



Taconic Shores Property Owners Association, Inc.

BUILDING PERMIT APPLICATION INSTRUCTIONS

Any new construction, exterior alterations, or adding new structures or additions to structures requires written approval from the TSPOA Board prior to a Member commencing the work. The checklist below is intended to guide Members in submitting a complete Building Permit Application package. If the type of project the Member is requesting a Building Permit for is not specifically listed below, the Member is encouraged to reach out to the TSPOA Office for further clarification.

Major Projects include, but are not limited to, new construction of dwellings and enclosed electrified or conditioned structures, new garage construction, additions or extensions to existing structures, alterations to the footprint of existing structures. The following documents will need to be submitted:

- Major Projects Building Permit Application
- TSPOA Permit Checklist
- Approved Town of Copake Building Permit (if required by law)
- Approved New York Department of Environmental Conservation (NYDEC) Permit (if construction is within 100ft of Robinson Pond shoreline)
- Variance Request Form (if required by TSPOA Governing Documents)
- Certificate of Liability Insurance
- Worker's Compensation & Disability Insurance OR Hold Harmless Agreement
- Construction drawings showing scope of project and reviewed, approved, and stamped by Professional Engineer or Registered Architect licensed by New York State
- Site survey or plan drawing showing location of construction in relation to lot boundaries, with measurements between lot boundaries and construction dimensions clearly labeled

NOTE: Sediment and Erosion plan may be requested.

Minor Projects include, but are not limited to, new accessory structures such as docks, decks, patios, sheds, fences, hot tubs, satellite antennae (dishes), rooftop solar panels, driveways. The following documents will need to be submitted:

- Minor Projects Building Permit Application
- TSPOA Permit Checklist
- Variance Request Form (if required by TSPOA Governing Documents)
- Certificate of Liability Insurance
- Worker's Compensation & Disability Insurance OR Hold Harmless Agreement
- Drawings showing scope of project
- Site survey or plan drawing showing location of construction in relation to lot boundaries, with measurements between lot boundaries and construction dimensions clearly labeled

NOTE: Sediment and Erosion plan may be requested.



Taconic Shores Property Owners Association, Inc.

TSPOA PERMIT CHECKLIST

Date Received: _____

Owners Name: _____

Address Location of Work: _____

Lot #: _____

Estimated Cost of Project: _____

Type of construction (check all that apply):

- House _____ Stamped Plans _____
- Addition _____ Stamped Plans _____
- Garage _____
- Carport _____
- Shed _____
- Deck _____
- Dock _____
- Other _____ Explanation _____

For Office Use Only below this line

Set Backs:

- Front (25') _____
- Side #1 (8') _____
- Side #2 (8') _____
- Back (10'**) _____ On Lake Back (100'): _____

** 10 feet plus area required for sewage disposal layout

Is DEC permit necessary? _____ Expiration Date of DEC permit: _____

Is Town of Copake permit necessary? _____ Expiration Date of Town of Copake permit: _____

Is a TSPOA Variance necessary? _____ Why? _____

Variance Neighbor Letters sent date: _____

Are **DUES** paid in Full? _____

Permit Fee Paid? _____

Board of Directors Approval Date: _____

Building Committee Project Completion Inspection Date: _____

Expiration Date of TSPOA Permit: _____



Taconic Shores Property Owners Association, Inc.

MAJOR PROJECT PERMIT APPLICATION

Application is hereby made to the Board of the Taconic Shores Property Owner's Association, Inc. for the approval of the detail statement of the application and plans herewith submitted for the erection / renovation of structure herein described, and for permit to erect such building or structure.

