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PUTNAM COUNTY HOME IMPROVEMENT CONTRACTOR REGISTRATION INSTRUCTIONS

*Any application submitted without all the requested information and documentation will be returned and considered invalid

Checklist for RENEWAL APPLICANTS:

Include a <u>CERTIFICATE OF LIABILITY INSURANCE</u> (Must be an ACORD form)
Requirements:

- Certificate Holder MUST be Putnam County Consumer Affairs, 110 Old Route 6, Bldg. 3, Carmel, NY 10512
- Additional Insured MUST be Putnam County Consumer Affairs
- □ Scope of work MUST be included in the description of operations or application will be returned.

Include WORKERS COMPENSATION FORM (C105.2 or U26.3) or EXEMPTION FORM (CE-200) Requirements:

- Certificate Holder MUST be Putnam County Consumer Affairs
- *NOTE: If Workers Compensation is not required, you MUST fill out a Workers Compensation Waiver online (Form CE-200) at www.wcb.ny.gov

Include LICENSE & PERMIT BOND -or - BOND CONTINUATION CERTIFICATE IN THE AMOUNT OF \$25,000.00 Requirements:

- Bond MUST be for **2-year** period. Registration expiration date will correspond with the term of the bond.
- The obligee MUST be Putnam County Dept. of Consumer Affairs
- Bond MUST be signed by the principal IF NEW BOND ONLY

Complete the attached CHILD SUPPORT FORM

*NOTE: Not required if your business is a corporation *NOTE: Cannot accept Tax ID- OR -ITIN card in lieu of Social Security Number

Complete the Scope of Work check list attached. (all work checked must be listed on certificate of liability)

Include current copies of VEHICLE REGISTRATIONS that are used in the performance of your occupation as a Home Improvement Contractor (note: cannot accept window registration stickers)

Include copy of VALID PHOTO DRIVER'S LICENSE FROM THE STATE IN WHICH YOU RESIDE and proof of current home street address, IF DIFFERENT FROM THE ADDRESS ON THE DRIVER'S LICENSE.

Include the **<u>REGISTRATION FEE</u>** in the form of a check or money order in the amount of \$**300.00** made payable to Putnam County Commissioner of Finance - this payment covers your two-year registration. Decals are included with renewal application. Request for additional decals or replacements after renewal application is processed is \$5.00 per decal.

NOTE: If your application is submitted after registration expiration date, you MUST include a late fee. (see website at www.putnamcountyny.com/consumer-affairs for fee schedule)

Include copies of CURRENT HOME IMPROVEMENT LICENSES - if held in other municipalities

(i) Questions? Please call or email our office

THANK YOU for your compliance of Putnam County Home Improvement Law

AM COUNTY	Office 110 Ol Carmel (845) 8	TY OF PUTNAM of Consumer Affairs d Route 6 Bldg. 3 , NY 10512 08-1617 ww.putnamcountyny.cc		Account # Fee Amount: □ Check □ CC Child Support: C of L: Bond Exp	C □ M.O. #: _ □ N/A □ Y W	C USE ONLY Bill# No. of Decals: Driver's License □ Y V/C: End Date:	□ N
	APPLICATION	FOR REGISTRAT	FION AS A HOME	IMPROVEMENT			
	*/	Answers to ALL que	stions must be printe	ed or typed, accurate	and complete		
<u>Application Type</u> : Business Type:	Renewal Individual	ChangePartnership	 Reinstatement Corporation 	LLC	PC Number		
Business Informati		r					
				Fax:			
				_ E-mail (requi	red):		
List all employ	yees (includi	ng partners):					
Applicant Informa							
Home Address:							
						President DPartner	
Where should we may	-			HOME ADDRESS			
-		n indicate <u>any</u> chang		ication? □ YES □	JNO		
<u>NOTE</u> : If business a	ddress has chang	ed, please provide B	Business Certificate o	r Corporate Receipt	indicating char	ıge	
application?	□ YES □ NO	nts or pending judge	ements, please give d			rporate officer since the la s, for pending give details DISPOSITION:	
application?	\Box YES \Box NO	ctions, please give de		position papers, for p		or corporate officer since tails: DISPOSITION:	the last
Improvement Vi	al, partner or cor olation? □ YES blease explain:		ad a professional or	vocational license sus	spended or revo	oked, or have been issued	a Home
applicant will com on this application to be delayed, den the Fee and Civil I PENALTY FOR FAI Application must	apply with the rule is true and acc ied, suspended Penalty Schedul LSIFICATION: F be signed by t	es and regulations urate and understau or revoked. I also a le listed on the Put alsification of any he highest-rankin	of the Putnam Cound that any incomp acknowledge that I nam County websi statement made he	inty Office of Com- blete, inaccurate, or have read and agra- te at <u>www.putname</u> ere in is an offense usiness/company in	sumer Affairs false informate ee to the terms <u>countyny.com</u> punishable by requesting re	a fine and/or imprison	mation istration w and
SIGNATURE OF APPI	LICANT:			DATE:			

Print 1	NAME:
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NOTE: ANY SCOPE OF WORK CHECKED BELOW MUST BE INDICATED ON YOUR CERTIFICATE OF LIABILITY INSURANCE FORM OR APPLICATION WILL BE <u>RETURNED</u>

This company engages in the following: (check <u>all</u> that apply).

