



TOWN OF CAIRO
APPLICATION FOR A BUILDING PERMIT
512 MAIN STREET, P. O. BOX 728
CAIRO, NEW YORK 12413
PHONE (518) 622-3120 EXT. 253 / FAX (518) 622-3415

NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED
PLEASE ENTER N/A IF A SECTION IS NOT APPLICABLE AND MAKE SURE THAT ALL SECTIONS PERTAINING
TO YOUR SPECIFIC PROJECT ARE FILLED OUT AND ADDRESSED.

PART 1 GENERAL INFORMATION

1. Project Location and Information

Tax Map Number: _____

Street Address: _____

Current use of the property/Building: _____

Proposed use of the property/Building: _____

2. Owner Identification

Owners Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone Number(s) _____

CONTINUE ON PAGE TWO: DO NOT WRITE BELOW THIS LINE

Date Rec'd _____ Rec'd by: _____ Forward to: _____

Application No. _____ Application Date _____

Permit Date: _____ Permit No. _____

Permit Fee \$ _____ Receipt No. _____

Special Approval Needed by: ☐ Planning Board ☐ Appeals Board ☐ Other _____

PLEASE CHECK ALL THAT APPLY

3. Type of Construction or Improvement: ☐ Commercial ☐ Residential

☐ New Building – Proposed use is _____

☐ Conversion – Current Use _____
Proposed Use is _____

☐ Addition ☐ Alteration ☐ Repair/Replacement

☐ Relocation ☐ Demolition ☐ Accessory Structures

☐ Deck ☐ Swimming Pool ☐ Signs

☐ Septic ☐ Change of Use

☐ Misc. Structure / Equipment _____

4. Dimension of Building Width _____ Depth _____ Height _____ Stories _____
Total Sq. Ft _____

No. of Rooms _____ No. of Bedrooms _____ No. of Baths _____

Kitchen _____ Other _____

5. Addition will be used as: ☐ Family Room ☐ Living Room ☐ Kitchen ☐ Den ☐ Bedroom
☐ Bath ☐ Full –or- ☐ Half ☐ Other _____

6. Foundation: ☐ Full ☐ Partial ☐ Crawl ☐ Pier ☐ Slab

7. Garage: ☐ Attached ☐ Detached

8. Utilities: ☐ Electric ☐ Gas ☐ Other _____

9. Deck/Porch: ☐ Open ☐ Covered ☐ Enclosed ☐ Screened

☐ Other _____

10. Description Of Project:

11. What flood plain is the property located in? _____

Designed By ☐Owner ☐Architect ☐Engineer ☐Other_____

Name of Designer: _____

12. Estimated Project Cost:

Contractors estimate for the work to be performed: _____

If the work is to be performed by the homeowner: _____

Part 2 DESIGNERS AND CONTRACTORS

Please submit the insurance certificates as proof of insurance for all contractors. ACORD forms are not an acceptable proof of insurance for Workman's Compensation and Disability Insurance.

Designed By ☐Owner ☐Architect ☐Engineer ☐Other_____

Name of Designer: _____

1. Architect/Engineer:

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

2. General Contractor

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy No. _____ **Exp.Date** _____

3. Electrical Contractor:

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy No. _____ Exp.Date _____

4. Plumbing Contractor:

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy No. _____ Exp.Date _____

5. Mechanical Contractor:

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy Number _____ Exp.Date _____

6. _____ Contractor:

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy Number _____ Exp.Date _____

7. _____ Contractor:

Name: _____

Address: _____

Phone Number: _____

Insurance Carrier _____

Policy Number _____ Exp.Date _____

Part 3 PROJECT LOCATION AND DETAILS

PLEASE ATTACH A SKETCH OR PLOT PLAN!

A sketch of the work to be performed must be made a part of this application. The sketch must include the following:

1. Location of the proposed structure, addition or system showing the number of stories and all exterior dimensions
2. Lot Size
3. The distance of the proposal from all lot lines
4. Road Frontage
5. The distance of the proposal from the center line of any road and or right of way.
6. Location of any wetlands, waterways, floodways and/or flood plains.
7. Location of any septic systems and or wells and neighboring septic systems and wells.
8. Location of any other structures or equipment on parcel.
9. The distance of the proposal from any structure including neighboring structures.
10. Location of Driveway.

