

## HOMEOWNER CERTIFICATION

## FOR WORK BEING PERFORMED BY THE HOMEOWNER WITHOUT A CONTRACTOR

It is at the discretion of the building Inspector to issue building/plumbing permits to a homeowner for work being performed by the homeowner without a licensed contractor

NAME(S):		
STREET:	CITY: SOUTH FLORAL PARK STATE: NY ZIP:11001	
I/WE		wner(s) of the prope
known as	located in the Village	of South Floral Par
that I/we will not be emploremuneration will be given for other than me will be worth mandated forms of insurance to save, defend, indemnormal employees, agents of the save o	are performing demolition/construction work on said bying the services of any contractors or subcontractor any work performed. It is my/our understanding that king on this project and that said work will not require. In consideration thereof and as the property owner ify and hold harmless the Inc. Village of South Florar representatives against any damages resulting from demolition/construction.  and the above statements and understand the contractor.	ors and no t no person(s) e generally (s). I/We agree I Park, its m this
Owner #1 Signature	Owner #2 Signature (if	f applicable)
Owner #1 Print Nam	e Owner #2 Print Name (	if applicable)
Sworn to before me	Sworn to before me	
thisday of	, 20 thisday of	, 20
Notary Signature	Notary Signature	

This form to be accompanied by the front page of your homeowners 'policy showing policy date and signed and notarized form BP-1



## Inc. Village of South Floral Park

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3, 4 Family, Owner occupied residence (including condominium) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriated box): O I am performing all the work for which the building permit was issued I am **NOT** hiring, paying or comensating in any way, the individual(s) that is (are) performing all the work for which the building permit was issued or helping me perform such work. I have a home-owner insurance policy that is currently in effect and covers the property listd on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was I also agree to either: Acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for eork indicated on the building permit, or if appropriate, file a CE-200 Exemption form; OR have a general contractor, performing the work on the 1,2,3, or 4 family, owner occupies residence (including condominiums) listed on the building permit that i am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the work indicated in the building permit. (Signature of Homeowner) Date Signed Telephone (Homeowner's Name Printed) Property Address that requires the building permit: Sworn to before me day of , 20

(County Clerk of Notary Public)