



**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: AN INCOMPLETE APPLICATION WILL NOT BE ACCEPTED  
PLEASE ENTER N/A IF A SECTION IS NOT APPLICABLE, ALL REQUIRED FIELDS ARE COMPLETED AND ALL  
REQUIRED DOCUMENTATION IS ATTACHED TO THE APPLICATION.

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**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. Basement: ☐ 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 The Project:

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11. What flood plain is the property located in? \_\_\_\_\_

12. Is the property connected to public Water and or Sewer?

Please list \_\_\_\_\_

13. 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

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. The distance of the proposal from the center line of any road and or right of way.**
- 5. Location of any wetlands, waterways, floodways and/or flood plains.**
- 6. Location of any septic systems and or wells and neighboring septic systems and wells.**
- 7. Location of any other structures or equipment on parcel.**
- 8. The distance of the proposal from any structure including neighboring structures.**
- 9. Location of Driveway.**

## **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 Local 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 CE-200 Form. Note ACCORD Forms are not acceptable proof of WC insurance and can only be used for Liability insurance policies. Town of Cairo must be named as the Certificate holder on the ACORD form.  
If the homeowner is doing the work they must provide proof of insurance and the CE-200 exemption form from Worker's compensation.**
- 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 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 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.
10. Building operations must be started within (1) year or a permit will be voided.
11. The Building Permit must be displayed so as to be visible from the street
12. The Building Permit must be displayed so as to be visible from the street nearest to the site where the work is being conducted.
13. 911 Numbers are required to be posted on properties (please find attached form).

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**  
**512 Main Street., P.O. BOX 728**  
**CAIRO, NEW YORK 12413**  
**PHONE (518) 622-3120 Ext. 253 FAX (518) 622-3415**

**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 DEPARTMENT**  
**BUILDING APPLICATION CHECK LIST**  
**PLEASE MAKE SURE THAT THE FOLLOWING ARE ENCLOSED WITH YOUR**  
**APPLICATION**

1. Application is completely filled out signed and notarized
2. (2) Sets of Complete Construction Plans
3. Plot Plan (see page 6)
4. Proof of Ownership (Current Tax bill or Deed)
5. A Copy of the driveway permit from the Town, County or State Highway Dept.
6. 911 sign must be posted on the property (physical address of property). Forms are included in the application packet if you will need to obtain a sign. Please submit to the Town Supervisor's clerk with the fee.
7. All Contractors that will be working on site must provide a certificate of Insurance for the following policies:
  - Workman's compensation and Disability Insurance (We can't accept Workman's Compensation on an ACORD form) OR
  - Workman's Compensation Exemption form CE-200 (must be signed & dated).
  - Liability Insurance

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

**If the homeowner is doing the work for which the permit will be issued please include the homeowner's declaration page or Liability policy. You must submit a CE-200 for workman's compensation at [wcb.ny.gov](http://wcb.ny.gov)**

**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

## 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 \$6.00 for each sign. Thank you for your support in this important community effort.

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

MAILING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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: \_\_\_\_\_

# 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.