NOTE:

For Lot Size, Road Frontage and Setbacks please see pages 11 & 12

IMPORTANT NOTICES: READ BEFORE SIGNING

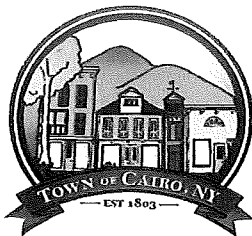
1. Work conducted pursuant to a building permit must be visually inspected by the Building Department and must conform to the New York State Uniform Fire Prevention and Building Code; the Town of Cairo's Zoning Law, Local Laws and Ordinances and all other applicable codes, rules and regulations.
2. It is the owner's responsibility to contact the Building Department at (518) 622-3120 Ext. 253 at least 48 hours before the owner wishes to have an inspection conducted. More than one inspection may be necessary. This is especially true for "internal work" which will eventually be covered from a Visual inspection by addition work (i.e. electrical work later to be covered by a wall). **DO NOT PROCEED TO THE NEXT STEP OF CONSTRUCTION IF SUCH "INTERNAL WORK" HAS NOT BEEN INSPECTED.** Otherwise, work may need to be removed at the owner's or contractor's expense to conduct the interior inspections. Close coordination with the Building Department will greatly reduce this possibility.
3. OWNER HEREBY AGREES TO ALLOW THE BUILDING DEPARTMENT TO INSPECT THE SUFFICIENCY OF THE WORK BEING DONE PURSUANT TO THIS PERMIT, **PROVIDED HOWEVER, THAT SUCH INSPECTION(S) IS (ARE) LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON WORK-RELATED VIOLATIONS WHICH ARE READILY DISCERNIBLE FROM SUCH INSPECTION(S).**
4. New York State Law requires contractors to maintain Worker's compensation and Disability Insurance for their employees. No permit will be issued unless currently valid Worker's compensation and Disability Insurance Certificates are attached to this application or are on file. If the contractor believes he/she is exempt from the requirements to provide Worker's Compensation and / or Disability Benefits, the contractor must provide WC/DB-100 Form. Note ACCORD Forms are not acceptable proof of WC insurance.
5. It is the property owner's responsibility to provide a completed plot plan that includes property lines, road ways, right-of-ways, waterways, floodplains, floodways, wetlands or any other pertinent information that would affect the issuance of building permit.

6. The work covered by this application may not be started before the issuance of a Permit, Site Plan approval or variance depending on the circumstances of the project. A site inspection is required for new buildings prior to the issuance of a building permit.
7. Work undertaken pursuant to this permit is conditioned upon and subject to any local, state and federal regulations.
8. This permit does not include any privilege of encroachment in, over, under, or upon any Town, County, State Road or right-of-way.
9. This application must be accompanied by two copies of complete plans, specifications, and all information required by State and Local municipal Codes. Upon completion of this application, the Building Department will issue a Building Permit to the applicant together with approved, duplicate set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises available for inspection throughout the progress of the work. Building operations must be started within (1) year or a permit will be voided.
10. The Building Permit must be displayed so as to be visible from the street nearest to the site where the work is being conducted.
11. 911 Numbers are required to be posted on properties.

I hereby certify that I have read each of the above notices and requirements understand them and consent to each.

Dated: _____

APPLICANT: _____



**TOWN OF CAIRO
BUILDING AND CODE DEPARTMENT**

Owner's Affidavit

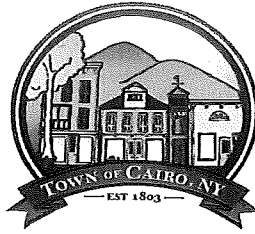
I, the undersigned, hereby attest that I am the lawful owner of the property described within or am the lawful agent of said owner and affirm under the penalty of perjury that all statements made by me on this application are true. I will comply with the requirements of the New York State Uniform Fire Prevention and Building Code, Local Ordinances and Codes, and all other applicable codes, rules or regulations.

