# **Town of Prattsville**

Town of Prattsville 14517 Main St P.O. Box 418 Prattsville, NY 12468



FOR OFFICIAL USE ONLY

Code Enforcement 518-299-3125 ext 4 prattcodeofficer@gmail.com

Tax Map No.	Permit No.
Location	<del></del>
Permit Fee \$	Approval/Issue Date
	Signature of Code Enforcement Officer
APPLICATION FO	OR DEMOLITION PERMIT
<u>Demolition Permit Expire</u>	s Six (6) Months from Date of Issuance
	Date Submitted, 20
Street Address where demolition is to take place:	
Applicant is: Owner Lessee Agent _	Arch./Eng. Business Contractor
Applicant: Name	Email
Address	Phone ( )
Owner: Name	Email
Address	Phone ( )
Contractor: Name	Email
Address	Phone (
1. Type of structure to be removed:	
[] Residential Number of dwelling u	nits [ ] Commercial
Agricultural [] Other	
2. Number of stories 3. Year built _	
4. Method of removal: [ ] Manual [ ] Heavy equipr	ment [ ] Other
5. Proposed Location for Disposal of Debris:	
[ ] Landfill - Location	Permit #
[ ] Onsite Burial if permitted [ ] Oth	er
6. Asbestos survey_required (see General Note No. 5 on	Page 2 of 3): [ ] Yes [ ] No

# **DEMOLITION PERMIT APPLICATIONS ARE NOT ACCEPTED WITHOUT STATED INSURANCE REQUIREMENTS**

Each application must be accompanied with current insurance forms as determined below.
If the <i>Applicant</i> is the <b>Owner</b> of 1, 2, 3, or 4 Family Dwelling and lives in the subject residence (i.e., owner-occupied):
Is owner performing all the work? [ ] Yes [ ] No Is owner not compensating the individual performing the work? [ ] Yes [ ] No Is the owner paying individuals a total of less than 40 hours a week? [ ] Yes [ ] No
If "YES" to one of the above questions (and the property owner lives in the residence), we require: a copy of the property owner's Homeowner's Insurance Policy showing General Liability coverage and a completed exemption Form BP-1 (available in our Town Hall office or downloadable from the Town's website <a href="https://www.townofprattsville.com">www.townofprattsville.com</a> . Please note that Form BP-1 can only be used in the case that the property owner lives in the residence where the proposed work is to take place. Otherwise, the property owner must complete exemption Form CE-200 as is discussed below.
If "NO" to all above questions or if the Prime Contractor performing the work is a <b>business entity</b> or if the property owner performing the work does not live in the subject residence, we require proof of the Prime Contractor's or property owner's (who is performing the work) <b>General Liability</b> coverage and <b>one</b> of the following proofs of having or being exempt from having <b>Workers' Compensation</b> and <b>Disability Benefits insurance</b> (either A, B or C):  A. Affidavit of Exemption:
Form CE-200 (This form needs to be completed online at www.wcb.ny.gov)  "A helpful step by step instruction sheet is available upon request in our Town Hall office"
B.Certificates of Workers' Compensation Insurance and Disability Benefits Insurance:
(Workers' Comp.) Form C-105.2 or State Insurance Fund Form U-26.3  AND
(Disability Benefits) Form DB-120.1
C. Self-insured or participating in authorized self-insurance plan:
Form SI-12 or Form GSI-105.2 AND
Form DB-155
Please Note: ACORD forms, while acceptable of proof of General Liability Insurance, are NOT acceptable proof of NYS Workers' Compensation or Disability Benefits Insurance coverage!
A. The work or removal covered by this application may not be commenced before the issuance of removal permit.
B. All removal work shall be in accordance with General Provisions of the Building Code of New York State, Chapter 33, Section 3303 – Demolition, and Industrial Code Rule 56 (Asbestos).
C. Proof of workers compensation and disability insurance or proof of legal exemption is mandated by the State of New York Workers' Compensation Law § 57.
D. If debris is to be deposited at a landfill, the Contractor shall obtain proper permits as required.
E. An asbestos survey is required for the demolition of all buildings constructed prior to 1/1/74 unless the demolition of a single family dwelling is performed by the property owner, the building is an agricultural building, or the building has been certified as structurally unsound by a licensed professional. If the building has been certified as structurally unsound by a licensed professional, all demolition debris must be treated as asbestos.
<b>APPLICATION IS HEREBY MADE</b> to the Code Enforcement Office for the issuance of a Building Demolition and Removal Permit. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Signature of Applicant

# 2020 BUILDING CODE OF NEW YORK STATE

#### **CHAPTER 33 – SAFEGUARDS DURING CONSTRUCTION**

#### Section 3303 Demolition

#### 3303.1 Construction documents.

Construction documents and a schedule for demolition shall be submitted where required by the building official. Where such information is required, work shall not be done until such construction documents or schedule, or both, are approved.

# 3303.2 Pedestrian protection.

The work of demolishing any building shall not be commenced until pedestrian protection is in place as required by this chapter.

# 3303.3 Means of egress.

A horizontal exit shall not be destroyed unless and until a substitute means of egress has been provided and approved.

# 3303.4 Vacant lot.

Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade or in accordance with the ordinances of the jurisdiction having authority.

### 3303.5 Water accumulation.

Provision shall be made to prevent the accumulation of water or damage to any foundations on the premises or the adjoining property.

# 3303.6 Utility connections.

Service utility connections shall be discontinued and capped in accordance with the approved rules and the requirements of the applicable governing authority.

# 3303.7 Fire safety during demolition

Fire safety during demolition shall comply with the applicable requirements of this code and the applicable provisions of Chapter 33 of the Fire Code of New York State.