buildingoffice@northtonawanda.org

City of North Tonawanda Building Inspector's Office 216 Payne Avenue

North Tonawanda, NY 14120 Phone: 695-8595 Fax: 695-8544

Date:	Office Use Only
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 LICENSE

Business Address			
City		State	Zip
Business Phone		Mobile	FAX
Number of Years in	the Business	E-Mail address:	
Name of Principal o	wner or owners		
Address			
City	State	Zip	
Home Phone	Date	of Birth	_
Any outstanding Lie	ens or Judgments	Approximate No	o. 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 $1^{\rm st}$ to December $31^{\rm st}$ 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 if 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.

	Signature of Applicant
N.	regulature of repplicant
Check types of cons	truction your company specializes in.
<u></u>	<u> </u>
Commercial Resident	tio1
	1171
Resident	uai
Blacktop Cell Towers/Antennas	Heating & Air Conditioning
Blacktop	Heating & Air Conditioning
Blacktop Cell Towers/Antennas	Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation
Blacktop Cell Towers/Antennas Concrete	Heating & Air Conditioning Home Improvements-Additions/Dorm
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry New Home-General Contractor
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall Electrical	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry New Home-General Contractor Patio Enclosures
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall	 Heating & Air Conditioning Home Improvements-Additions/Dormal Insulation Interior Remodeling Masonry New Home-General Contractor Patio Enclosures Roofing
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall Electrical Exterior Remodeling Fences	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry New Home-General Contractor Patio Enclosures Roofing Signs
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall Electrical Exterior Remodeling Fences Fire Repairs	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry New Home-General Contractor Patio Enclosures Roofing Signs Swimming Pool Installer
Blacktop Cell Towers/Antennas Concrete Decks/Porches Demolition Dry Wall Electrical Exterior Remodeling	 Heating & Air Conditioning Home Improvements-Additions/Dorm Insulation Interior Remodeling Masonry New Home-General Contractor Patio Enclosures Roofing Signs

Rev 11/17

City of North Tonawanda Building Inspection Office 216 Payne Avenue North Tonawanda, NY 14120 Robert C. DePaolo Building Inspector Phone: (716) 695-8595 Fax: (716) 695-8544

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<u>All Contractors</u> who work within the City of North Tonawanda must have a Contractor 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 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 buildingoffice@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 <u>Certificate of Liability Insurance in an amount of at least \$300,000 and the required Workers' Compensation Form and NYS Disability Form.</u>

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:

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				
Photo ID				