Fee Paid	
Receipt #	
Date	

# VILLAGE OF GREAT NECK ESTATES MISCELLANEOUS PERMIT APPLICATION

Location of Work		Section 2 Block	Lot (s)	Zone		
Owner's Name (s)		Estimated Cost of Work \$				
Owner's Home Phone #	Business #	24	Hr Emergency			
Owner's Email:						
Application is hereby made for the pe Note: If a dumpster is neede		ordance with the require	ements of the Village C	Code:		
PLUMBING (Provide j	plumbing diagram)					
ROOFING (Describe e	xtent of work below)					
Material of e	xisting roof		$\_$ to remain	$\Box$ to be removed		
	olor of new roof (Provid					
Type & size	of structural support					
Nailing Patte	ern ( <b>Provide copy of ma</b>	nufacturer's specific	ation sheet)			
	surveys, <b>two</b> of which shou of manufacturer's specifica		fence size & location)	)		
	ee & Refundable Deposit. <u>se</u> of which should be marke		sidewalk repair)			
(Filing Fee, three surve	<b>VAY/PATIO</b> See Section 2 eys, two copies marked and driveway, size drywell for	dimensioned indicating	size and location) Calo	culate rainwater		
OTHER	Specification or I	Description of Prop	osed Work			
Contractor's Name						
Contractor's Address						
Contractor's Telephone #		24 Hr Emergenc				
Plumber's Name*						
Plumber's Address						
Plumber's Telephone #		24 Hr Emergenc	y #			
Electrician's Name*						
Electrician's Address						
Electricians's Telephone #		24 Hr Emergency	v #			
*******						

\*\*NY State Law requires that Certificates of Workers' Compensation Insurance, General Liability Insurance, and Disability Insurance be filed with this application for ALL contractors and subcontractors performing work pursuant to this application. See minimum insurance requirements. The Incorporated Village of Great Neck Estates, It's Officers, Agents & Employees must be named as Additional Insured and Certificates must identify the job location. \*\* Plumbers & Electricians require a Village of Great Neck Estates License in addition to the above\*

f/w/bldgdept/forms/bldgdept forms – applications/bldg permit miscellaneous 12/2020 (1)

## **AFFIDAVIT OF PROPERTY OWNER/AUTHORIZATION**

All Owners must sign either as owner or applicant

State of New York ) SS:	
County of Nassau )	
(I)(We),	being duly sworn, state:
Print Name(s	)
Complete Items #1, 2 or 3 as applicable, then Item #4	
(I am) (We are) the owner(s) of the property described in th	is application known as, and described
on the Nassau County Land and Tax Map as Section 2 Blo	ck, Lot(s)
(1) If the applicant is a corporation, the deponent	is an officer thereof, to wit the, and is
authorized by the Board of Directors of the co	prporation to execute this application on behalf of the corporation.
(2) If the applicant is a partnership, the deponent,	is a general partner thereof, and has
authority to execute this application in the nar	ne of the partnership.
(3) (I) (We) hereby authorize	to submit this application.
	Signature of Owner
	Signature of Owner
Sworn to before me thisday	
of20	
Notary Public	
	Signature of Applicant
Sworn to before me thisday	
of20	
Notary Public	

#### FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS 'A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK

f/w/bldgdept/forms/bldgdept forms – applications/bldg permit miscellaneous 8/2020

# HOLD HARMLESS AGREEMENT

To the fullest extent permitted by law, <u>(owner)</u>, shall indemnify, defend and hold harmless the **Incorporated Village of Great Neck Estates**, its elected and appointed officials, agents, employees and volunteers from and against all claims, damages, losses and expenses, including, but not limited to, reasonable attorneys' fees, arising out of or resulting from the performance of activities of (<u>Job location & description of work:</u>)

or of its officers, agents, employees and/or sub-contractors, provided that such claim, damage, loss or expenses is attributable to bodily injury, sickness, disease or death or to injury to or destruction of tangible property (other than the work itself), including the loss of use resulting there from, regardless whether or not it is caused in part by a party indemnified thereunder. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist in favor of any party or person, described in these paragraphs.

