# <u>Instructions for obtaining a Demolition Permit</u> (with required forms)

#### The Demolition Permit Application Package is online at:

www.shorehamvillage.org

#### Please read / review all documents herein. Thank you in advance. You will need:

- **1. Demolition Application** filled out signed and dated.
- **2. Survey:** Four (4) copies of a current survey showing all buildings, structures, walkways, driveways, location of septic system, drywells, subterraneous storage tanks, waterlines, gas lines, and electric lines located on the property. Show trees of 12" in diameter or greater within a 25 foot perimeter of the subject structure and outline the structure(s) proposed to be demolished.
- 3. Deed: Current deed showing ownership.\*
- **4. Title Certification:** Showing ownership and all existing mortgages and liens.
- **5. Certificate of Occupancy:** A copy of all C/Os or Existing Use Certificates.
- **6. Mortgagee**: Written consent by all mortgagees, (subject to Village Attorney approval).
- 7. **PSEGLI:** Certification by the utility that all service has been disconnected. \*\*
- **8. SCWA:** Certification by the water authority that service has been disconnected.\*\*
- **9. Asbestos:** A report by a licensed asbestos surveyor verifying the absence of asbestos and/or removal of the same from the subject premise.
- 10. Excavation Affidavit.
- 11. Debris Affidavit.
- **12. Insurance**, Proof of Workers Compensation & Disability Insurance & Liability Insurance.
- 13. Transactional Disclosure.
- **14. Fee:** To be determined by the Building Department.
- \* When ownership is an LLC provide a copy of the Operating Agreement. When ownership is a corporation provide a copy of the corporate resolution.
- \*\* When the structure proposed to be demolished has no direct PSEGLI and/or SCWA service connection and utility service is supplied via a connection to another structure on the property not being demolished, or the structure proposed to be demolished has no utility service whatsoever, then in lieu of a certification by the utility the applicant shall provide a notarized statement from a licensed electrician and licensed plumber that either a) no utility service exists at the structure proposed to be demolished, or b) the utility service from another source on the property has been permanently disconnected.

Incorporated Village of Shoreham 80 Woodville Road, Box 389 Shoreham NY 11786 www.shorehamvillage.org

VS-29 (08/14)

Suffolk County, NY

### **Demolition Permit Application**

This application must be typewritten or printed with all information and documents requested supplied. structure(s) located at the property referenced herein and designated on the survey that accompanies this Application. I (We) are submitting the following information and required documents for the purpose of processing this application: **Property - Ownership:** Suffolk County Tax Map Number: District 0207 Section \_\_\_\_\_ Block \_\_\_\_\_ Lot(s)\_\_\_\_\_ Owner Name: Phone E-mail Owner Mailing Address: Owner Name: \_\_\_\_\_ Phone \_\_\_\_ E-mail \_\_\_\_ Owner Mailing Address: 1<sup>st</sup> Mortgagee: Name: \_\_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_ 1<sup>st</sup> Mortgagee Address: \_\_\_\_\_\_ Account #:\_\_\_\_\_ 2<sup>nd</sup> Mortgagee: Name: \_\_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_ 2<sup>nd</sup> Mortgagee: Address: \_\_\_\_\_ Account #: Contractor: Name Address Phone number: \_\_\_\_\_ E-Mail \_\_\_\_ HI License Number\_\_\_\_ Carting Company: Name: \_\_\_\_\_\_ Address\_\_\_\_\_

I (We) agree to comply with NY General Municipal Law 125, NFPA 241 and NYS Fire Code Chapter 14 and any other local and/or NYS law applicable to demolition.

I (We) agree that NO debris will be left and/or buried on the site.

I (We) agree that NO burning and/or open fires will take place on the site.

I (We) agree that NO trees on the property will be removed in the course of the demolition.

I (We) agree that a Demolition Permit expires ninety (90) days from the date issued.

I (We) agree that site water runoff will be contained on site and I (We) will take remedial measures as may be necessary as determined by the Village Building Department to ensure water runoff is contained on site.