By submitting this application, the applicant agrees that if the Association grants a building permit, the plans, specifications, and construction described herein will conform in all respects with the terms of this application and any and all permits granted by and restrictions, regulations, and orders of the Taconic Shores Property Owners Association, the Town of Copake, Columbia County, the New York State Department of Environmental Conservation, and any body or department of the State of New York or the government of the United States with jurisdiction over said work. **The applicant further agrees to furnish any additional information, plans or statements, if required by the Building Committee**

1. Owners Name: _____
2. Owners Email Address: _____ Phone Number: _____
3. Lot #: _____ Address Location of work: _____
4. Architects Name & Address: _____
5. Builders Name & Address: _____
Builders Phone Number: _____
6. Size of lot (in feet): Front: _____ Rear: _____ Depth: _____
7. No. of buildings to be erected: _____ No. of stories to be erected: _____
8. Square footage of new dwelling or alteration: _____
9. Height of new dwelling or alteration (in feet): _____
10. Purpose of construction and / or description of alteration:

11. Will roof be flat, peaked, or _____ State material of roofing: _____
12. Is building to be heated? _____ If yes, how: _____
13. Will the building be wired for electric lighting or power? _____

Major Project Building Permit Application Continues on Page 2. Both pages must be completed.

Signature of Applicant: _____



Taconic Shores Property Owners Association, Inc.

Major Project Building Permit Application Continues below.

14. Worker’s Compensation & Disability Insurance – The only Certificate of Insurance forms accepted as proof of Workers Compensation from builder/contractor are: SI-12, U-26.3, WC/DB-100, and Disability are: WC/DB-100, db120.1 or DB-155. **Taconic Shores must be named as certificate holder.** For additional information please call NYS WC Board (518) 486-6307

Name of Company: _____

Number of policy: _____ Date of expiration: _____

Note: If the builder is self, a solo builder (without any employees), or exempt from carrying Worker’s Compensation, then a signed Hold Harmless agreement may be substituted in lieu of the Worker’s Compensation Certificate.

15. Liability Insurance – **Taconic Shores must be named as additionally insured and as certificate holder.** *REFER BELOW FOR ACETABLE WORDING ON ACORD25 FORM.*

Name of Company: _____

Number of policy: _____ Date of expiration: _____

The ACORD25 form must have the following two (2) items included:

- **The Description of Operations box on the ACORD25 form must include the wording “TSPOA is named as an Additional Insured for the life of this project.” It must also include the Location of Work Address as listed on page 1 of this form.**
- **The minimum for Each Occurrence on the ACORD25 form must be \$500,000.**
- **The Certificate Holder box on the ACORD25 form must name Taconic Shores Property Owners Association, Inc. with the address 53 Lake Shore Dr., Copake, NY 12516.**

Signature of Applicant: _____

(Notarization required for new construction and dwellings)

STATE OF NEW YORK COUNTY OF _____

On this ____ day of _____ 20____, before me the subscriber, personally came _____ to me known, who being duly sworn did depose and say that (s)he resides at _____ that s(he) is owner of real property described in and which executed the above instrument; and that (s)he signed his/her name thereto by like order.

Notary Public

For Office Use Only below this line

Permit approved date: _____

Permit expiration date: _____

Board director signature: _____



Taconic Shores Property Owners Association, Inc.

MINOR PERMIT PROJECT APPLICATION

Application is hereby made to the Board of the Taconic Shores Property Owner’s Association, Inc. for the approval of the detail statement of the application and plans herewith submitted for the erection / renovation of structure herein described, and for permit to erect such building or structure.

By submitting this application, the applicant agrees that if the Association grants a building permit, the plans, specifications, and construction described herein will conform in all respects with the terms of this application and any and all permits granted by and restrictions, regulations, and orders of the Taconic Shores Property Owners Association, the Town of Copake, Columbia County, the New York State Department of Environmental Conservation, and any body or department of the State of New York or the government of the United States with jurisdiction over said work. **The applicant further agrees to furnish any additional information, plans or statements, if required by the Building Committee**

1. Owners Name: _____
2. Owners Email Address: _____ Phone Number: _____
3. Lot #: _____ Address Location of work: _____
4. Builders Name & Address: _____
Builders Phone Number: _____
5. Size of lot (in feet): Front: _____ Rear: _____ Depth: _____
6. Square footage of new construction or alteration: _____
7. Height of new construction or alteration (in feet): _____
8. Purpose of construction and / or description of alteration:

Minor Project Building Permit Application Continues on Page 2. Both pages must be completed.

Signature of Applicant: _____



Taconic Shores Property Owners Association, Inc.

Minor Project Building Permit Application Continues below.

