



Permit No. \_\_\_\_\_

**2024-2025 Application for Snow Plow Permit**

**Fee: \$35.00**

Date \_\_\_\_\_

1. Owner's Name \_\_\_\_\_

2. Home Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

3. Business Address \_\_\_\_\_ Bus. Phone \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

4. Year and make of vehicle \_\_\_\_\_

5. VIN # \_\_\_\_\_ Plate # \_\_\_\_\_

8. Has any owner, partner, proprietor, officer, employee or agent been convicted for violation of any law, ordinance, rule or resolution occurring in connection with snow plowing or snow removal?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain: \_\_\_\_\_

9. Would you like to have your business listed on the village website? Yes \_\_\_\_\_ No \_\_\_\_\_

10. \* Listing of addresses to be plowed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\* If you add customers throughout the season, please email updates to [bmagney@villagehamburg.com](mailto:bmagney@villagehamburg.com)

**The following MUST be included in order to process your Snow Plow Permit:**

\_\_\_\_\_ Completed Application

\_\_\_\_\_ \$35.00 Permit Fee

\_\_\_\_\_ Listing of Addresses to be plowed

\_\_\_\_\_ Proof of Worker's Compensation Coverage (form C-105.2 or New York State Ins. Fund form U-26.3) **OR** Certificate of Workers' Compensation Self-Insurance (form GSI-105.2) \*\*

\_\_\_\_\_ Proof of Disability Insurance (form DB-120.1) **OR** (form DB-820/829) **OR** (form DB-155) \*\*

\_\_\_\_\_ If exempt from Comp or Disability coverage, you must file for and provide to the village, a CE- 200 Exemption Attestation Certificate. Go to [www.businessexpress.ny.gov](http://www.businessexpress.ny.gov) to file online or make a written request to NYS WCB, Ellicott Square Building, 295 Main Street, Suite 400, Buffalo 14203. You must include a copy of the certificate with this application

**\*\* (ACORD FORMS ARE NOT ACCEPTABLE PROOF OF WORKER'S COMP OR DISABILITY)**

Approved: \_\_\_\_\_

Village Administrator

Date: \_\_\_\_\_

# VILLAGE OF HAMBURG

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THOMAS P. TALLMAN

**TRUSTEES**  
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LAURA PALISANO HACKATHORN  
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**ADMINISTRATOR/CLERK-TREASURER**  
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**RECREATION SUPERVISOR**  
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**FIRE CHIEF**  
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## Memorandum

**FROM:** Jason T. Cozza, Village Administrator  
**TO:** Snow Plow Operators  
**RE:** INSURANCE REQUIREMENTS FOR COMPANIES WITH NO EMPLOYEES  
Filing CE-200  
**DATE:** October 1, 2024

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### CE-200 FORM FOR SNOW PLOW OPERATORS WITHOUT EMPLOYEES

In accordance with the Worker's Compensation Board, only applicants eligible for exemptions must file a new CE-200 for each new or renewed permit issued by the Village of Hamburg. The applicant must apply for the form either electronically or by writing or visiting the Workers' Compensation Board district office. The Village of Hamburg cannot issue copies for you.

#### ELECTRONICALLY

Form CE-200 can be filled out electronically on the Board's website, [www.wcb.state.ny.us](http://www.wcb.state.ny.us), on the far right hand side under *Form CE-200*. Applicants filing electronically should print out the finished CE-200 and submit a copy to the Village of Hamburg when applying for a permit.

#### PAPER APPLICATION

Applicants without access to a computer may obtain a paper application for the CE-200 by writing or visiting the Customer Service Center at the Buffalo District Office of the Worker's Compensation Board: NYS WCB, Ellicott Square Building, 295 Main Street, Suite 400, Buffalo, NY 14203, Telephone (866) 211-0645. A copy of this form should be submitted to the Village of Hamburg when applying for a permit.

A Snow Plow Permit will not be issued until this CE-200 is received in our office. In order to make it easier, when you apply for a permit you can pay for it at that time and as soon as you either mail or fax in a copy of this form, the permit will be mailed to you.