

VILLAGE OF WARSAW, NEW YORK

ROOFING PERMIT APPLICATION

GENERAL INFORMATION

DATE: \_\_\_\_\_

1. PROJECT LOCATION AND INFORMATION:

Number and Street Address: \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

Current use of property/building: \_\_\_\_\_

2. OWNER IDENTIFICATION:

Owners Name: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

3. TYPE OF ROOFING MATERIAL: Asphalt \_\_\_\_\_ Metal \_\_\_\_\_ Other \_\_\_\_\_

If other, give description: \_\_\_\_\_

4. CONTRACTOR INFORMATION: IS TEAR OFF REQUIRED CIRCLE ONE: YES NO

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

5. CONTRACTORS PROOF OF WORKERS' COMPENSATION INSURANCE MUST BE ATTACHED TO THIS APPLICATION.

NOTE: WOODEN SHAKES AND ASPHALT SHINGLES MUST BE REMOVED BEFORE A METAL ROOFING MATERIAL CAN BE APPLIED!!!! ONLY TWO LAYERS OF ROOFING ALLOWED.

DATE RECEIVED \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_ FEE \$20.00

**Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance  
Coverage for a 1,2,3 or 4 Family, Owner-Occupied Residence**

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 homeowner's 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
- 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 building permit:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Sworn to before me this \_\_\_\_\_ day of*  
\_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_  
*(County Clerk or Notary Public)*