



INCORPORATED VILLAGE OF OCEAN BEACH

P.O. BOX 457, OCEAN BEACH, NEW YORK 11770-0457
TEL: (631) 583-5940 FAX: (631) 583-7597

**APPLICATION FOR CERTIFICATE OF OCCUPANCY/CONTINUED USE
AND/OR CERTIFICATE OF COMPLETION
FEE: RESIDENTIAL & COMMERCIAL \$300.00**

Tax Parcel Number:	Section:	Block:	Lot:
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Having complied with the provisions of the Code of Ordinance of the Inc. Village of Ocean Beach with respect to the filing of any necessary plans and specifications, I hereby apply for a Certificate of Occupancy as required in the Code of Ordinance of the Inc. Village of Ocean Beach and the New York State Fire Prevention and Building Code to apply to the following described premises:

Located at _____
(Address)

The dimensions, shape and location of the existing and proposed buildings or structures with their extensions and projections thereon are as shown on the plans, drawn to scale, submitted herewith and made a part of this application.

If to be used for manufacturing or business purposes, state exact nature thereof. If to be used for residential purposes, state the number of families. In either case, give full particulars respecting each building or structures. If only part of the premises is to be used and the Certificate is desired for only that part, state exactly what is desired.

It is proposed to occupy or use the premises, buildings or structures or parts thereof for the following purposes: _____

The buildings or structures now on the lot are used for the following purposes: _____

The heights of the main and accessory buildings or structures are as follows: _____

The premises, which are subject to this application, are owned by: _____

Name and Address of individual to whom this certificate is to be issued:

I will contact the Inspector to schedule this inspection YES _____ **NO** _____

Inspector please contact _____ **at** _____ **to schedule inspection.**

I hereby certify that the above statements and data are correct and true to the best of my knowledge and belief.

Signed: _____ **Date:** _____

FOR OFFICE USE ONLY

Date: _____ **Fee Paid:** _____ **CR#** _____