



WASHINGTON COUNTY  
DEPARTMENT OF CODE ENFORCEMENT

Physical Address: 1153 Burgoyne Ave. Fort Edward, NY 12828  
Mailing Address: 383 Broadway Fort Edward, NY 12828  
Phone: (518) 746-2150

**DEMOLITION PERMIT APPLICATION**

THIS IS A NON-REFUNDABLE APPLICATION FEE. INCOMPLETE APPLICATIONS MAY BE CANCELLED 6 MONTHS AFTER INITIAL REVIEW. **PLEASE ALLOW TWO TO FOUR WEEKS FOR PROCESSING AND REVIEW.** BE SURE TO COMPLETE ALL SECTIONS OF THE APPLICATION. IF YOU HAVE QUESTIONS, CONTACT OUR OFFICE FOR GUIDANCE AT (518) 746-2150.

**NO WORK MAY PROCEED WITHOUT A VALID PERMIT & SITE NOTICE.**

BEFORE SUBMITTING YOUR APPLICATION, PLEASE MAKE SURE YOU COMPLY WITH THE FOLLOWING:

- Calculate your fee & enclose payment. **Make check payable to the Washington County Treasurer.** This is a non-refundable application fee.

Partial Demolition of Residential Structure	\$50.00
Complete Residential Structure	\$100.00

Commercial Structure	\$200.00
----------------------	----------

- Complete all sections of the application in **INK**. Make sure that you have signed the application and all supporting documents where indicated.

Insurance Requirements: **ACORD FORMS ARE NOT ACCEPTABLE PROOF OF COVERAGE**

- Certificate of Workers Compensation Form C-105.2 or U-26.3 **AND**  
Certificate of Disability Insurance Form DB-120.1 or DB-155

**OR**

Exemption of Workers Compensation and Disability Benefits Insurance Coverage: Form CE-200

- A **PRE-DEMOLITION ASBESTOS SURVEY** must be conducted and report submitted and / or variance documents from New York State Department of Labor (<http://www.labor.state.ny.us>) for all buildings. If the survey indicates the presence of asbestos it must be abated in accordance with NYSDOL regulations and follow up survey/report submitted to this office stating that all asbestos has been properly removed from the property.

- If the applicant is **NOT** the property owner, written authorization from the property owner for the demolition **MUST** be submitted in support of the application **OR THE APPLICATION WILL NOT BE PROCESSED**

- All projects must comply with all town or village local laws.

Local Regulation Compliance sheet (LRCC #1) needs to be signed by your local official **BEFORE ANY PERMIT CAN BE ISSUED.** This may require additional time depending on your locality. Inquire at your town or village office and have the LRCC #1 completed **BEFORE** submitting your application. Please be sure that the LRCC #1 is signed by both the applicant & the local official. **(The LRCC#2 must be completed after the demolition and cleanup is finished and a final inspection is performed)**

- WRITTEN** verification from utility supplier must be provided for all utilities including but not limited to **WATER, SEWER, GAS AND ELECTRIC** on the County, Town, Village or utility companies letterhead that the service has been terminated, supply lines disconnected, capped & marked/located.

- At the discretion of the Code Enforcement Office a site consultation may be required **PRIOR** to the issuance of a demolition permit.

**DIG SAFELY NEW YORK MUST BE CONTACTED PRIOR TO WORK COMMENCING. (CALL 811)**



WASHINGTON COUNTY
DEPARTMENT OF CODE ENFORCEMENT

Physical Address: 1153 Burgoyne Ave. Fort Edward, NY 12828
Mailing Address: 383 Broadway Fort Edward, NY 12828
Phone: (518) 746-2150

DEMOLITION PERMIT APPLICATION

FOR OFFICE USE ONLY
APPLICATION NO.
DATE RECEIVED:
DATE EXAMINED:
AMOUNT OF FEE RECEIVED:
APPROVED
APPROVED WITH CORRECTIONS
DISAPPROVED
PERMIT NO.
REASONS:
EXAMINED BY:

