



NAME: \_\_\_\_\_

SBL# \_\_\_\_\_

GENERATOR PERMIT APPLICATION

## GENERATOR PERMIT APPLICATION

Complete the attached permit application and attach the following  
If incomplete application will be returned.

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

\_\_\_\_ **911 ADDRESS**- If none on file, call the Assessor's Office and they will assign one for you- 687-7500 x 172

\_\_\_\_ **ULSTER COUNTY ELECTRICIANS LICENSE NUMBER #** \_\_\_\_\_

\_\_\_\_ **SITE PLAN**- submit one site plan and one on CD OR PDF  
Must show location of **all Existing structures, well, utilities lines, septic and new structure(s)**  
Include all dimensions from the center of road and from the side and rear of property lines  
Must show location of well, septic and electrical lines and complete # 6 & 7

\_\_\_\_ **PLANS**- attach a copy of the **Manufacturers brochure and Installation manual**

\_\_\_\_ **LETTER OF CONSENT**- If the Contractor/Applicant is not the owner of the premises, a letter of agent from the owner,

\_\_\_\_ **IS STRUCTURE ALREADY BUILT**: \_\_\_\_ YES \_\_\_\_ NO ( Work started with out permit is subject to \$150.00 + permit fee + zoning fee )

\_\_\_\_ **CHECK**- please bring a check payable to the Town of Marbletown

\_\_\_\_ **PRE-SITE INSPECTION**: Submit your application and schedule a pre-site inspection

\_\_\_\_ **INSURANCE INFORMATION** -**MUST ATTACH INSURANCE FORMS**- we do not keep forms on file  
\_\_\_\_ Contractors proof of Liabilty (**Acord Form**) and Workers' Compensation (**C105.2 or U26**)  
Liability exp date \_\_\_\_\_ Workmens Comp exp date \_\_\_\_\_ Workmens Comp exempt \_\_\_\_\_  
\_\_\_\_ Contractors proof of Liabilty (**Acord Form**) and **Worker's Compensation Exempt Form**  
\_\_\_\_ **Homeowner can obtain CE-200 form online ( directions included in this packet)**  
*We do not keep insurance certificates on file - you must include them in with this application*

\_\_\_\_ **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. A 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 the 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).*

**GENERATOR PERMIT APPLICATION**  
**PRINT CLEARLY AND COMPLETE ALL INFORMATION**

(If not completed, application will be returned)

OWNER: \_\_\_\_\_ APPLICANT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

HONE NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_ CELL NUMBER: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_

**PROJECT MANAGER ( Contact Person overseeing project)**

Name \_\_\_\_\_ Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

1. SECTION \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ NUMBER OF ACRES \_\_\_\_\_ ZONING DIST. \_\_\_\_\_

2. EXISTING USE AND OCCUPANCY OF PROPERTY: \_\_\_\_\_ SINGLE FAMILY RESIDENTIAL, \_\_\_\_\_ COMMERCIAL

3. MAKE OF GENERATOR \_\_\_\_\_

4. MODEL NUMBER OF GENERATOR \_\_\_\_\_

5. ( ) GENERATOR WILL BE PERMANENT WITH PAD- attach brochure to application

( ) GENERATOR WILL BE PORTABLE WITHOUT PAD- attach brochure to application

( ) # \_\_\_\_\_ KW

6. SETBACKS FROM CENTER OF ROAD \_\_\_\_\_ REAR \_\_\_\_\_ LEFT \_\_\_\_\_ RIGHT \_\_\_\_\_

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

8. CONTRACTOR \_\_\_\_ YES ~ attach workmens' comp C105.2 OR U 26.3 form and liability certificates ACCORD form

\_\_\_\_ NONE ~ attach CE-200 form

**WE CANNOT ACCEPT APPLICATIONS WITHOUT THE PROPER INSURANCE CERTIFICATES**

Contractors: have your insurance company fax or email you your insurance certificates and submit them with this application

We do not keep certificates "on file"

9. NAME OF CONTRACTOR \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ CELL NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

\*\*LIABILITY EXPIRATION DATE: \_\_\_\_\_ W/C EXPIRATION DATE: \_\_\_\_\_

W/C EXEMPT EXP DATE: \_\_\_\_\_

10. ELECTRICIAN \_\_\_\_ YES \_\_\_\_ NONE

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL NUMBER \_\_\_\_\_

\*\*ULSTER COUNTY LIC# \_\_\_\_\_

12. 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](http://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 Marbletown 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 Contacts: Organizations: CENTRAL HUDSON GAS & ELECTRIC, N.Y. TELEPHONE C/O BYERS ENG., ROLLING MEADOWS WATER CORP. AND THE HIGH FALLS WATER DISTRICT.

I (we) understand that it is a violation of the Town of Marbletown Zoning Law to use/occupy without first obtaining a Certificate of Occupancy/ Compliance from the Codes of 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 issued, it is valid for one year to 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.