9. Worker’s Compensation & Disability Insurance – The only Certificate of Insurance forms accepted as proof of Workers Compensation from builder/contractor are: SI-12, U-26.3, WC/DB-100, and Disability are: WC/DB-100, db120.1 or DB-155. **Taconic Shores must be named as certificate holder.** For additional information please call NYS WC Board (518) 486-6307

Name of Company: _____

Number of policy: _____ Date of expiration: _____

Note: If the builder is self, a solo builder (without any employees), or exempt from carrying Worker’s Compensation, then a signed Hold Harmless agreement may be substituted in lieu of the Worker’s Compensation Certificate.

10. Liability Insurance – **Taconic Shores must be named as additionally insured and as certificate holder.** *REFER BELOW FOR ACCETABLE WORDING ON ACORD25 FORM.*

Name of Company: _____

Number of policy: _____ Date of expiration: _____

The ACORD25 form must have the following two (2) items included:

- **The Description of Operations box on the ACORD25 form must include the wording “TSPOA is named as an Additional Insured for the life of this project.” It must also include the Location of Work Address as listed on page 1 of this form.**
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- **The Certificate Holder box on the ACORD25 form must name Taconic Shores Property Owners Association, Inc. with the address 53 Lake Shore Dr., Copake, NY 12516.**

Signature of Applicant: _____

For Office Use Only below this line

Permit approved date: _____

Permit expiration date: _____

Board director signature: _____



Taconic Shores Property Owners Association, Inc.

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

This Agreement, dated _____, between Taconic Shores Property Owners Association, Inc. (TSPOA), and:

Contractor: _____

Homeowner: _____

Property Address: _____

WHEREAS residents of Taconic Shores, including Homeowner, must obtain a building permit from TSPOA prior to commencing Construction (as that term is defined in the TSPOA governing documents); and

WHEREAS TSPOA requires building contractors performing Construction work at any property located within Taconic Shores to provide proof of workers' compensation insurance coverage prior to TSPOA issuing a building permit; and

WHEREAS Homeowner has retained Contractor to perform certain Construction work at the property listed above; and

WHEREAS Contractor does not have employees and/or is not eligible to obtain workers' compensation insurance;

NOW, THEREFORE, in consideration of a Building Permit fee of _____ to be paid by the Homeowner (s) by ___/___/___, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged by the parties, the parties hereto agree as follows:

1. TSPOA hereby waives its requirement that Contractor demonstrate proof of workers' compensation insurance prior to issuing a building permit to Homeowner.
2. Homeowner and Contractor hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless TSPOA from any and all liability, claims, demands, or causes of action, including but not limited to attorneys' fees, judgments, or settlements, arising out of claims, suits or causes of action for damage or injury to persons or property which are in any way related to Contractor's and/or Homeowner's work at the above-stated property.



Taconic Shores Property Owners Association, Inc.

3. In the event that TSPOA or anyone acting on its behalf incurs attorney's fees and costs to enforce this Agreement, Homeowner and Contractor jointly and severally agree to indemnify and hold them harmless for all such fees and costs.

TACONIC SHORES PROPERTY
OWNERS ASSOCIATION, INC.

Association Manager or Officer of the Board

Homeowner

Contractor



Taconic Shores Property Owners Association, Inc.

VARIANCE REQUEST FORM

Owners Name: _____ Lot Number: _____

Owners Email Address: _____ Owners Phone Number: _____

Address Location of Work: _____

Purpose of Variance: _____

Description of Construction:

For Office Use Only below this line

TSPOA Permit Application _____ Town of Copake Permit _____ DEC Permit _____

Building Director: _____ Date Approved: _____

Reason for Granting/Denying Variance: _____

Neighbor Notifications: _____

APPROVAL OF DIRECTORS:

VERBAL



BY MOTION



PRESIDENT ___ Approve ___ Disapprove

VICE-PRESIDENT ___ Approve ___ Disapprove

SECRETARY ___ Approve ___ Disapprove

___ Approve ___ Disapprove

___ Approve ___ Disapprove

___ Approve ___ Disapprove

___ Approve ___ Disapprove

___ Approve ___ Disapprove

___ Approve ___ Disapprove