

#### CITY OF PORT JERVIS

BUILDING DEPARTMENT 14-20 HAMMOND STREET P.O. BOX 1002 PORT JERVIS, NEW YORK 12771 TELEPHONE: (845) 858-4080

FAX: (845) 856-6913

#### 13 STEPS TO HIRING A CONTRACTOR

#### Dear Resident or Permit Applicant:

If you are planning a home improvement project like a deck, a new bathroom, or a garage, you will probably need to hire a building contractor. This is not always an easy task. There is no shortage of building contractor horror stories. Almost everyone has heard tales of damage, scams, shoddy workmanship, and builders who disappear in the middle of a project. In fact, except for auto repair shops and car dealerships, no other industry has generated as many complaints, according to the Council of Better Business Bureaus. It would seem that finding a reliable and qualified contractor is not an easy task. You can put the odds on your side, however, by following the following advice.

- Seek a referral from someone you know who is happy with his or her contractor's work.
- Solicit bids from at least three contractors.
- Be wary of proposals that are much lower than any other proposals.
- Contact the Better Business Bureau to check out any contractors that submit bids.
- Insist on a written contract that outlines your entire agreement, including contracts, warranties, and plans
- Make sure there are no blank spaces on anything you sign.
- Insist upon a written warranty on all materials and work.
- Get all building permits and variances before starting the project and identify the contractor on the applications.
- Inspect all work before signing a completion certificate.
- Withhold final payment until the entire project is finished and inspected.
- Get a contractor's affidavit that all subcontractors and material suppliers have been paid before making final payment.
- Report any misrepresentations, shoddy work, failure to honor contracts, unlicensed contractors, or other problems to the appropriate licensing board.

If you select your contractor carefully in the beginning, you are less likely to have problems later. While screening contractors may seem like more work than the construction project itself, the effort can save enormously in money, annoyance and time.

THE CITY OF PORT JERVIS REQUIRES ALL ELECTRICAL AND PLUMBING CONTRACTORS TO BE LICENSED WITH THE CITY.

### 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.\*\*

<b>Under penalty of perjury,</b> I certify that I am the owner of the 1, 2, 3 or 4 family, <b>owner-occupied</b> 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 performance and the work for which the building performance are the work for which the building performance are the work for which the work	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 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 or residence (including condominiums) listed on the buappropriate proof of workers' compensation coverage on forms approved by the Chair of the NYS Workers entity issuing the building permit if the project takes (aggregate hours for all paid individuals on the jobsic	uilding permit that I am applying for, provide ge or proof of exemption from that coverage s' Compensation Board to the government a total of 40 hours or more per week					
(Signature of Homeowner)	(Date Signed)					
<del></del>	Home Telephone Number					
(Homeowner's Name Printed)  Property Address that requires the building permit:	Sworn to before me this day of					
	(County Clerk or Notary Public)					

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage. BP-1 (12/08)

NY-WCB

#### **RETAIN FOR YOUR FILES**

1. Complete attached application for Building Permit and Certificate of Occupancy/Compliance.

#### Please read carefully.

- 2. Items needed to submit with application:
  - a. Plot plan showing property and building location with setbacks
  - b. Complete diagram(s) of work with description of materials for general work, electric and plumbing.
  - c. Certificate of Insurance from each contractor showing compensation and liability coverage. Homeowners, if you do the work yourself, submit a proof of property liability coverage.

#### 3. REQUIRE INSPECTIONS

- a. Building Inspector:
  - 1. Excavation
  - 2. Footings
  - 3. Foundation
  - 4. Before Pour of
  - 5. Rough Framing
  - 5. Kough Frainin
  - 6. Insulation
  - 7. Interior Finish
  - 8. Fire System, smoke Detection & related items
  - 9. Fire Separation
  - 10. Boiler
  - 11. Final Inspection
  - 12. Handicap Accessibility

#### Plumbing Inspector:

- 1. Under Slab Plumbing
- 2. Rough Inspection, including services
- 3. Heating System
- 4. Final Inspection

#### **Electrical Inspector:**

- 1. Construction Service
- 2. Rough Inspection
- 3. Final Inspection
- 4. As Deemed Necessary

PLEASE BE ADVISED THAT ALL PLUMBING AND ELECTRICAL WORK <u>MUST</u> BE PERFORMED BY A PERSON, BUSINESS OR AGENT OF SAID BUSINESS LICENSED BY THE CITY OF PORT JERVIS <u>UNLESS</u> OTHERWISE SPECIFIED BY THIS DEPARTMENT.

