



TOWN OF MARBLETOWN
BUILDING & SAFETY
1925 Lucas Avenue, Cottekill, NY 12419
P.O. BOX 217 STONE RIDGE, NY 12484

Office use only:

Name: _____

SBL _____
BARN PERMIT

BARN PERMIT APPLICATION
STORAGE AND AGRICULTURAL ZONING
AND BUILDING PERMIT APPLICATION

Fill out permit application and attach the following documents.

DEED- Copy of your **filed deed**. Must show Liber and page number. If none on file, call the Assessor's office at 687-7500 x 172

911 ADDRESS- May be required. It is your property address

SITE PLAN- Showing location of **all Existing structures, well, septic and electric lines, and new structure(s)**.
Include all dimensions from the center of road, and from the side and rear property lines and complete # 6 & 7
Must show location of well, septic and electric lines

PLANS- Submit (1) Full Set Signed & Stamped, (1) Set 11x7, (1) Digital on Flash Drive or Disk.
Hand drawn plans must submit 2 full sets of plans on letter or legal size paper only.

Do you currently have any applications with the Planning/Zoning Board Pending _____ YES _____ NO

LETTER OF CONSENT -
If the Contractor/Applicant is not the owner of the premises, a letter of agent from the owner,
designating the applicant as their agent is required (only if the homeowner has not signed the application)

CHECK- Please bring a check payable to the Town of Marbletown, Please have Phone Number on Check

INSURANCE INFORMATION - **MUST ATTACH INSURANCE FORM** - We DO NOT keep certificates "on file"
_____ contractors proof of Liability (Acord form) and Workers' Compensation (C105.2 or U26.3)
_____ contractors proof of Liability (Acord form) and Workers' Compensation Exempt form
_____ Homeowners can obtain a CE-200 Form online (directions are included in packet)

PRE-SITE INSPECTION- Submit your application and schedule a pre-site inspection.
So meone must be on site for this inspection

ADDITIONAL PAPERWORK REQUIRED ONLY IF HEAT OR SEPTIC IS BEING INSTALLED

BOARD OF HEALTH APPROVAL - If applicable, their phone number is 845-340-3018

RES CHECK CALCULATIONS - If heat is being installed: We are Using Stretch Code. You can find information on Marbletown.net under forms & documents.
Any questions please call Bldg inspector at 845-687-7500 x 168 or email inspector@marbletown.net

Electrical Work - Name of Electrician _____ Ulster County Lic # _____

2020 RESIDENTIAL CODE REVIEW CHECKLIST - To be completed by a NYS Licenced Professional -ask office for this packet

2010 ENERGY CODE CYCLE - Choose option # 1 or # 2 and fill out required information -ask office for this form

APPLICATION COMPLETE, RECEIVED AND CHECKBY: _____ DATE: _____
(office use only)

The work covered by this application may not be started before the issuance of a Permit, Site Plan or Variance depending on the circumstances of the project. Site inspection is required for some projects prior to issuance of Building Permit. Scheduling ALL inspections including final inspection to secure Certificate of Occupancy or Compliance is the responsibility of the Owner/Agent

Only a complete packet and original copy (not faxed or emailed) of the application will be accepted for processing with ALL documents submitted. Once a complete packet is received we will start the process. Allow a Minimum of two weeks for code review (14 business days)
Any questions, please do not hesitate to email or call our office

TOWN OF MARBLETOWN
BUILDING AND ZONING PERMIT APPLICATION
PRINT CLEARLY and COMPLETE ALL INFORMATION:

OWNER: _____ APPLICANT: _____

MAILING ADDRESS: _____ MAILING ADDRESS: _____

PHONE NUMBER: _____ PHONE NUMBER: _____

CELL NUMBER: _____ CELL

NUMBER: _____

WORK NUMBER: _____ WORK NUMBER: _____

E-MAIL _____ E-MAIL _____

PROPERTY LOCATION OF WHERE WORK IS BEING DONE:

PROJECT MANAGER (person overseeing project):

IS STRUCTURE ALREADY BUILT- ___ YES ___ NO (Work started without permit is subject to \$150.00 + permit fee+zoning fee)

Name: _____ pho ne no: _____

email: _____

1. SECTION _____ BLOCK _____ LOT _____ NUMBER OF ACRES _____

2. EXISTING USE AND OCCUPANCY OF PROPERTY: _____ RESIDENTIAL, _____ VACANT LAND _____ OTHER _____

3. NATURE OF WORK: _____ DEMOLITION _____ NEW _____ ADDITION _____ ALTERATION _____ REPAIR

4. GIVE A BRIEF DESCRIPTION OF THE WORK BEING DONE: _____

5. CONSTRUCTION: CHECK ALL THAT APPLY

_____ BARN: NUMBER OF STORIES () 1 () 1/2 () 2
_____ WITH STORAGE ON TOP _____ FULL BASEMENT
_____ WITH FOUNDATION _____ WITHOUT FOUNDATION
_____ WITH PORCH _____ DECKS
_____ ROOFING MATERIAL () ASPHAL T SHINGLES () WOOD SHINGLES () METAL ROOF
_____ OTHER _____

6. DIMENSIONS OF PROPOSED STRUCTURE: LENGTH _____ WIDTH _____ HEIGHT _____

7. SETBACKS: _____ FROM CENTER OF ROAD _____ REAR _____ LEFT _____
RIGHT

8. WILL ELECTRIC BE INSTALLED? _____ (Y) _____ (N) IF YES, MUST BE INSPECTED BY A TOWN APPROVED AGENCY

9. WILL THERE BE PLUMBING? _____ (Y) _____ (N) IF YES, SUBMIT UCBOH APPROVAL

10. HEAT TYPE: () NONE WILL BE INSTALLED () HOT AIR () HOT WATER/STEAM () ELECTRIC () OIL () GAS

11. WILL CENTRAL A.C. BE INSTALLED? _____ (Y) _____ (N)

WILL A GENERATOR BE INSTALLED? _____ (Y) _____ (N)

WILL THRE BE DECKS INSTALLED? _____ (Y) _____ (N)

12. SOLID FUEL BURNING APPLIANCE _____(Y) _____(N) IF YES, SEPARATE APPLICATION REQUIRED

13. TYPE OF USE: () PERSONAL, () BUSINESS, () MIXED OCCUPANCY, SPECIFY EACH TYPE OF USE: _____

14. HAS THE CONSTRUCTION SITE (OR PORTION THEREOF) BEEN DESIGNATED AS A FLOOD HAZARD OR WETLANDS (AS PER FLOOD INSURANCE RATE MAP OR STATE WETLAND MAPS): _____(Y) _____(N)

15. CONTRACTOR _____(YES) _____(NONE) (If none attach notarized BP-1 Homeowners waiver)

CONTRACTORS INFO:

NAME _____

MAILING ADDRESS _____

PHONE # _____

CELL # _____

E-MAIL _____

LIABILITY EXP DATE _____

WORKMENS COMP EXP DATE _____

WORKMENS COMP EXP _____

16. ELECTRICIAN _____(YES) _____(NONE)

NAME _____

MAILING ADDRESS _____

PHONE# _____

CELL# _____

ULSTER COUNTY LIC# _____

17. PLUMBER _____(YES) _____(NONE)

NAME _____

MAILING ADDRESS _____

PHONE# _____

CELL# _____

18. ARCHITECT _____(YES) _____(NONE)

NAME _____

MAILING ADDRESS _____

PHONE# _____

19. COST OF CONSTRUCTION \$ _____ (INCLUDING ALL LABOR AND MATERIALS)

Upon accepting this permit, you have acknowledged that you are required to notify this office a minimum of 48 hours in advance for inspections that pertain to your project. A list of inspections will be attached to the required on site building plans which will include your permit.