(Signature of Owner)

Sworn to before me this _____

Day of _____, _____

(Notary Public)



**TOWN OF CAIRO
BUILDING & CODE DEPARTMENT**

BUILDING APPLICATION CHECK LIST

**PLEASE MAKE SURE THAT THE FOLLOWING ARE ENCLOSED WITH YOU
BUILDING APPLICATION**

1. Application is completely filled out signed and notarized by the property owner or legal agent. (please provide documentation when the legal agent will be applying for a permit)
2. (2) Sets of Complete Construction Plans only
3. Plot Plan (see pg 5.)
4. Proof of Ownership – current tax bill or Deed
5. All Contractors working on site must provide a certificate of insurance for the following insurance policies :

* Workman's Compensation & Disability Insurance (We can't accept proof of insurance on an ACORD form) Or
Workman's Compensation Exemption Form signed and dated

* Liability Insurance

NOTE: The Town of Cairo must be named as the certificate holder

6. If the homeowner is doing work and resides on the property please provide the homeowner's declaration page from the homeowner's insurance policy. Complete page 10 of this application and have the homeowner's signature notarized.
7. A copy of the Driveway permit from Town, State or County
8. 911 number (this is your physical address)

**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:

<i>Sworn to before me this _____ day of _____,</i>
<i>(County Clerk or Notary Public)</i>

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

H. Table "A" - Schedule of Uses: See Appendix "A."

Section V. Lot Size - Front, Rear and Side Setbacks

A. Minimum Lot Sizes

1. For areas serviced by municipal water and sewer services, minimum lot sizes shall be $\frac{1}{4}$ acre when serviced by both or $\frac{1}{2}$ acre where only water or sewer, but not both are available.
2. For areas not serviced by either municipal water or sewer services, the minimum lot size shall be two (2) acres.

B. Maximum Lot Coverage

1. For areas serviced by either municipal water or sewer services, the maximum lot coverage area shall be 80%.
2. For areas not serviced by either municipal water or sewer services, the maximum lot coverage area for all uses shall be 60% in all districts except for the RR district and 40% in the RR district.

C. Front, Rear and Side Setback Requirements.

1. No structure that is in any way attached to the ground that renders the structure immovable shall be placed within the required set-back distances set forth below, except as follows:
 - a. Fences
 - b. Retaining walls
 - c. Mailboxes and newspaper delivery boxes;
 - d. Decorative, landscaping structures.
 - e. Utilities.
 - f. Septic systems.
 - g. Storm water control measures.
 - h. Wells
 - i. Driveways, walkways, paved surfaces, and any other structure that has a placement on the ground where the structure's normal height does not protrude more than 3 inches above the adjacent ground level.
 - j. Any other structure required by statute.
2. Minimum set-back distances shall be as follows:
 - a. For the Hamlet-Cairo (HC), Main Street Downtown (MS) and Main Street Commercial (MS-COM) districts, the front, rear and side yard setback requirements shall be as follows:
 - [1] Front Setback: consistent with existing, surrounding structures.
 - [2] Side and Rear Setback: 15 feet minimum as measured from the property line
 - b. For all other districts:

- [1] Front Setback: 65 feet minimum as measured from the center of the roadway or right-of-way.
- [2] Side and Rear Setbacks: 25 feet minimum as measured from the property line.
- c. Setback distances for lots with frontage on two or more public or private roadways or right-of-ways shall be 65 feet as measured from the center line of each such roadway or right-of-way.

D. Lot Frontage Requirements.

- 1. All lots shall be required to have a minimum amount of frontage on an existing public or private road as follows:
 - a. Main Street - Downtown (MS): 25 feet.
 - b. Hamlet Cairo (HC) and Main Street-Commercial (MS-COM): 50 feet.
 - c. All other districts: 150 feet.
- 2. **Exceptions:** The required minimum frontage on Flag Lots shall be 50 feet. Lots with frontage along a cul-de-sac shall be a minimum of 50 feet as measured along the arc of such cul-de-sac.