PLUMBING AND/OR ELECTRICAL CONTRACTORS WILL BE NOTIFIED FOR VERIFICATION OF JOB. LACK OF VERIFICATION COULD RESULT IN \$300.00 FINE PAYABLE TO PORT JERVIS CITY COURT.

## CANCELLATION OF BUILDING PERMIT AFTER PERMIT FEES HAVE BEEN PAID WILL RESULT IN A 10% ADMINISTRATIVE FEE FROM THE PAID PERMIT FEE.

- 4. Any work in excess of \$20,000 or effecting the structural safety or public safety, **MUST** have plans signed and stamped by a licensed New York State Architect or Engineer.
- 5. You **MUST** obtain a final Certificate of Compliance from the New York Board of Fire Underwriters and from the local Plumbing Inspector. A Certificate of Occupancy/compliance from this office is required as your final step after completion of all work.
- 6. Every Building Permit shall expire if the work has not commenced within three (3) months after the date of issuance or has not been completed twelve (12) months from such date. One six (6) month extension may be authorized. If work is not completed after the six (6) month extension, a new Building Permit must be obtained and the permit fee is twice the amount of the original fee.
- 7. It shall be the responsibility of the applicant and/or property owner to know and adhere to all local and state codes relating to the work included under this permit.

<u>CALL BEFORE YOU DIG!</u> New York Industrial Code requires 2 working days' notice before you dig, drill or blast.

<u>UNDERGROUND UTITLITIES CALL CENTER 1-800-245-2828</u>

# AFFIDAVIT OF FINAL COST OF CONSTRUCTION AND APPLICATION FOR CERTIFICATE OF COMPLIANCE

#### NOTE: APPLICANT MUST COMPLETE FORM WHEN BUILDING PERMIT APPLICATION IS FILED.

Property location:	:				
Secure:	Block:	Lot:	Zone:		
Date of Application	on:		<del></del>		
Applicant's name	·				
Occupancy:		(Owner, t	enant, agent, builder, designer)		
Existing u	use:				
Proposed	d use:				
Is the pro	posed use in confo	rmance with the p	permitted uses within this zone?		
Reason of reques	st:				
Proposed	d use is a change of	use:			
Building p	permit number:		Dated:		
Date of approvals	s: Planning Board:		Zoning Board of Appeals:		
Special conditions	s set by either board	d:			
Estimated cost of	construction from b	ouilding permit:			
Actual cost of cor	nstruction:				
Permit fee paid: _					
Additional fee:	Re	eceipt no.:	Date:		
Certificate fee:	ertificate fee: Receipt no.: Date:				

Fees or portions thereof are not refundable or transferable.

<b>CERTIFICATION:</b> I certify that all statements made on this application are true and correct to the best of
my knowledge and belief, and I understand that the making of any willful false statement of material fact
herein will subject me to the provisions of the Penal Law relevant to the making and filing of false
instruments.

Signature of applicant:_	
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### APPLICATION FOR BUILDING PERMIT CITY OF PORT JERVIS, NEW YORK

Section	Block	Lot	Zone	_	Date	
hereby applie	s for		(Owner, B	uilder, Desig	gner)	
property locat						at the
at					Port Jervis, N.Y. i	n accordance
with all State Municipal rule which are her made a part of	es and regula eby		rdance with the	e accompan	ying detail drawings and s	specifications
(Circle one)	New Cons	struction	Add	lition	Alterations or Re	pairs
Owner's Nam	ne:			Address	s & Phone #	
Builder/Contra	actor:			Address	s & Phone #	
Architect or E	ngineer:			Address	s & Phone #	
Licensed Elec	ctrician:			Address	s & Phone #	
Licensed Plur	mber:			Address	s & Phone #	
Sprinkler Co,:	:			Address	s & Phone #	
Workmens' C	compensation	n and/or Liab	ility Insurance	Carrier (atta	ach copy)	
Are you chan	ging the use	of this buildi	ng in any way?	?		
Existing use of	of dwelling: _				Proposed use of dwelling	<b>j</b> :
Is this building attach elevation		mits?	Is th	nis building i	n the flood zone?	if so,
certification a Does your zo specifications	ning allow fo	r this use? _				proofing

Total cost of project? work:	
Signature of Applicant	
(for office use only) Application approved Approval	Application disapproved Fire Department
Reason(s) for disapproval	
Date of Approval: Planning Board	Zoning Board of Appeals
Date of Denial: Planning Board	Zoning Board of Appeals
	Issuing Officer
Fee: \$ Receipt # _	Date: Permit #