

VILLAGE OF MILLERTON

Building Department 21 DUTCHESS AVENUE PO BOX 528 MILLERTON, NY 12546 PHONE 518-789-4489 FAX 518-789-6764 E-MAIL clerk@VillageofMillerton.com

APPLICATION FOR CERTIFICATE OF OCCUPANCY/COMPLIANCE/ USE

IDENTIFICATION OF APPLICANT:

APPLICANT NAME: _____ PHONE: ______ MAILING ADDRESS: ______ OWNER OF RECORD: ______ (If other than applicant)

IDENTIFICATION OF PROPERTY:

TAX MAP GRID NUMBER:_____

LOCATION (ADDRESS):

COMPLETED PROJECT (Description)_____

BUILDING/DEMOLITION/MERCHANICAL PERMIT NO.

APPLICATION IS HEREBY MADE TO THE OFFICE OF THE BUILDING INSPECTOR PURSUANT TO THE N.Y.S. UNIFORM FIRE PREVENTION & BUILDING CODE & THE CODE OF THE VILLAGE OF MILLERTON AS ADOPTED BY THE VILLAGE BOARD. THE APPLICAT / OWNER AGREES TO COMPLY WITH ALL APPLICABLE LAWS, ORDINANCES & REGULATIONS.

SIGNATURE OF APPLICNT / OWNER: ______DATE: _____DATE: _____

PLEASE FILL OUT, SIGN, AND NOTARIZE THE AFFIDAVIT ON THE BACK OF THIS FORM

AFFIDAVIT OF COMPLETION OF CONSTRUCTION TO BE FILLED OUT UPON COMPLETION OF THE PROJECT

STATE OF NEW YORK COUNTY OF DUTCHESS

_____, BEING DULY SWORN, DEPOSES AND SAYS: THAT HE / SHE

Applicant or Owner (please print)

IS THE APPLICANT OR OWNER NAMED IN THE APPLICATION FOR BUILDING/ MECHANICAL PERMIT NO. ______ DATED ______ RELATING TO CONDTRUCTION OR OTHER WORK TO BE PERFORMED ON, OR IN CONNECTION WITH, THE PREMISES LOCATED AS INDICATED ON THE APPLICATION;

APPLICANT / OWNER STATES THAT HE / SHE HAS EXAMINED THE APPROVED PLANS ANS THAT TO THE BEST OF HIS / HER KNOWLEDGE AND BELIEF, THE STRUCTURE HAS BEEN ERECTED IN ACCORDANCE THEREWITH AND IN ACCORDANCE WITH THE APPLICABLE PROVISION OF THE LAW.

SIGNATURE OF APPLICANT / OWNER

SWORN TO ME

THIS ______ DAY OF ______ 20_____

NOTARY PUBLIC