

New York State and the Town of Greenport Insurance Requirements

1. **Liability Insurance:** ACCORD
 2. **Workers Compensation Insurance:** Forms CE-200, C105.2, SI-12 or GIS-105.2
 3. **Disability Insurance:** Forms CE-200, DB120.1 or DB-155
- There are certain exemption forms available if the applicant qualifies. See second page.
 - All proofs of insurance should have the **Town of Greenport** listed as the **Certificate Holder**.
 - Please note that **ACCORD** forms are **NOT** acceptable proof of New York State **Workers' Compensation** or **Disability Benefits** insurance coverage. **ACCORD** forms are acceptable for proof of **Liability Insurance** coverage **ONLY**.

§57 of the New York State Workers' Compensation Law (WCL) requires that State and municipal entities prior to entering into a contract must ensure that the contractor applying for that contract has appropriate New York State Workers Compensation Insurance coverage.

§220(8) of the New York State Workers' Compensation Law (WCL) requires that State and municipal entities prior to entering into a contract must ensure that the contractor applying for that contract has appropriate New York State Disability Benefits Insurance coverage.

NOTE: Insurance forms can be sent via email, any shipping carrier service, hand-delivered or faxed to our office. The insurance should include the building permit number or the address of the project where the work is taking place. Otherwise we will not know what the insurance is for and it will not be filed with your application.

Workers' Compensation Requirements under Workers' Compensation Law §57

To comply with coverage provisions of the Workers' Compensation Law ("WCL"), businesses must:

- A. Be legally exempt from obtaining Workers' Compensation insurance coverage; or
- B. Obtain such coverage from insurance carriers; or
- C. Be a Board-approved self-insured employer or participate in an authorized group self-insurance plan.

To assist State and municipal entities in enforcing WCL §57, businesses requesting permits or seeking to enter into contracts MUST provide ONE of the following forms to the government entity issuing the permit or entering into a contract:

- A. **CE-200** – Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage;
[Form CE-200 can be filled out on the Board's website, www.wcb.ny.gov, under the heading "Forms." Applicants filing electronically are able to print a finished Form CE-200 upon completion. Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the Customer Service Center at any District Office of the Workers' Compensation Board. Applicants using the manual process may wait up to four weeks before receiving a CE-200. Once the applicant receives the CE-200, the applicant can then submit that CE-200 to the government agency from which he/she is getting the permit, license or contract.] **OR**
- B. **C-105.2** – Certificate of Workers' Compensation Insurance (the business's insurance carrier will send this form to the government entity upon request) PLEASE NOTE: The State Insurance Fund provided its own version of this form, the U-26.3; **OR**
- C. **SI-12** – Certificate of Workers' Compensation Self-Insurance (the business calls the Board's Self-Insurance Office at 518-402-0247) **OR** **GSI-105.2** – Certificate of Participation in Workers' Compensation Group Self-Insurance (The businesses Self-Insurance Administrator will send this form to the government entity upon request).

Disability Benefits Requirements under Workers' Compensation Law §220(8)

To comply with coverage provisions of the WCL regarding disability benefits, businesses may:

- A. Be legally exempt from obtaining disability benefits insurance coverage; or
- B. Obtain such coverage from insurance carriers; or
- C. Be a Board-approved self-insured employer.

Accordingly, to assist State and municipal entities in enforcing WCL Section 220(8), businesses requesting permits or seeking to enter into contracts **MUST** provide **ONE** of the following forms to the entity issuing the permit or entering into a contract:

- A. **CE-200** – Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage; **OR**
- B. **DB-120.1** – Certificate of Disability Benefits Insurance (the business's insurance carrier will send this form to the government entity upon request); **OR**
- C. **DB-155** – Certificate of Disability Benefits Self-Insurance (the business calls the Board's Self-Insurance Office).

Please Note: For Building Permits certain homeowners of 1, 2, 3 or 4 family owner-occupied residences serving as their own General Contractor may be eligible to file Form BP-1 (The homeowner obtains this form from either the Building Dept. or on the Board's website, www.wcb.ny.gov, under the heading "Forms.")