SECTION VI. GENERAL REGULATIONS FOR ALL DISTRICTS

A. General Review Standards

No use shall be allowed unless it complies with the standards set forth in this section. Continued conformance with such standards shall be a requirement for the continuation of any certificate of occupancy.

- 1. **Compliance with Site Plan Law Review Criteria:**
For all proposed uses requiring Site Plan review, the Planning Board shall apply the review criteria contained in the Town of Cairo Site Plan Law.
- 2. **Compliance with Special Use Permit Requirements:**
For all proposed uses requiring a special use permit, the Planning Board shall apply the review criteria contained in Section XI of this law.
- 3. **Compliance with Supplementary Regulations for Specific Districts:**
The Planning Board shall apply the appropriate supplementary regulations contained in Section VII of this law to each proposed use in each district as applicable thereto.
- 4. **Building Access:**
Every building shall have access to a public or approved private road, and all structures shall be so located on lots as to provide safe and convenient access for rescue and fire protection vehicles. All new roads and intersections shall receive approval from the Town Highway Superintendent and/or Town Engineer. Whenever a private road is the sole means of access, a road maintenance agreement shall be submitted to the Town Attorney or Attorney for the Town for approval and shall be filed with the County Clerk's Office following such

The general municipal law is amended by adding a new section 125 to read as follows:

125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:

1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR

2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

Implementing Section 125 of the General Municipal Law

1. General Contractors -- Business Owners and Certain Homeowners

For businesses and certain homeowners listed as the general contractors on building permits, proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is ONE of the following forms that indicate that they are:

- ♦ insured (C-105.2 or U-26.3),
- ♦ self-insured (SI-12), or
- ♦ are exempt (CE-200),

under the mandatory coverage provisions of the WCL. Any residence that is not a 1, 2, 3 or 4 Family, Owner-occupied Residence is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

2. Owner-occupied Residences

For homeowners of a 1, 2, 3 or 4 Family, Owner-occupied Residence, proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file form BP-1 (12/08).

- ♦ Form BP-1 shall be filed if the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is listed as the general contractor on the building permit, and the homeowner:
 - ♦ is performing all the work for which the building permit was issued him/herself,
 - ♦ is 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 the homeowner perform such work, or
 - ♦ has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- ♦ If the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is hiring or paying individuals a total of 40 hours or MORE in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" form, BP-1(12/08), but shall 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 (the C-105.2 or U-26.3 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) 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.

NOTICE OF ENACTMENT OF LOCAL LAW

In order to facilitate the location of buildings along the various roads and highways by fire, police & other emergency services, & to facilitate the reporting of emergencies & dispatching of emergency vehicles & personnel under the County 911 system, the Town Board does hereby deem the enumeration of all buildings to be of major importance for all the Town of Cairo.

All existing structures to which numbers are assigned shall be required to display the assigned 911 number & only that number in the manner required within 6 months of receipt of this notice. Fire numbers are void & must be removed.

The 6" x 8" red sign bears the 911 logo & 4" high white reflective numerals.

Each single-sided sign is \$7.50 Double-sided sign is \$10.00

Payment is expected at time of ordering at Cairo Town Hall OR mail check with this notice in an envelope to: **CAIRO TOWN HALL, PO Box 728, Cairo, NY 12413.**

Please note: allow 5-6 weeks for your individual sign to be made. Signs can be picked up at Cairo Town Hall or return mailed to you for an additional S/H fee of \$4.00 for each sign. Thank you for your support in this important community effort.

NAME: _____ **Date:** _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

PHONE NUMBER: _____

911 NUMBER (if you know it) _____

Include Postage for S/H if you request delivery by mail, otherwise, you will be notified when your sign is ready to be picked up at the Town Hall.

CASH OR CHECK: _____ **Date Paid:** _____

SINGLE SIGN: _____ **DOUBLE SIGN:** _____ **NUMBER OF SIGNS:** _____

Date picked up: _____ **Signature:** _____