

rproefrock@northtonawanda.org

**City of North Tonawanda
Building Inspector's Office
216 Payne Avenue
North Tonawanda, NY 14120
Phone: 695-8595 Fax: 695-8544**

Office Use Only

Date: _____

Check # _____

Receipt # _____

License # _____

Fee: \$125.00 Yearly

Make checks payable to: City of North Tonawanda Treasurer

All licenses expire 12/31 of the issuing year

APPLICATION FOR CONTRACTOR'S LICENSE

Name of Company, DBA or Corp: _____

Business Address _____

City _____ State _____ Zip _____

Business Phone _____ Mobile _____ FAX _____

Number of Years in the Business _____ E-Mail address: _____

Name of Principal owner or owners _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Date of Birth _____

Any outstanding Liens or Judgments _____ Approximate No. of Employees _____

Be advised that Section 50 of the General Cities Law of the State of New York states that each person duly licensed and engaging in business as a contractor for a fee, within the City of North Tonawanda, New York shall register annually with the City Clerk. Such registration shall run from January 1st to December 31st in each successive year.

In order to receive a Contractor License from the City of North Tonawanda your insurance agency must insure the City of North Tonawanda that they will provide a Certificate of Insurance upon renewal of the policy, or in the event the policy is not renewed, your agency insures that they will notify this office within five days of the expiration date.

Barring either of the above, the City of North Tonawanda must deny a Building License to your insured.

If any of the required insurances are allowed to expire, your license will be suspended, and no building permits will be issued until your insurances have been updated. If any contractor is found to be performing any work within North Tonawanda City limits without a license and or permit, they are subject to a fine and or imprisonment.

*** Verification by Subscription and Notice Under Penal Law Section 210.45 ***

It is a crime, punishable as a Class "A" Misdemeanor under the laws of the State of New York, for a person, in and by a written instrument, to knowingly make a false statement, or to make a statement which such person does not believe to be true.

Affirmed under Penalty or Perjury this _____ day of _____ 20__

Signature of Applicant

Check types of construction your company specializes in.

_____ Commercial _____ Residential

- | | |
|----------------------------|-------------------------------------------|
| _____ Blacktop | _____ Heating & Air Conditioning |
| _____ Cell Towers/Antennas | _____ Home Improvements-Additions/Dormers |
| _____ Concrete | _____ Insulation |
| _____ Decks/Porches | _____ Interior Remodeling |
| _____ Demolition | _____ Masonry |
| _____ Dry Wall | _____ New Home-General Contractor |
| _____ Electrical | _____ Patio Enclosures |
| _____ Exterior Remodeling | _____ Roofing |
| _____ Fences | _____ Signs |
| _____ Fire Repairs | _____ Swimming Pool Installer |
| _____ Fireplace/Chimney | _____ Tree Trimmer |
| _____ Garage | _____ Windows |
| | _____ Other _____ |

**City of North Tonawanda
Building Inspection Office
216 Payne Avenue
North Tonawanda, NY 14120**

**Cosimo R. Capozzi
Building Inspector
Phone: (716) 695-8595
Fax: (716) 695-8544**

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All Contractors who work within the City of North Tonawanda must have a Contractor's License issued by the North Tonawanda Building Inspection Department in accordance with the amendment to Chapter 28-A of the City of North Tonawanda Codes adopted 4/03/02 and published 4/17/02.

All licenses must be renewed yearly, and will expire each year on December 31st.

Instructions for obtaining a City of North Tonawanda Contractor's License

1. Completely fill out the enclosed application.
2. Please carefully read the attachment regarding Workers Compensation and N.Y.S. Disability Insurance requirements. Insurances may be emailed to rproefrock@northtonawanda.org
3. Provide **Original Workers Compensation and Disability Insurance Certificates** signed by NYS Workers Compensation Board as follows: Compensation must be on Form C105.2 (12-03) or U-26.3 (State Fund) or waiver(s) CE-200. Disability must be on Form DB120.1 or waiver(s) CE-200 (NYS Waiver web address: www.wcb.state.ny.us)
4. Provide a **Certificate of Insurance for General Liability** to the City of North Tonawanda C/O The Building Inspector's Office, in the amount of at least \$300,000 **showing the City of North Tonawanda as a Certificate Holder on the Acord form.**
5. Enclose a check in the amount of \$125.00 payable to the North Tonawanda City Treasurer.

No license will be issued unless we have a current Certificate of Liability Insurance in an amount of at least \$300,000 and the required Workers' Compensation Form and NYS Disability Form.

Unless all requirements are met and maintained, your license will not be valid.

You must call your insurance agent, who in turn will call the Insurance Carrier of the policies and request the correct forms. Not all agents have the required forms. For information regarding any of the Disability or Compensation forms, please call the Compensation Board at (716) 842-2051. The North Tonawanda Building Inspection office can only answer questions regarding the expiration date(s) of the current form(s) available in their files.

Mail all documents; application, all proper insurance certificates and check to:

**Renée Proefrock
Building Dept
216 Payne Ave.
North Tonawanda, NY 14120**

BEFORE YOU MAIL, PLEASE REVIEW THE CHECK OFF SHEET.

- Completed Application
- Liability Insurance Certificate
- NYS Workers Insurance Certificate OR Waiver
- NYS Disability Insurance Certificate OR Waiver
- \$125 check payable to North Tonawanda City Treasurer