***** Must be listed on the certificate of liability*****

- _____ Arboriculture
- Asphalt or blacktop or driveway sealing
- _____ Air duct cleaning
- _____ Antennas or satellite dishes
- _____ Awnings or siding
- _____ Central vacuum cleaning systems
- _____ Chimney cleaning, installation, and repairs
- _____ Carpet/Floor Cleaning
- _____ Drywall and taping
- Environmental reclamation
- _____ Excavation
- _____ Fencing
- _____ Flooring and wall-to-wall carpeting
- Garages and garage doors
- General Carpentry/Construction (excludes roofing)
- General Carpentry/Construction (includes roofing)
- _____ Gutters and leaders
- _____ Insulation
- _____ Kitchen & Bath Remodeling
 - Landscaping and gardening
 - Lawn mowing/ground maintenance/leaf blowing
- _____ Masonry
- Painting and wall coverings
 - ____ Porches, patios, terraces, decks, retaining walls, outdoor stonework
- Pressure washing
- ____ Roofing
- _____ Septic systems
- _____ Solar panels
- _____ Swimming pool maintenance
- _____ Swimming pool installation
- _____ Tiling
 - ____ Waterproofing
- _____ Window and door treatments
 - ____ Windows, doors, and skylights

Other (please specify): _____

Note: Do not submit this form. You must consult and obtain your bond from your insurance company.

LICENSE AND PERMIT BOND

That we,, Of the							
(Town/City – etc) of (Town/City Name), State of, as Principal and (Bond							
Company) a Corporation duly licensed to do business in the State of, as							
Surety, are held and firmly bound unto the <u>Putnam County Office of Consumer Affairs</u> , State of New							
York, Obligee,							
(VALID ONLY WHEN A COUNTY, CITY, TOWN OR VILLAGE IS NAMED AS OBLIGEE)							
in the Amount of Twenty-Five Thousand and no/100 (\$25,000.00) Dollars,							
(NOT VALID FOR MORE THAN \$25,000.00)							
Lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be							
made, we bind ourselves and our legal representatives, jointly and severally.							
THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has been							
licensed as a HOME IMPROVEMENT CONTRACTOR by the Obligee.							
NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws							
and ordinances (including all amendments), pertaining to the license or permit, then this obligation to be							
void, otherwise to remain in full force and effect for a period commencing on the day of							
, 20, and ending on the day of,							
20 unless renewed by continuation certificate.							
MUST RUN FOR THE ENTIRE TWO-YEAR TERM OF LICENSING							
This bond may be terminated at any time by the Surety upon sending notice in writing to the							
Obligee and to the Principal, In care of the Obligee or at such other address as the Surety deems							
reasonable, and at the expiration of thirty-five (35) days from the mailing of notice or as soon thereafter							
as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall be							
relieved from any subsequent acts or omissions of the Principal.							
Dated this day of, 20							
PRINT NAME							
Principal							
SIGNATURE							

Principal

Countersigned

By <u>AGENT SIGNATURE</u> Resident Agent

Ву_____

President

Division of Safety and Health License and Certificate Unit Harriman State Office Campus Building 12, Room 161A Albany NY 12240 (518) 457-2735

WE ARE YOUR DOL

 SIATE OF OPPORTUNITY. OPPORTUNITY. OF Labor

www.labor.ny.gov license&certifcate@labor.ny.gov

Appendix to a License/Certificate Application

The child support obligations (New York State General Obligations Law Title 5 section 3-503) do not apply to corporations.

Complete, sign and date this form if you are applying for a license/certificate or license/certificate renewal.

Applicant's Information							
Last name:		_ First name:	N	1iddle initial:			
So	cial Security number:						
The type of license/certificate requested:							
Business:		Title:					
Ce	rtification						
Are you under an obligation to pay child support? If yes, complete items 1 - 4.		🗌 Yes	🗌 No				
1.	I am making payments in accordance with a p	lan agreed upon by the parties.	🗌 Yes	🗌 No			
2.	I am four months or more behind in the payme	ent of child support.	🗌 Yes	🗌 No			
3.	My child support obligation is the subject of a	pending court proceeding.	🗌 Yes	🗌 No			
4.	I am receiving public assistance or supplemer	ntal security income.	🗌 Yes	🗌 No			

If you are four months or more behind in child support or have failed to comply with a summons, subpoena or warrant relating to a paternity or child support proceeding, you may be subject to suspension of your business, professional and/or driver licenses.

Affirmation

I acknowledge that giving false information is a crime and may result in this license/certificate being revoked.

Signature: ____

_____ Date:_____