



Town of Fallsburg Building Permit Checklist:

(Please **READ** and **CHECK** boxes prior to submission. We will not accept incomplete applications.)

1. I have read the instructions on page 2 of the permit application. ☐
2. I have submitted a plot plan showing the lot and building on the premises. ☐
3. I have submitted legible detailed plans as per the instructions on the permit. ☐
4. I understand the work may not be started until a permit is issued. ☐
5. I understand that all electrical work must be independently inspected. ☐
6. I understand that not displaying the permit placard is a \$50.00 fine. ☐
7. I understand that a Workman's Comp. exemption # or policy must be submitted. ☐
8. I understand that construction debris must not be left outside during const. ☐
9. I understand that a minimum of 24 hours is required for inspections. ☐
10. I understand that any change requires updating the permit. ☐
11. I understand that it is illegal to occupy or use without a C/O.
A fine of \$1,500 per day for occupying without a C/O ☐
12. I understand that a C/O must be issued prior to occupancy of use. ☐
13. I understand that a 911 number must be installed at the property. ☐
14. I have given a copy of this checklist to my contractor. ☐

By signing below I am stating that I have read and agree to the statements above and the dwelling, structure, fuel burning device, etc. will not be used or occupied until the issuance of a Certificate of Occupancy the building department

Signature of applicant: _____ Date: _____

Office Use ONLY:

- Owners Proxy (if applicable) ☐
- Home Owners Association (if applicable) ☐
- Electrical Verification (if applicable) ☐
- Insurance ☐
- Plot plan/ Site plan ☐
- DPW Fee's \$ _____ ☐
- Permit Fee's \$ _____ ☐



ELECTRICAL PERMIT APPLICATION

Permit #: _____

SBL: _____

Only Checks or Money Orders Are Acceptable and Must Be Made Payable to the Town of Fallsburg

INSTRUCTIONS:

1. This application must be completely filled in and submitted to the Building Inspector.
2. The work covered by this application may not be commenced before the issuance of an Electrical Permit.
3. Be advised Sullivan County Local Law No. 13 of 1977 requires the use of Licensed Electrical Contractors.
4. NO BUILDING OR STRUCTURE SHALL BE OCCUPIED OR USED IN WHOLE OR IN PART FOR ANY PURPOSE WHATSOEVER UNTIL A CERTIFICATE OF OCCUPANCY SHALL HAVE BEEN GRANTED BY THE BUILDING INSPECTOR.

Note: The homeowner is ultimately responsible for acquiring the Final electrical certificate prior to the certificate of occupancy.

5. Upon approval of this application, the Building Inspector will issue an Electrical Permit to the applicant. Such permit approved plans and specifications shall be kept on the premises available for inspection throughout the progress of the work.
6. APPLICATION IS HEREBY MADE to the Building Inspector for the issuance of an Electrical Permit pursuant to the New York Building Construction and Code Ordinances of the Town of Fallsburg for the construction of buildings, additions or alterations, or for the removal or demolition or use of property, as herein described. The applicant agrees to comply with all the applicable laws, ordinances and regulations.

Name of applicant:

Phone #:

Signature of applicant:

Mailing Address:

Email address:

Owner (Please Print)

Mailing Address

Telephone #

Date

Applicant is: Owner ☐ Agent ☐ Electrician ☐ Other ☐ Please explain: _____

If applicant is a corporation, signature of duly authorized officer _____

Name & Address of Corporate Officer _____

1. **Street address of site where work will be done:** _____

Tax Map No./SBL: _____ Unit No: _____

4. **Description of ALL work:** _____

New Service Panel: _____ amps Generator: _____ # of lights: _____

of receptacles: _____ # of smoke detectors: _____ # of CO2: _____

Solar panels: _____

Estimated Cost of work: \$ _____

5. **Name of Electrician:** _____ **Phone #:** _____

Name of Electrical Inspection Agency: _____

**** **WE HAVE THE RIGHT** TO REFUSE AN INCOMPLETE APPLICATION****



TOWN OF FALLSBURG
CODE ENFORCEMENT OFFICE

OWNERS PROXY

_____deposes and states that he/she resides at:

(Owner)

(Location where work is being done)

And that he/she is the owner of the premises described in the attached application for a building permit application and further states that

he/she has authorized _____ to make said application,
secure any necessary permits and approvals, call for inspections, and request a certificate of
occupancy upon satisfactory completion of the work described in said application.

Owner's signature: _____ Date: _____

Email address: _____

~~SULLIVAN COUNTY BOARD OF ELECTRICAL LICENSING~~
STATEMENT

Re: Local Law No. 2 of 2019 entitled "Electrical licensing Law"

I hereby state under penalties of perjury that I own and occupy the premises located at:

Electrical work will be done at said premises, in which electrical work will be installed, maintained and/or replaced by myself, the homeowner or the property described above.

Description of type of electrical work:

Dated: _____

Note: False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

X _____

Homeowner Signature

Print Name

Print Address

ELECTRICAL CONTRACTORS' VERIFICATION FORM

Electrical Contractor's Name: _____

Electrician's License #: _____

Property Owner: _____

Property Address/Street: _____

Signature of Electrical Contractor: _____

Date: _____

No walls are to be covered until this form is returned to the Building Department and they have verification that the electrical contractor mentioned above is performing said work.

Job: _____

TAX MAP #: _____

Return this form signed by a Sullivan County Licensed Electrician



ELECTRICAL INSPECTORS

COMMONWEALTH ELECTRICAL INSPECTION AGENCY

CHRIS AUSTIN

KEITH SUTTON

RON HENRY

TERRY WEAVER

800-801-0309 OFFICE

845-798-0011

845-527-8821

845-562-8429

518-755-0324

ELECTRICAL UNDERWRITERS

ERNEST BELLO, JOHN TAYLOR

845-569-1759 OFFICE

NY ELECTRICAL INSPECTORS

ARMOND MURAD

GREGG MURAD

845-439-1090

845-586-2424

NYEIC

ANDREW TRAVERSE

JOHN WIERL

845-343-6934 OFFICE

845-629-7423

845-551-8466

SWANSON CONSULTING & ASSOC INC.

ADAM FRANK

JOE SWANSON

JOHN HAMILTON

845-401-4859

845-549-8271

845-549-0708

SWITCH ON ELECTRIC

FRANK SCHMAUS

845-733-4926 OFFICE

845-800-6909

TRI-COUNTY INSPECTION AGENCY

TODD KLIKUS

570-493-1229

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, 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.