I/(We) hereby indemnify, hold harmless and release the Incorporated Village of Shoreham from any and all losses, damages, liabilities expenses, claims & causes of action (including attorney fees) that may arise from the demolition of such structure(s) located at premises, or the demolition of any structure located on the premises, demolished pursuant to issuance of a demolition permit, including but not limited to claim(s) by any party having interest in the premises.

STATE OF NEW YORK )			
)ss:			
COUNTY OF SUFFOLK)			
, being duly sworn deposes, says and declares under the penalty of perjury that I am the Owner of the property described in the within application, and that no other person, entity of mortgagee except those disclosed in this application has an interest in the subject property and that I personally filled in the above information, certify its accuracy and agree to abide by the statements in agreement I make herein.			
Owner Name (Printed)	Signature		
Title	(if any)		
Owner Name (Printed)	Signature		
Title	(if any)		
personally known to me or pro name is subscribed to the within	20, before me personally appeared		
Notary Public			
personally known to me or pro name is subscribed to the within	20, before me personally appeared		
Notary Public			

NOTE: If ownership is corporate a Corporate Resolution must be attached to this application. If ownership is an LLC a copy of the Operating Agreement must be supplied.

Suffolk County, NY

## **DEBRIS REMOVAL AFFIDAVIT**

Permit Date:	(To be filled in by Building Department	(To be filled in by Building Department)		
Permit Number:	(To be filled in by Building Department)			
STATE OF NEW YORK ) )ss: COUNTY OF SUFFOLK)				
I, the undersigned applicant for deposes and says that:	work performed under the Demolition Permit re	equested herein being duly sworn		
<ul><li>2. No hazardous mat</li><li>3. No trees, brush, or</li></ul>	ebris of any kind has been or will be buried on terial of any kind has been or will be buried on to cuttings have been buried or will be buried on y kind has been removed or will be removed froposed of.	he property site. the property site.		
other person, entity of mortgage	, being duly sworn deposes, says and decla described in the within application, that the above except those disclosed in this application has an intion supplied, certify its accuracy and agree to a	ve regarding debris is true and that no interest in the subject property and tha		
Owner Name (Printed)	Signature	Title		
On this day of	20, before me personally appeared	d		
name is subscribed to the witl	roved to me on the basis of satisfactory evidenin instrument and acknowledged to me that ignature on the instrument, the individual, or instrument.	he/she executed the same in his/her		
Notary Public				

Suffolk County, NY

#### **EXCAVATION AFFIDAVIT**

Article 36 of the New York State General Business Law requires that no excavator shall commence or engage in any excavation or demolition unless and until he has served timely notice as provided in the law to operators who maintain underground facilities in the Village of Shoreham. Such notice shall be served in accordance with the Rules and Regulations promulgated by the Board of Standards & Appeals pursuant to section twenty-eight (28) of the Labor Law.

#### **UNDERGROUND OPERATORS**

A ONE (1) CALL CENTER FOR ALL UNDERGROUND OPERATORS

#### NOTE: CONTRACTOR TO PHONE NOT HOMEOWNER

#### 1-800-272-4480

N.Y.S.D.O.U PSEGLI - LIP A - KI SUFFOLK COUNT	EYSPAN FY HEALTH SERVICES			TELEPHONE CABLEVISION SUFFOLK COUN	ITY WATER AUTHORITY
PROPERTY DES	SCRIPTION: SCTM				
DISTRICT	SECTION	BLOCK	LOT		
TYPE OF APPLI	CATION				
OWNER OF PRO	OPERTY	AGE	ENT FOR OWN	VER	<del></del>
ADDRESS OF PI	ROPERTY				
COUNTY OF SU	,	, being duly sworn de	poses and savs	that he/she is the	Owner or Agent for the
Owner of the pr					Owner will comply with
Article 36 of the 1	New York General Bus	iness Law and any oth	er law regardin	ng underground fac	ilities.
Owner Name (Pr	rinted)		_Signature		
Agent (Printed)	)		Signature		
Sworn to before	e me thisday of		, 20		
Notary Public					

VS-13 (08/14)

RE: SECTION 125 OF NEW YORK STATE GENERAL MUNICIPAL LAW ... For all building permits in the Village of Shoreham, an applicant is required to either:

- 1. PROVIDE 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. PROVIDE AN AFFIDAVIT THAT SUCH BUILDING 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.