Dig Safely Master Member List By law, Excavators must call Dig Safely, New York at 1-800-962-7962 E-mail: www.digsafelynewyork.com at least 2 full working days before to request a stake-out of underground utility lines. As of March 16, 1996 the following organizations own buried facilities in the Town of Marletown and are members of the Dig Safely, New York "one-call" notification system. Note: this list does not contain members in any villages or cities that may exist in this town. One free phone call to Dig Safely, New York Contact: Organizations: CENTRAL HUDSON GAS & ELECTRIC, NEW YORK TELEPHONE C/O BYERS ENGINEERING, HIGH FALLS WATER DISTRICT. I (we) understand that it is a violation of the Town of Marletown Zoning Law to use/occupy without first obtaining a Certificate of Occupancy/Compliance from the Codes Enforcement Officer. MAXIMUM \$250.00/WEEK AND OR IMPRISONMENT. I (we) the undersigned, understand that any incomplete or omitted information on plans and/or description of work as submitted to the building department for the issuing of a building permit shall be constructed/installed in compliance with all applicable rules, regulation and codes in effect at the time of this signing. I hereby grant the building inspector or his or her authorized agent permission to enter upon the premises and into any building or building structures thereon at anytime during working hours without being subject to arrest or civil suit for trespassing. I (we) understand that if a permit is issued, it is valid for one year of date of issuance and a fee of \$50.00 or 10% of the original permit fee (whichever is higher) will be applied for renewal each year thereafter if applicable.

20. _____ / _____ Date: _____
Signature of Owner(s)

21. _____ / _____ Date: _____
Signature of Contractor/Builder Signature of Applicant

Name and phone number to call when permit is ready _____ # _____
If none, permit will be mailed to homeowner address on file

OFFICE USE ONLY: () Permit Approved () Referred to Planning Board () Referred to Zoning Board

_____Z_____B_____SF_____CCF_____6_____12 S/B/L#_____

ZONING PERMIT: () N/A () APPROVED () DENIED () DISAPPROVED REASON _____

ZONING PERMIT NUMBER _____ **DATE** _____

BUILDING PERMIT: () N/A () APPROVED () DENIED () DISAPPROVED REASON _____

BUILDING PERMIT NUMBER _____ **DATE** _____

FEES PAID:

ZONING PERMIT FEE \$ _____

BUILDING PERMIT FEE \$ _____

OTHER \$ _____

TOTAL AMOUNT DUE \$ _____

CHECK BY: _____ OWNER, _____ OTHER

CHECK NUMBER _____ **CASH** _____

RECEIPT # _____ **DATE:** _____

Certificate of Attestation of Exemption



NEW YORK
STATE OF
OPPORTUNITY

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.

PLOT PLAN AND LOCATION INFORMATION

Locate deck, main building (including additions), any accessory structures, swimming pool, etc. Give all yard dimensions.

Diagram illustrating the Plot Plan and Location Information. The lot is bounded by the LEFT LOT LINE, RIGHT LOT LINE, and REAR LOT LINE. The dimensions are indicated by arrows and labels:

- LEFT LOT LINE: _____ FT
- RIGHT LOT LINE: _____ FT
- REAR LOT LINE: _____ FT
- LEFT YARD: _____ FT
- RIGHT YARD: _____ FT
- FRONT YARD: _____ FT
- REAR YARD: _____ FT

The central structure is labeled MAIN BUILDING.

Name: _____

Address: _____

Be sure to show where the
WELL, SEPTIC AND ELECTRIC are
on the property



This is an EXAMPLE of
how a project should be staked
out for a pre-site inspection

Your House Number
MUST BE POSTED AND VISABLE
for us to find you so we can help you.



Make sure your house number is posted and clearly visible from both directions on the road. Be sure to keep all trees and grass trimmed around the sign and make sure the sign is reflective.