Signature of Owner(s) \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Contractor/Builder \_\_\_\_\_ / Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

If you would like to pick up the permit when ready please provide your name & number to call below:  
please print clearly - if not filled in, permit will be mailed to address on file

\_\_\_\_\_  
Name Phone #

BUILDING PERMIT # \_\_\_\_\_ ZONING PERMIT # \_\_\_\_\_

BLDG FEE:	\$ _____	CHECK BY _____ OWNER, _____ OTHER/CONTRACTOR
ZONING FEE:	\$ _____	
W/O PERMIT FEE:	\$ _____	CHECK # _____ RECEIPT # _____
TOTAL AMOUNT DUE	\$ _____	





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

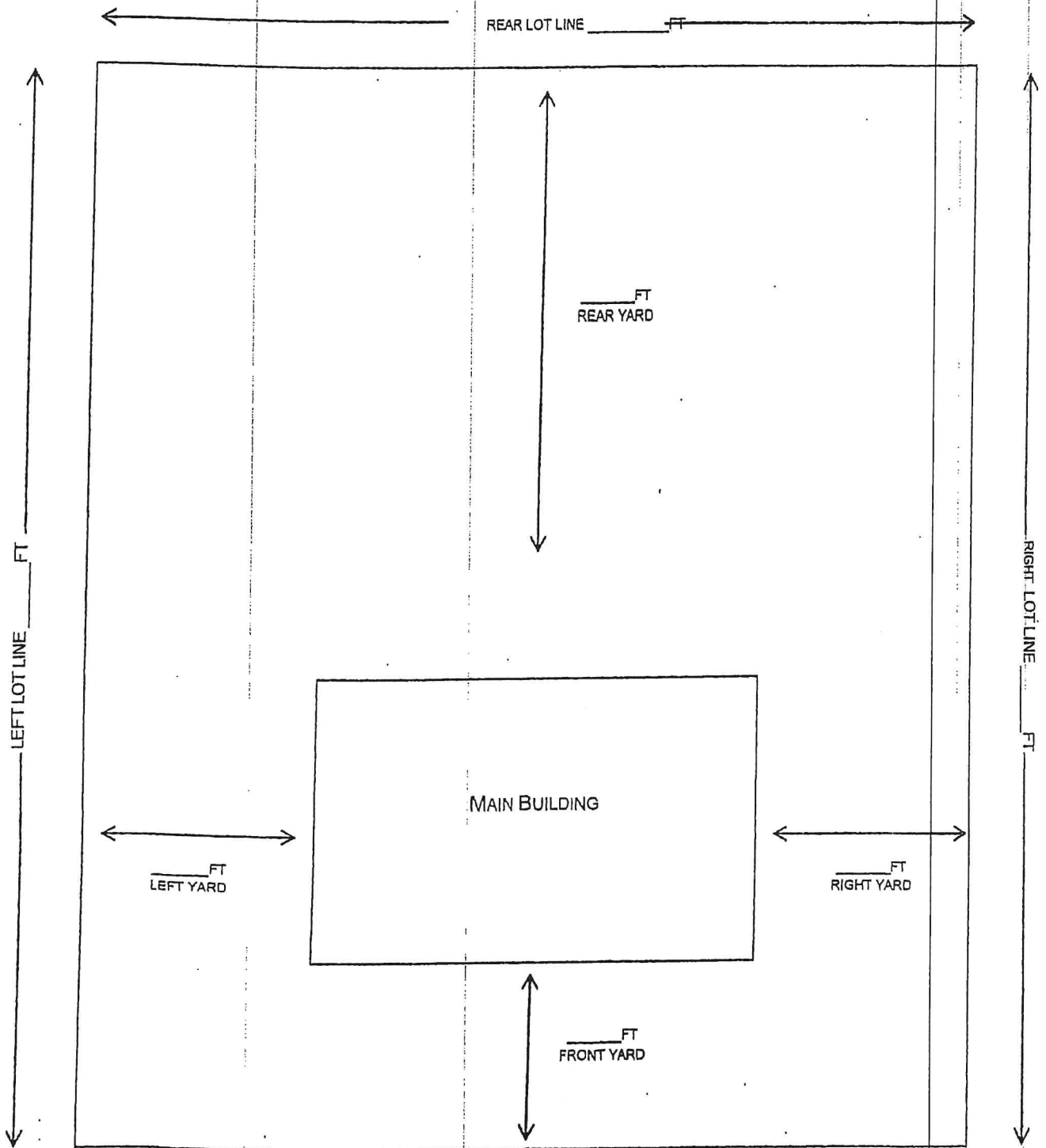
Your House Number  
**MUST BE POSTED AND VISABLE**  
for us to find you so we can help you.



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.

## PLOT PLAN AND LOCATION INFORMATION

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



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

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

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



# 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](https://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](https://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.