Project Location:
STREET / ADDRESS
TOWN VILLAGE
TAX MAP SECTION BLOCK LOT

APPLICANT IS: OWNER ARCHITECT/ENGINEER BUILDER/CONTRACTOR OTHER:

APPLICANT:
NAME:
MAILING ADDRESS:
HOME / OFFICE PHONE #:
CELL PHONE #:
EMAIL:

OWNER (IF DIFFERENT THAN APPLICANT):
NAME:
MAILING ADDRESS:
HOME PHONE #:
CELL PHONE #:
EMAIL:

IF OWNER / APPLICANT IS A CORPORATION GIVE THE NAME AND TITLE OF TWO OFFICERS:
Name: Title:
Name: Title:

TYPE OF BUILDING(S) TO BE DEMOLISHED:
RESIDENTIAL: SINGLE FAMILY TWO FAMILY MULTIPLE DWELLING (APARTMENTS) GARAGE
COMMERCIAL: BUSINESS INDUSTRIAL STORAGE INSTITUTIONAL MISC/UTILITY
NO. OF STORIES: ABOVE GRADE BELOW GRADE
TYPE OF FOUNDATION: SLAB CRAWL SPACE FULL CELLAR
FOUNDATION: WILL BE REPLACED WILL NOT BE REPLACED
BUILDING(S): WILL BE REPLACED WILL NOT BE REPLACED
PROJECT COST:

UTILITIES:
NATURAL GAS PROPANE FUEL/KEROSENE ELECTRIC PUBLIC WATER PUBLIC SEWER
HAVE YOU NOTIFIED ALL APPLICABLE AGENCIES AND/OR PROPER AUTHORITIES FOR DISCONNECT? Y N
HAVE ALL UTILITIES BEEN DISCONNECTED? Y N

ASBESTOS INFORMATION: IMPORTANT! SEE INSTRUCTION PAGE FOR INFORMATION REGARDING ASBESTOS! NO DEMOLITION WORK MAY BEGIN OR PROCEED WITHOUT SUBMITTING TO THIS OFFICE A COPY OF THE ASBESTOS ABATEMENT REPORT IF APPLICABLE:
IS THERE ANY ASBESTOS IN THE BUILDING (EITHER SUSPECTED OR CONFIRMED) Y N
IS THE PERSON/FIRM RESPONSIBLE FOR DEMOLITION LICENSED FOR ASBESTOS ABATEMENT Y N
NAME/ADDRESS/LICENSE NO.
WHERE WILL THE ASBESTOS MATERIAL BE DISPOSED?



**WASHINGTON COUNTY  
DEPARTMENT OF CODE ENFORCEMENT**

**Physical Address:**  
1153 Burgoyne Ave.  
Fort Edward, NY 12828

**Mailing Address:**  
383 Broadway  
Fort Edward, NY 12828

Phone: (518) 746-2150

PLOT DIAGRAM: LOCATING PROPERTY LINES, ALL BUILDINGS/STRUCTURES, UTILITIES INCLUDING WATER, SEWER, GAS AND ELECTRIC & FUEL STORAGE TANKS. SHOW STREET(S)/ROAD(S) AND THEIR NAME(S) AND SHOW SETBACK DISTANCES FROM STREET(S)/ROAD(S) AND ADJACENT PROPERTY LINES.

APPLICATION is hereby made to the Washington County Department of Code Enforcement for the issuance of a demolition permit pursuant to the provisions of Washington County Local Law No. 3 of 2007, and the Building Codes of New York State. The applicant agrees to comply with all applicable provisions of said law and code as well as all applicable local, county or state laws and/or ordinances: and swears that all statements contained in this application are true to the best of his/her knowledge and belief.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

Revised June 2022

# 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](https://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](https://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.



WASHINGTON COUNTY
DEPARTMENT OF CODE ENFORCEMENT

Physical Address:
1153 Burgoyne Ave
Fort Edward, NY 12828

Mailing Address:
383 Broadway
Fort Edward, NY 12828

Phone: (518) 746-2150

LOCAL REGULATION COMPLIANCE CERTIFICATE
TO BE SUBMITTED PRIOR TO ISSUING PERMIT
LRCC #1

TOWN / VILLAGE OF \_\_\_\_\_

THIS IS TO CERTIFY that the proposed construction described in Washington County Building Permit complies with all town and/or village zoning laws or requirements.

