



TOWN OF MARBLETOWN
ZONING AND BUILDING PERMIT APPLICATION
1925 Lucas Ave, Cottekill 12419
P.O. Box 217 Stone Ridge, NY 12484

Office use:

NAME: _____
B/P # _____
Z/P# _____
SBL # _____
PROJECT: _____

SPLIT UNIT PERMIT APPLICATION

Fill out the attached permit application and attach the following documents to the permit application
If incomplete application will not be accepted and returned

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

_____**911 ADDRESS** - Address of property. If none on file, call the Assessor's office and they will assign one for you. Their number is 687-7500 x 172

_____**SITE PLAN** - Submit one site plan and one on PDF form or CD
Showing 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 property lines
***Must show location of well, septic and electric lines and complete # 6 & 7*.**

_____**BROCHURE** : SUBMIT BROCHURE AND LOAD CALCULATIONS

_____**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)

_____**IS STRUCTURE ALREADY BUILT:** Yes ___ No ___ (Work started with out permit is subject to \$150.00 + permit fee + zoning fee)

_____**CHECK:** bring a check payable to the Town of Marbletown

_____**PRE-SITE INSPECTION** - submit your application and schedule a pre-site inspection. Someone must be on site for this inspection

_____**INSURANCE INFORMATION -MUST ATTACH INSURANCE FORM -WE DO NOT KEEP FORMS ON FILE**
_____**contractors proof of Liability (Acord form) and Workers' Compensation (C105.2 or U26.3) or**
Liability exp date _____ Workmens Comp exp date _____ Workmens Comp exempt _____
_____**contractors proof of Liability (Acord Form) and Workers' Compensation Exempt Form**
_____**Homeowner can obtain a CE-200 form online (directions are included in packet)**
_____**ELECTRICIAN ULSTER COUNTY LIC #** _____

_____**APPLICATION COMPLETE, RECEIVED AND CHECK BY** _____ **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

GENERAL BUILDING PERMIT APPLICATION

PRINT or TYPE CLEARLY AND COMPLETE ALL INFORMATION - *If incomplete application will be returned*

OWNER: _____ APPLICANT/CONTRACTOR: _____

MAILING ADDRESS: _____ MAILING ADDRESS: _____

PHONE NUMBER: _____ PHONE NUMBER: _____

CELL NUMBER: _____ CELL: _____

EMAIL: _____ EMAIL: _____

Project Manager (Contact Person Overseeing Project)

Name _____ Phone Number: _____

Email: _____

Is the work already done? _____ yes _____ no

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

2. PROPERTY ADDRESS/LOCATION: _____

3. GIVE A BRIEF DESCRIPTION OF WORK (print clearly) clearly) _____

4. MAKE OF SPLIT
UNIT _____

5. MODEL NUMBER OF SPLIT
UNIT _____

() # _____ BTU, () # _____ BTU, () # _____ BTU, () # _____ BTU

6. SETBACKS () N/A FROM CENTER OF ROAD _____ REAR _____ LEFT _____ RIGHT _____

7. ELECTRICAL WORK _____ YES (IF YES, MUST BE INSPECTED BY A TOWN APPROVED AGENCY)

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"

NAME OF
CONTRACTOR _____

MAILING
ADDRESS _____

PHONE NUMBER _____ CELL
NUMBER _____

E-MAIL
ADDRESS _____

**LIABILITY EXPIRATION DATE: _____ W/C EXPIRATION DATE: _____

W/C EXEMPT EXP DATE: _____

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.
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, 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:

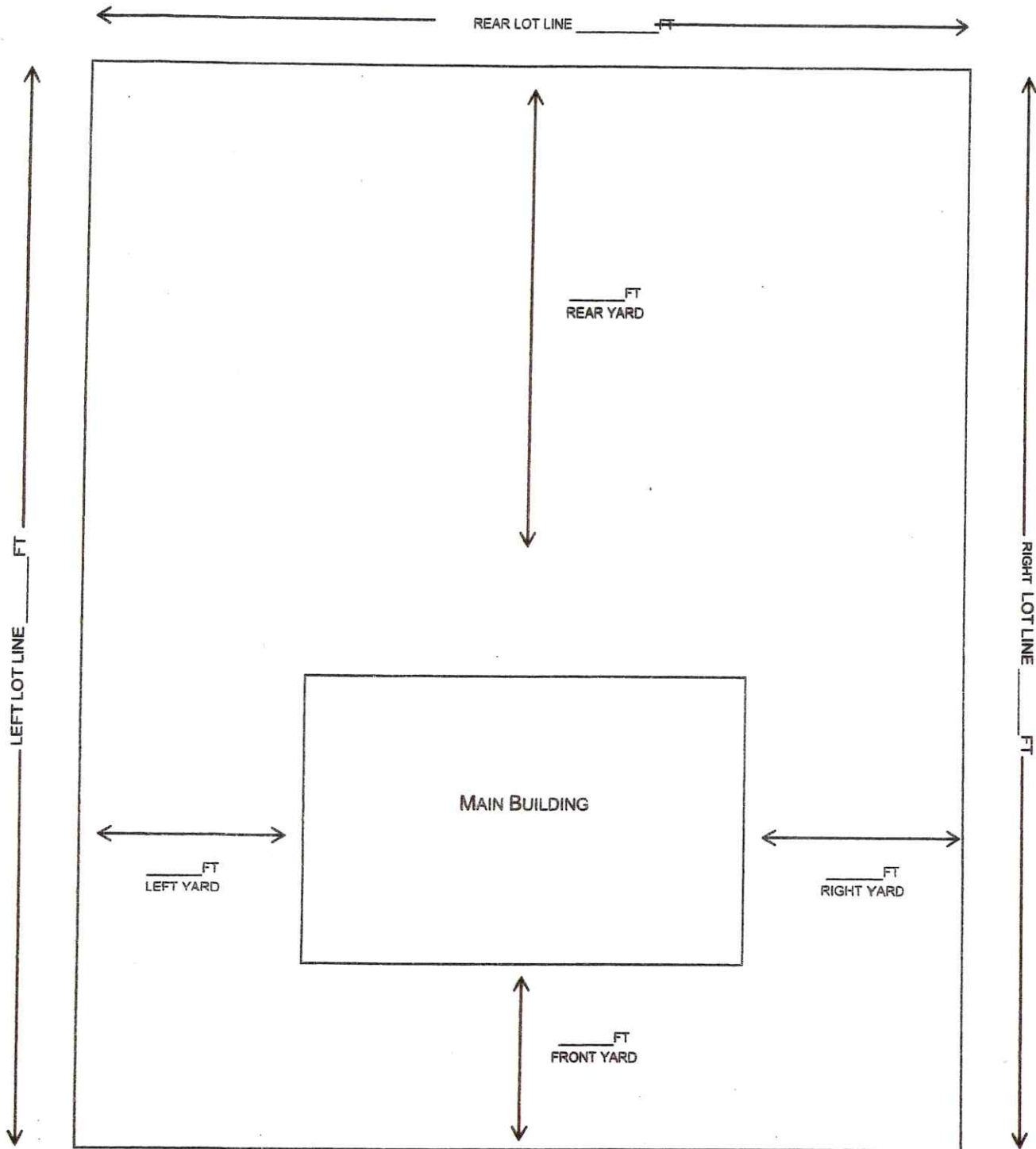
- Select **Access Recent Activity** from your email, or
- Access businessexpress.ny.gov, and then access your **Dashboard** (under your login name on right).

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.



Name: _____

Address: _____

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



TOWN OF MARBLETOWN BUILDING & SAFETY DEPARTMENT


1938 Lucas Tpke, Cottekill, NY 12419 / P.O. Box 217 Stone Ridge, NY 12484

TOWN APPROVED ELECTRICAL AGENCIES



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Jerry Caliendo nybei1@live.com
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New York Certified Electrical Inspectors
Orange, Rockland, Dutchess & Sullivan County Division

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www.nycei.us

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REQUEST AN INSPECTION @
WWW.SWANSONCONSULTING.BIZ



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NYS Certified CEO

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PROMPT
PROFESSIONAL
SERVICE

Commonwealth Electrical Inspection Service Inc.

Malcolm C. Fairlie
Certified Electrical Inspector

Fleishmanns, NY 12430



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a division of CP Systems

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John Wierl
Electrical Inspector