



# Town of Moreau

Building Department  
351 Reynolds Road  
Moreau, NY 12828-9261  
**Phone:** (518) 792-4762  
**Fax:** (518)792-4615

**Matt Dreimiller**  
*Building Inspector/CEO*  
**Kathy Perez**  
Building Department Clerk

## ACCESSORY STRUCTURE APPLICATION REQUIREMENTS

Please keep this coversheet for your information

**No construction activities may commence until an approved permit is issued**

**TWO SETS OF THE FOLLOWING INFORMATION MUST BE PROVIDED (ONE ORIGINAL AND ONE COPY):**

- 1) **APPLICATION MUST BE FILLED OUT COMPLETELY & CLEARLY.** Name and address must be on each document. The signature of the property owner, applicant, or contractor is required.
- 2) Detailed drawings to include (but not limited to):
  - a. Foundation
  - b. Floor and wall framing
  - c. Cross Sections
  - d. Elevations
- 3) Energy code compliance path: RESCheck or (if applicable).
- 4) Plot plan drawn to scale with the use of a survey map, if available
  - a) Indicate proposed structure(s), showing setback dimensions from all property lines
  - b) Show location of all existing structure(s) on the property
  - c) Show location of water supply (well or water lines)
  - d) Show location and configuration of on-site wastewater disposal system or sewer line.
- 5) Approved electrical inspection agency (if applicable)
- 6) Insurance requirements:
  - a. **Homeowner:**
    - i. Affidavit of Exemption of Workers Compensation and/or Disability Benefits Insurance Coverage (**form CE-200 found at [www.wcb.state.ny.us](http://www.wcb.state.ny.us)**)
    - ii. Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence: **Form BP-1**
  - b. **Contractor:**
    - i. Certificate of Workers Compensation: **Form C-105.2 or U-26.3**
    - ii. Certificate of Disability insurance: **Form DB-120.1 or DB-155**
    - iii. Affidavit of Exemption of Workers Compensation and/or Disability Benefits Insurance Coverage: **Form CE-200 found at [www.wcb.state.ny.us](http://www.wcb.state.ny.us)**

**ACORD forms are not an acceptable proof of Workers Compensation or Disability Insurance Coverage**

- 7) Fee as per fee schedule (Collected when application is approved)

## TOWN OF MOREAU ACCESSORY STRUCTURE APPLICATION

<b>Location Information</b>	
Job Site Address _____	Tax Map ID# _____
Total Cost of Work \$ _____	Zoning District _____
<b>Property Owner Information</b>	
Owner's Name (print) _____	Phone # _____
Address _____	Email _____
_____	_____
Owner's Signature _____	Date _____
<b>Agent, Architect, or contractor information (if applicable)</b>	
Applicant (print) _____	Phone # _____
Address _____	Email _____
_____	_____
Signature _____	Date _____
<b>Person responsible for code compliance:</b> _____	
Name (Print)	

### Proposed Construction

Please complete all items that apply			
Structure	1 <sup>st</sup> Floor Sq. Ft.	2 <sup>nd</sup> Floor Sq. Ft.	Total Sq. Ft.
Detached Garage			
Pole Barn			
Gazebo			
Shed			
Carport			
Roof			
Other _____			

Size of structure: \_\_\_\_\_ x \_\_\_\_\_  
 Size of Property: \_\_\_\_\_ x \_\_\_\_\_  
 Setbacks:                      Corner Lot:  
             Front \_\_\_\_\_              Yes \_\_\_\_\_  
             Back \_\_\_\_\_              No \_\_\_\_\_  
             Sides \_\_\_\_\_              \_\_\_\_\_  
 Type of Construction: \_\_\_\_\_  
 Heated \_\_\_\_\_      Unheated \_\_\_\_\_

I affirm that, the information I've given on this application is correct and complete and I understand that the Town will rely on this information in making its decision.

Applicant Name (print): \_\_\_\_\_                      Applicant Name (signed): \_\_\_\_\_

**Official Use Only**

Received: \_\_\_\_\_      Issued on: \_\_\_\_\_      Permit #: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_      Expires on: \_\_\_\_\_

Building Inspector: \_\_\_\_\_      Date Approved: \_\_\_\_\_

## **REQUIRED INSPECTIONS: 24 HOUR NOTICE REQUIRED**

\*\*\*\* Please do **NOT** leave requests for inspections on voicemail.  
Inspections requested via voicemail may not be scheduled. \*\*\*\*

- Site Inspection
- Footings (before pouring concrete)
- Foundation Walls (before pouring concrete)
- Slab (before pouring concrete)
- Damp proofing (before backfill)
- Framing (before closing walls in)
- Fire Caulking (before insulation)
- Ice/Water Shield
- Plumbing and HVAC
- Electrical Inspections (done by a third party electrical inspector)
  - Rough and final
- Fuel Burning Appliances
- Insulation
- Septic System (before covering any work completed)
- Final Inspection (All required work must be complete before a Certificate of Occupancy/Compliance can be issued)

**No building is to be occupied without the approval of the Building Inspector**