In any and all claims against the **Incorporated Village of Great Neck Estates**, its elected and appointed officials, agents, employees or volunteers by any employee of the contractor or subcontractor, anyone directly or indirectly employed by any of them or anyone whose acts any of them may be liable, the indemnification obligation under the above paragraph shall not be limited in any way by any limitation on the amount of type of damages, compensation or benefits payable by or for the contractor or their sub-contractor under Workers Compensation acts, disability acts, or other employee benefit acts.

In witness whereof, the undersigned has executed this agreement this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signature

Print Name & Title

Signature

Print Name & Title

STATE OF NEW YORK

COUNTY OF \_\_\_\_\_: SS

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity(ies), and that by his/her signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument/

# VILLAGE OF GREAT NECK ESTATES

# **Machinery Operation Compliance Agreement**

# NOTICE

Section one. Paragraph A of Section 154-2 of the Code of the Village of Great Neck Estates is hereby amended, to read as follows:

A. No person shall permit or cause the operation of any machinery, including lawn mowers, drills, power saws or other equipment,

(a) between the hours of 7:00pm on any day and 8:00am on the following day,

(b) on Saturdays, for more than an aggregate of thirty (30) minutes at any one property,

(c) or at any time on Sundays or holidays,

if such operation causes the emission of noise audible beyond the boundary of the property on which the machinery or equipment is located.

I, the undersigned, have read, understand and will comply with the aforementioned section of the Village Code.

Print Name (Owner)	Print Name (Contractor) (Company Name)
Signature	Signature
 Date	 Date

f\w\building dept\forms/machinery operation compliance agreement 12/2020

# VILLAGE OF GREAT NECK ESTATES

4 Gateway Drive, Great Neck, NY 11021 516-482-8283 Fax: 516-482-5572

# **INSURANCE & LICENSE REQUIREMENTS**

## **GENERAL CONTRACTORS:**

- <u>General Liability Certificate</u> (Acord Form)
  - "The Incorporated Village of Great Neck Estates, and its Officers, Agents and Employees 4 Gateway Drive Great Neck, NY 11021" MUST be listed as the <u>Certificate Holder</u> & listed as <u>Additionally Insured</u> on the certificate
  - ✓ Address of Job MUST also be listed on certificate
- Additional Insured Endorsement Form (ISO Form CG 20 12)
  - ✓ MUST be indicated on the form: <u>"The Incorporated Village of Great Neck Estates, and its Officers,</u> <u>Agents and Employees</u> <u>4 Gateway Drive Great Neck, NY</u> <u>11021</u>"
- <u>Disability Insurance</u> (DB120 form)
- <u>Workers' Compensation</u> (C105.2 form)
- <u>Nassau County Home Improvement License</u> \*Note: For Workers' Comp & Disability Exemption use form CE-200

## **PLUMBER:**

 Village of Great Neck Estates Plumber's License - \$50/year Submit copy of current Master Plumber's License & Liability, Disability & Workers' Comp Insurances as indicated above

## **ELECTRICIAN:**

 Village of Great Neck Estates Electrician's License - \$50/year Submit copy of current Master License & Liability, Disability & Workers' Comp Insurances as indicated above

# **ELECTRICAL INSPECTION SERVICES**

**Certified Electrical Inspections Inc.** 188 Park Ave Amityville, NY 11701 (888)-238-1338 (631)-598-5610

Electrical Inspection Service Inc. 375 Dunton Avenue East Patchogue, NY 11772 (631)286-6642 6/13/11

NYS Electrical Inspections, Inc. 278 Indian Head Road Kings Point, NY 11754 (631)466-4235 (631)292-2710 7/13/20 **Electrical Inspectors Inc.** 308 East Meadow Ave East Meadow, NY 11554 (516)794-0400

 Alliance Electrical Inspections Ltd

 707 Hyman Avenue

 West Islip, NY 11795

 (516)248-0820 (631)539-6055 6/13/11

Suffolk Bureau of Electrical Inspectors Inc. 40 Nottingham Drive Middle Island, NY 11953 (631)495-8136 3/10/14

Long Island Electrical Inspectors, Inc. 21 Third Avenue Bayshore, NY 11706 (631)708-6690 7/8/13

\*The above electrical inspection companies are the ONLY electrical inspectors authorized by the Village of Great Neck Estates Board of Trustees.

