## TOWN OF STILLWATER



ESTABLISHED 1788 – SITE OF THE TURNING POINT OF THE AMERICAN REVOLUTION

BOX 700, STILLWATER, NY 12170 (518) 664-6148, FAX (518) 539-0002 BUILDING, PLANNING & DEVELOPMENT DEPARTMENT

## **BUILDING PERMIT CHECKLIST**

This form must be completed for applications to be submitted

2 Sets of plans	
	2 Site plans – show property lines with new and existing construction
	2 Sets Construction Documents (1 Digital copy of plans for Multi/Two Family Dwellings)
	Approval Box 3.5" H x 4" w for stamping by the Town of Stillwater
Pr	oof of Insurance (The only forms accepted as proof of Worker's Comp. Ins)
Workman's Compensation: One of the following:	
	C-105.2 Certificate of Worker's Compensation Insurance
	CE-200 Certificate of Attestation of Exemption
	U-26.3 State Insurance Fund Version of the C-105.2 Form
	SI-12 Certificate of Worker's Compensation Self-Insurance
	GSI-12 Certificate of Group Worker's Compensation Self-Insurance
	GSI-105.2 Certificate of Participation in Worker's Comp. Group Self-Insurance
	BP-1 Owner Occupied Residence Affidavit of Exemption
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	Proof of Liability (With Town of Stillwater as Certificate Holder)
	All information of Owner/Applicant and Contractor/Builder completed
$\vdash$	Installation instructions for mechanical equipment (HVAC, Water Heater, Fireplace)
	Statement of NYS Energy Code Compliance (Recheck Form 4.7.1 or Equal)
	satisfies of 1.13 Energy code comprisince (recences form 1.711 of Equal)

If any of the information is missing from the application package the Owner/Builder listed on the application will be notified and the application will be place in the waiting for information file. The application will not be reviewed until all the missing material is received. This is our standard practice for all applications received by the Building Department.