#### Implementation of Section 125 of the General Municipal Law

- **1. General Contractors and Business Owners:** For businesses **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 (WC/DB-100 or WC/DB-101),

under the mandatory provisions of the WCL. Any residence that is not a **1, 2, 3 or 4 Family**, <u>owner-occupied</u> <u>residence</u> 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 **Single Family, <u>owner-occupied</u> 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 VS-2 (07/14).
  - ♦ Form VS-1 (07/14) shall be filed if the homeowner of a **Single 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 work for which a 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 **Single Family**, <u>owner-occupied</u> <u>residence</u> is hiring or paying individuals a total of **40 hours or MORE** in any week (aggregate hours of all paid individuals on the jobsite) for work performed under the permit, then the homeowner may not file the "Affidavit of Exemption" 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, if appropriate, file a WC/DB-100 exemption form, **OR**
    - \* have the general contractor, (performing the work on a single family, **owner-occupied** residence, 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.

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage And Disability Benefits for a Single Family, Owner-occupied Residence.

COUNTY OF SUFFOLK ss:
Under penalty of perjury, I certify that I am the owner of the single family, <b>owner-occupied</b> residence lister the building permit application that I am applying for, and I am not required to show specific proof of work 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 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 of attached building permit AND am hiring or paying individuals a total of less than 40 hours per value (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 forms approved by the Chair of the NYS Workers' Compensation Board to the government entity iss the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate I for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, I WC/DB-100 exemption form; OR
♦ have the general contractor, performing the work on the single family, owner-occupied residence on the building permit that I am applying for, provide appropriate proof of workers' compensation cover or proof of exemption from that coverage on forms approved by the Chair of the NYS Work Compensation Board to the government entity issuing the building permit if the project takes a total hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated or building permit.
<u>Hold Harmless:</u> I also agree to hold the Incorporated Village of Shoreham harmless for any c and/or cause of action that may arise from the work performed by any individual(s) under a buil permit issued by the Village of Shoreham to which this Affidavit of Exemption is applicable.
Property Address:
Signature Date
Sworn to before me this day of 20

NOTARY PUBLIC VS-02 (07/14)

#### LIABILITY INSURANCE REQUIREMENTS FOR BUILDING PERMIT

In addition to requirements of New York State General Municipal Law Section 125 regarding workers' compensation and disability insurance coverage the Village of Shoreham requires that an applicant provide proof of liability insurance, prior to the issuance of a building permit.

When a general contractor is performing all the work under a building permit, an insurance certificate evidencing general liability insurance coverage from the general contractor's insurance carrier <u>MUST</u> be provided to the Village of Shoreham. The certificate of insurance <u>MUST</u>:

- a) state the location of where work is being performed
- b) name the Incorporated Village of Shoreham as "Certificate Holder"
- c) name the Incorporated Village of Shoreham as "Additional Insured"
- d) state the time frame for notice of cancellation.

When an applicant submits an Affidavit of Exemption from the requirements of GML Section 125, the applicant must provide the Village of Shoreham with proof of homeowner's insurance for the address where work is being performed under a building permit. An insurance certificate evidencing homeowner's liability insurance must be submitted to the Village of Shoreham and must name the Incorporated Village of Shoreham as "Certificate Holder".

Note: Demolition Permit: For issuance of a Demolition Permit by the Village of Shoreham, the compensation and liability insurance certificate must not disclaim "demolition" from coverage under the insurance policy.

Incorporated Village of Shoreham 80 Woodville Road, Box 389 Shoreham NY 11786 www.shorehamvillage.org

### VILLAGE OF SHOREHAM TRANSACTIONAL DISCLOSURE FORM

(Conflict of Interest Disclosure)

This Transactional Disclosure form is required to be submitted by an applicant for certain applications submitted to the Village of Shoreham. The purpose of the disclosure is to alert the Village if a party of influence has an interest in this application, or if someone within the Village who will participate in any decision making process has an interest in the application.