## VILLAGE OF GREAT NECK ESTATES 4 Gateway Drive, Great Neck, NY 11021 516-482-8283 fax: 516-482-5572

## **INSURANCE REQUIREMENTS**

### **PROPERTY OWNER**

Hold Harmless Agreement

### **GENERAL CONTRACTORS**:

- <u>Nassau County Home Improvement License</u>
- <u>General Liability Certificate</u> (Acord Form)
  - "Incorporated Village of Great Neck Estates, Its Officers, Agents and Employees 4 Gateway Drive Great Neck, NY 11021", MUST be listed as <u>Additional Insured & Certificate Holder</u>
  - ✓ Address of Job must also be listed on certificate
- <u>Additional Insured Endorsement Form</u> (ISO Form <u>CG 20 12)</u>
  - ✓ Must be indicated on the form: "Incorporated Village of Great Neck Estates, Its Officers, Agents and Employees 4 Gateway Drive Great Neck, NY 11021"
- <u>Disability Insurance</u> (DB120 form)
- Workers' Compensation (C105.2 form) \*Note: For Workers' Comp & Disability Exemption use form CE-200

<u>The Contractors and all subcontractors</u> shall maintain, at a minimum, the following insurance, and provide evidence of same to the <u>Village of Great Neck Estates</u> in the form of Certificates of Insurance or copies of policies, providing 30 days' notice of Cancellation or non-renewal. The insurance carrier must be a New York State licensed carrier with an A.M. Best Rating of at least an A IX. In all cases where the Village, its officers, agents and employees are to be named as additional insured, an endorsement to the insurance policy must be provided as documentation of such additional insured status.

#### I. Workers Compensation and NYS Disability

1.	workers Compensation and N 1	15 Disability
	Coverage	Statutory
	Extensions	Voluntary Compensation
		Employers Liability - Unlimited
II.	<u>Commercial General Liability</u>	
	Coverage and Limits	Occurrence - 1999 ISO CGL or equivalent
		General Aggregate \$2,000,000
		Products & Completed Operations \$2,000,000
		Personal & Advertising Injury \$1,000,000
		Per Occurrence Limit \$1,000,000
		Fire Damage \$ 50,000
		Medical Expense \$ 5,000
	Additional Insured	All owners, agents, employees, volunteers, elected and appointed officers and officials of the
		Incorporated Village of Great Neck Estates, using ISO Form GC 20 10 07 04 be accompanied by CG
		20 37 07 04 adding back Completed Operations
	Special	Hold Harmless Agreement
		Aggregate Limits Per Project
		Waiver of Subrogation
		Primary & Non-Contributory, Contractual Liability
		3 <sup>rd</sup> Party Injury to Employees, Volunteers, Subcontractors etc.
		Include Completed Operations
III.	<u>Automobile Insurance</u>	
	Coverage	Standard New York Policy including all owned, hired, and non-owned vehicles
	Limit	\$1,000,000. Combined Single Limit
	Additional Insured	all owners, agents, employees and volunteers and elected and appointed officers and officials of the
		Incorporated Village of Great Neck Estates and the Great Neck Estates Civic Association, Inc., using
		ISO Form CG2010 (B) or equivalent.
		(6)

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		Y - VILLAGE						
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ESTIMATED COST OF CONS	TRUCTION		1	OWNER	ADDRESS			
Committee coor of conc	intee non.			OR				
					CITY, STATE, ZIP			
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PERMIT EXP DATE			TEEL		EMAIL			
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