policy or obtain a copy of the information page from the building permit applicant's homeowner's insurance policy, the municipality could make that a local requirement which would be in addition to the State requirement.

If you have any questions regarding the BP-1 form, Section 125 of the General Municipal Law or Section 57 of the Workers' Compensation Law, please contact Steve Carbone of the New York State Workers' Compensation Board at (518) 486-6307.

Thank you for your office's cooperation in enforcing Section 125 of the General Municipal Law and Section 57 of the Workers' Compensation Law.

Sincerely,

Peter Michels  
Director of Compliance