Applicant: \_\_\_\_\_

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

Project Description: \_\_\_\_\_

SIGNATURE OF APPLICANT

DATE

TO BE COMPLETED BY LOCAL COMPLIANCE OFFICIAL OR CHIEF ELECTED OFFICIAL
As further described in the attached Washington County Building Permit Application complies with the following local laws:

- Flood Plain Law: [ ] This parcel is in a flood plain [ ] This parcel is not in a flood plain
[ ] Zoning Ordinance [ ] Mobile Home Ordinance [ ] Subdivision Regulations
[ ] Site Plan Review [ ] Other Local Law

Table with 4 columns: Question, N/A, YES, NO. Contains 8 rows of compliance questions regarding various permits and local regulations.

Other remarks by Local Official: \_\_\_\_\_

SIGNATURE OF LOCAL COMPLIANCE OFFICIAL, OR CHIEF ELECTED OFFICIAL

DATE

Compliance Officer Contacts for  
Local Regulation Compliance Certificate "LRCC" #1 & #2

TOWN/VILLAGE	CONTACT	PHONE NUMBER
Argyle Village	Mayor, Wes Clark	(518) 638-8717
Argyle Town	Supervisor, Robert Henke	(518) 638-8681 ext. 12
Cambridge Town	Supervisor, Catherine Fedler	(518) 796-1877
Cambridge Village	William Reagan	(518) 469-3467
Dresden	Supervisor, Paul Ferguson	(518) 499-0552 (home)
Fort Ann Village	Mayor, Dennis Langlois	(518) 639-4416 (office)
Fort Ann Town	Mark Miller	(518) 639-8929 ext. 5
Granville Village	Curt Pedone	(518) 642-2640
Granville Town	Bill Humphries	(518) 642-1500 / 361-8685
Greenwich Village	Eric Becker	(518) 232-8252
Greenwich Town	Andrew Mollica	(518) 335-9786
Hampton	Supervisor, David O'Brien	(518) 282-9830 (office)
Hartford	Mark Miller	(518) 632-9151
Hebron	Supervisor, Brian Campbell	(518) 415-7039
Jackson	Supervisor, Jay Skellie	(518) 854-7883
Putnam Town	William Brown	(518) 547-9539
Salem Town	Supervisor, Evera "Sue" Clary	(518) 854-3277
White Creek	Supervisor, James Griffith	(518) 677-8545 (office)
Whitehall Village	Dan Stazinski	(518) 681-6553
Whitehall Town	Supervisor, John Rozell	(518) 499-1535

Revised February 2022



WASHINGTON COUNTY
DEPARTMENT OF CODE ENFORCEMENT

Physical Address: 1153 Burgoyne Ave.
Mailing Address: 383 Broadway
Fort Edward, NY 12828
Phone: (518) 746-2150

LOCAL REGULATION COMPLIANCE CERTIFICATE
TO BE SUBMITTED AFTER PROJECT COMPLETION

LRCC #2

TOWN / VILLAGE OF

THIS IS TO CERTIFY that the completed demolition project described in Washington County
Demolition Permit # Issued on (date) complies
with all town and/or village zoning laws or requirements. Project is described as follows:

Applicant:

Address:

Project Description:

SIGNATURE OF LOCAL COMPLIANCE OFFICIAL, OR CHIEF ELECTED OFFICIAL

DATE

Completed demolition project complies with all local Town or Village requirements.

No Local Town or Village requirements apply to completed demolition. project.

Other remarks by Local Official:

=> Complete and return to Washington County Code Enforcement, 383 Broadway, Fort
Edward, NY 12828.

=> Please be advised that NO Certificate of Occupancy nor Certificate of Compliance will be issued
until this form is submitted.

SIGNATURE OF APPLICANT

DATE