

**TOWN OF ALBION**  
CODE ENFORCEMENT OFFICE  
3665 CLARENDON ROAD  
ALBION, NY 14411  
(585) 589-7048 EXT. 15

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BUILDING PERMIT APPLICATION – SHORT FORM

Date \_\_\_\_\_

Applicants Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Applicants Address \_\_\_\_\_

Is the above address where the construction will be taking place? \_\_\_\_\_ Yes \_\_\_\_\_ No

If it is not the address please state it below.

Item to be constructed  Porch/Deck  Utility Bldg  Garage  Addition  
 Remodeling

Cost of Work including labor \$ \_\_\_\_\_

Lot Dimensions: Width \_\_\_\_\_ Depth \_\_\_\_\_

Signature \_\_\_\_\_

Fee \_\_\_\_\_

Approved  Denied

Permit Number \_\_\_\_\_ Date Issued \_\_\_\_\_

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Please provide a detailed drawing on the reverse side of application showing existing structures and the proposed new construction.

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**BUILDING DEPARTMENT**

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

**Rules and Regulations for Building Permits**

At the time the application was made the following requirements were set forth in the permit and must be followed. Please attach to your building permit for future reference.

1. A plot plan was submitted showing the location of property, the buildings and a detailed description of the layout of the property.
2. Two complete sets of plans and two complete sets of specifications were submitted. The plans and specifications described the nature of the work, the materials, equipment to be used and installed and details of the structural, mechanical, electrical and plumbing installations. One set of the plans and one set of specifications shall remain on site and available for inspection throughout the progress of the work. Inspections will take place during the construction at the discretion of the Code Enforcement Officer.
3. Contractors must submit copies of their liability and workman's compensation insurance certificates.
4. No building shall be occupied or used in whole or part for any purpose until the work is completed and final inspection has been done. At the time of the final inspection if all the conditions of the permit are met, a Certificate of Occupancy shall be issued.
5. All construction will be according to the Rules and Regulations set forth in the Town of Albion Building Code and the New York State Building Code.
6. Any violations of the Codes will result in revocation of the Building permit which shall not be reinstated until at such time it is deemed that the violations were corrected.

PLEASE NOTE THAT ALL THE ABOVE MUST BE SUBMITTED BEFORE THE BUILDING PERMIT IS ISSUED...

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
CEO Signature

# 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 Number \_\_\_\_\_

Property Address that requires the building permit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<p><i>Sworn to before me this _____ day of</i></p> <p>_____, _____.</p> <p>_____ <i>(County Clerk or Notary Public)</i></p>
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Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

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**PERMISSION TO ENTER PROPERTY**

Pursuant to Town of Albion Code Chapter 58 Section 58-2 B-9, I hereby grant permission to the Code Enforcement Officer to enter the property/structure as listed in permit # \_\_\_\_\_ as frequently as he/she deems necessary to inspect as well as verify compliance with all applicable New York State building codes and Town of Albion Zoning and Building codes.

Agreement shall remain in effect until issuance of a certificate of occupancy or certificate of compliance for this project.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

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Location \_\_\_\_\_

Map No. \_\_\_\_\_ Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

**Affidavit of Final Cost of Construction –  
Application for Certificate of Occupancy**

Sate of New York                    }  
  } ss:  
County of \_\_\_\_\_          }

\_\_\_\_\_, being duly sworn, deposes  
(Applicant or Agent)

and says: that he (she) is the applicant (or agent of the applicant) named in the Application for Building Permit dated \_\_\_\_\_ 20\_\_\_\_\_ relating to construction or other work to be performed on, or in connection with, the premises located as indicated above; that the estimated cost stated in said application of the construction or other work described therein was \_\_\_\_\_ Dollars (\$\_\_\_\_\_); that the actual final cost of such construction or other work was \_\_\_\_\_ Dollars (\$\_\_\_\_\_).

Application is hereby made for the issuance of a Certificate of Occupancy for the structure on these premises. Applicant states that he has examined the approved plans and that to the best of his knowledge and belief, the structure has been erected in accordance therewith and in accordance with the applicable provision of law.

Applicant further states that he was the (Note: Strike out items a, b, or c, not applicable)

- (a) Licensed Architect, or
- (b) Professional Engineer, or
- (c) Superintendent of construction who supervised the said construction or other work and that by reason of his experience he is qualified to supervise such work on the structure for which a Certificate of Occupancy is requested.

Sworn to before me

\_\_\_\_\_ (Applicant or Agent)  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_  
\_\_\_\_\_ (Notary Public)  
Filed Cost \$ \_\_\_\_\_  
Permit Fee Paid \$ \_\_\_\_\_  
Additional Fee \$ \_\_\_\_\_

(Costs for the work described in the Application for Building Permit include the cost of all of the construction and other work done in connection therewith, exclusive of the cost of land. If the final cost is less than the estimated cost stated in the Application for Building Permit, no portion of the fee paid upon the filing of the application will be refunded.)