



**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 **CERTIFICATE OF LIABILITY INSURANCE** (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 **REGISTRATION FEE** 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 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

❗ Questions? Please call or email our office



COUNTY OF PUTNAM
 Office of Consumer Affairs
 110 Old Route 6 Bldg. 3
 Carmel, NY 10512
 (845) 808-1617
<http://www.putnamcountyny.com/consumer-affairs/>

FOR OFFICE USE ONLY	
Account # _____	Bill# _____
Fee Amount: _____	No. of Decals: _____
<input type="checkbox"/> Check <input type="checkbox"/> CC <input type="checkbox"/> M.O. #: _____	
Child Support: <input type="checkbox"/> N/A <input type="checkbox"/> Y Driver's License <input type="checkbox"/> Y <input type="checkbox"/> N	
C of L: _____	W/C: _____
Bond Exp. _____	End Date: _____
Notes: _____	

APPLICATION FOR REGISTRATION AS A HOME IMPROVEMENT CONTRACTOR

**Answers to ALL questions must be printed or typed, accurate and complete*

Application Type: Renewal Change Reinstatement PC Number _____
Business Type: Individual Partnership Corporation LLC

Business Information

Business Name _____
 Business Address: _____ Business Phone: _____
 _____ Fax: _____
 _____ **E-mail (required):** _____

List all employees (including partners):

Applicant Information

Name: _____ Home Phone: _____
 Home Address: _____ Cell Phone: _____
 _____ E-mail: _____
 _____ Position: Owner President Partner

Where should we mail correspondence? BUSINESS ADDRESS HOME ADDRESS

1. Does any of the above information indicate any changes since the last application? YES NO
 If so, list changes: _____

NOTE: If business address has changed, please provide Business Certificate or Corporate Receipt indicating change

2. Have there been any unsatisfied judgments or pending judgments against any individual, partner and/or corporate officer since the last application? YES NO
 If there have been unsatisfied judgments, please give details and provide disposition papers, for pending give details:
DATE: COURT: JUDGMENT CREDITOR: DISPOSITION:

3. Have there been any criminal convictions or pending criminal convictions against any individual, partner and/or corporate officer since the last application? YES NO
 If there have been criminal convictions, please give details and provide disposition papers, for pending give details:
DATE: COURT: CHARGES: DISPOSITION:

4. Has any individual, partner or corporate officer ever had a professional or vocational license suspended or revoked, or have been issued a Home Improvement Violation? YES NO
 If so, please explain:

In consideration of being granted a registration to conduct a home improvement business in Putnam County, it is agreed that the applicant will comply with the rules and regulations of the Putnam County Office of Consumer Affairs. I certify that the information on this application is true and accurate and understand that any incomplete, inaccurate, or false information may cause the registration to be delayed, denied, suspended or revoked. I also acknowledge that I have read and agree to the terms of the Contractor's Law and the Fee and Civil Penalty Schedule listed on the Putnam County website at www.putnamcountyny.com/consumer/affairs.

PENALTY FOR FALSIFICATION: Falsification of any statement made here in is an offense punishable by a fine and/or imprisonment. **Application must be signed by the highest ranking official of the business/company requesting registration.**

SIGNATURE OF APPLICANT: _____ DATE: _____

PRINT NAME: _____

NOTE: ANY SCOPE OF WORK CHECKED BELOW MUST BE INDICATED ON YOUR CERTIFICATE OF LIABILITY INSURANCE FORM OR APPLICATION WILL BE RETURNED

This company engages in the following: (check **all** that apply).

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

- _____ Arboriculture
- _____ Asphalt or blacktop or driveway sealing
- _____ Landscaping and gardening
- _____ Lawn mowing/ground maintenance/leaf blowing
- _____ Swimming pools
- _____ Air duct cleaning
- _____ Antennas or satellite dishes
- _____ Awnings or siding
- _____ Central vacuum cleaning systems
- _____ Chimney cleaning, installation, and repairs
- _____ 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
- _____ Masonry
- _____ Painting and wall coverings
- _____ Porches, patios, terraces, decks, retaining walls, outdoor stonework
- _____ Pressure washing
- _____ Roofing
- _____ Septic systems
- _____ Solar panels
- _____ 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, _____ (John Doe – dba, Inc., LLC. etc...) _____, 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 Putnam County Office of Consumer Affairs, 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 _____
AGENT SIGNATURE
Resident Agent

By _____
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



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: _____ Middle initial: _____

Social Security number: _____

The type of license/certificate requested: _____

Business: _____ Title: _____

Certification

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 plan agreed upon by the parties. Yes No

2. I am four months or more behind in the payment 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 supplemental 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: _____