



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

FENCE PERMIT APPLICATION REQUIREMENTS

Please keep this coversheet for your convenience

No construction activities may commence until an approved permit is issued

THE FOLLOWING INFORMATION MUST BE PROVIDED (ONE ORIGINAL AND ONE COPY):

- 1) A plot plan drawn to scale with the use of a survey, if available, indicating the following:
 - a. Locate fence and setbacks to all property lines
 - b. Fence construction material
 - c. Location of all existing structures on the property
- 2) 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**)
 - 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**

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

- 3) Must comply with Town of Moreau Code - Chapter 70 Fences

Additional information may be required by the reviewing inspector if deemed necessary.

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 with proposed layout of fence
- Final Inspection (All required work must be complete)
 - Must be completed before a Certificate of Occupancy/Compliance can be issued

TOWN OF MOREAU FENCE PERMIT APPLICATION

Location Information

Job Site Address _____ Tax Map ID _____

Total Cost of Work \$ _____ Zoning District _____

Type of Fence _____ Height _____

Corner Lot Yes _____ No _____ (There are two fronts and two side setbacks for a corner lot)

Setbacks from property lines: Front _____ Back _____ Sides _____

Owner Information

Owner's Name (print) _____ Phone # _____

Address _____ Email _____

Owner's Signature _____ Date _____

CONTRACTOR INFORMATION (if applicable)

Applicant (print) _____ Phone # _____

Address _____ Email _____

Signature _____ Date _____



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: \$25.00 Expires on: _____

Building
Inspector: _____ Date Approved: _____