Name			
Address			
Phone	Fax	Email	
This form is for: ( )	An Individual ( ) A C	orporation ( ) A Partnership ( )	Other
Nature of Application:	:		
( ) Building Permit	( ) Demolition (	) Variance ( ) Tax Grievance (	) Change of Zoning
( ) Platt Approval	( ) C of EU ( ) A	amendment ( ) Exemption ( )	Bidding
Affected parcel (addre	ess)		
sister, parent, child, grar actual applicant, being t	ndchild or spouse of any o	ployee of the Village of Shoreham or h f them, have an interest in this applicati perty or having an interest in the corpor <b>No</b> ( )	on by virtue of being the
If NO, Please go to See	ction 4, sign and date.		
If YES, Please comple	te the appropriate secti	on below.	
Section 1- For an <u>Ind</u>	<u>ividual:</u>		
Interested Party:			
Name			
Address			
Section 2 - For a Corp	oration:		
Interested Party:			
Name			
Address			
Title	Departr	nent	
Relationship to elected	officer, appointed official	or employee, if other than Self:	

	) Is the owner of greater than five percent (5%) of the corporate stock of the application nt is a corporation whose stock is publicly traded?
Yes ( ) No (	) The actual applicant,
Yes ( ) No (	) An Officer, Director, Partner, or Employee of the applicant, or
	) Legally or beneficially owns or controls any stock of a non-publicly traded corporate member of a partnership or association of the applicant.
Section 3 - For a	Partnership or Association:
Interested Party:	
Name	
Address	
Title	Department
Relationship to el	lected officer, appointed official or employee, if other than Self:
Yes ( ) No (	) Does the owner hold five percent (5%) interest of publicly traded shares?
Yes ( ) No (	) The actual applicant,
Yes ( ) No (	) An Officer, Director, Partner, or Employee of the applicant, or
	) Legally or beneficially owns or controls any stock of a non-publicly traded corporate nember of a partnership or association of the applicant.
SECTION 4 - A	LL APPLICANTS, PLEASE FILL OUT BELOW, SIGN AND DATE:
Name (print)	Date
Signature	

Incorporated Village of Shoreham 80 Woodville Road, Box 389 Shoreham NY 11786

www.shorehamvillage.org

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Suffolk County, NY

## AFFIDAVIT OF ELECTRICAL SERVICE DISCONNECT

PROPERTY DES	SCRIPTION: SCTM		
DISTRICT	SECTION	BLOCK	LOT
TYPE OF APPL	ICATION		
OWNER		AGENT FOR OWNE	.R
ADDRESS OF PL	ROPERTY		
STATE OF NEWY	)s s:		
		, being duly sworn depo	ses and says that he/she is a licensed
electrician in New	York State and the elect	tric service to the structure pr	roposed to be demolished as shown on a
<b>Demolition Permit</b>	Application made to the l	Incorporated Village of Shoreh	am is:
	another structure on the to be demolished is perma		d and the electric service to the structure
b) no electric	service exists at the struct	ure proposed to be demolished	•
Electrician Name (	Printed)	Signature	
License Number			
Sworn to before r	me thisday of	, 20	
Notary Public			

Suffolk County, NY

## AFFIDAVIT OF SERVICE DISCONNECT

PROPERTY DES	SCRIPTION: SCTM			
DISTRICT	SECTION	BLOCK	LOT	
<b>DEMOLITION</b> A	APPLICATION			
OWNER		AGENT FOR OWN	ER	
ADDRESS OF PI	ROPERTY			
STATE OF NEW Y	)ss:			
		, being duly sworn depose	s and says that he/she is	a licensed plumber
in New York State	and the water, and/or g	as, and/or oil service to the str	ucture proposed to be de	molished as show
on a Demolition Pe	ermit Application made t	o the Incorporated Village of S	Shoreham is:	
		the property not being demo	olished and such servic	e to the structure
b) no service	exists at the structure pr	oposed to be demolished.		
Plumber Name (Pr	inted)	Signature		
License Number				
Sworn to before r	ne thisday of	, 20		
Notary Public		_		