



Incorporated Village of Westhampton Beach
DEPARTMENT OF BUILDING AND ZONING
165 Mill Road, Westhampton Beach, New York 11978
(631) 288-3478 – Fax (631) 288-4332



OCCUPANCY / USE PERMIT APPLICATION
NO ALTERATIONS TO BUILDING & NO CHANGE OF OCCUPANCY CLASSIFICATION

This worksheet is presented as a guide for preparation of a complete occupancy / use permit application.
Please include all of the documents and items required for the proposed occupancy / use.
Additional information is available at the Village website at www.westhamptonbeach.org

Application Requirements:

1.	Occupancy / Use Permit Application	Page 2; Detailed project description must include previous use of space. Example: First floor office space for John Q Financial Advisor, was previously Attorney's Office (office to office)	Y / N
2.	Owner's Authorization	Page 3; Property / Building Owner (not the lessee / business proprietor)	Y / N
3.	Floor plans (2 copies)	Floor Plans drawn to scale, describing rooms and detailing the fixtures for the building / space	Y / N
4.	Current Survey (2 copies)	One survey of the property, with the subject space / unit identified	Y / N
5.	Business Registration	Page 4; Fire Marshal requires contact and business information for all commercial properties in accordance with NYS Law	Y / N
6.	Fee	Flat \$150; Associated Signage & Building Permit fees not included	Y / N

**THIS PERMIT APPLICATION IS NOT A CERTIFICATE OF
OCCUPANCY / COMPLIANCE**

Space shall not be used or occupied until inspections from the Building Inspector and /or Fire Marshal have been satisfactorily performed and a Certificate of Compliance for the use has been issued to you

******* If Any Alterations are Found to Have Been Performed to This Space / Unit / Structure, A Separate Building Permit Application and Fee Will Be Required. *******



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OCCUPANCY / USE PERMIT APPLICATION



PART I: Location Information – Please print below

Property Location: _____ SCTM# 905-_____-_____-_____

Unit / Suite (if applicable): _____

Previous Occupancy / Use: _____

PART II: Property Owner Information – Please print below

Owner(s) of Record : _____

Phone: _____ Email: _____

Mailing Address of Owner(s): _____

City State Zip Code

PART III: Operator Information (Party responsible for occupancy / use / business) – Please print below

Name: _____

Phone: _____ Email: _____

Mailing Address: _____

City State Zip Code

PART IV: Proposed Occupancy / Use Details – Please print below

Proposed occupancy / use / business description: _____

Proposed Name of Business: _____

Proposed Signage: ____ Yes ____ No If yes, separate sign permit(s) & associated fees will be required

Proposed Alterations for Occupancy: ____ Yes ____ No If yes, separate building permit & associated fees will be required

PART V: Notary Public – Please type or print below

APPLICATION IS HEREBY MADE FOR ISSUANCE OF A OCCUPANCY / USE PERMIT pursuant to the Code of the Village of Westhampton Beach and the Building Code of the State of New York, and all amendments thereto, for the work as described herein

STATE OF NEW YORK, COUNTY OF SUFFOLK) ss: (Print Name of Applicant) _____
being duly sworn deposes and says that he/she is the applicant above named.

He/She is the (Owner or Agent: Contractor, Officer, RA, PE, etc) _____ of said owner or owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief; and that the work will be performed in the manner set forth in this application, plans and specifications filed herewith.

Sworn to before me this _____ day
of _____, 20_____

Applicant Signature

Notary Public



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OWNER'S AUTHORIZATION

STATE OF _____)
) ss.:
COUNTY OF _____)

I, (owner) _____

Residing at: _____

Being the owner of premises (Property Location) _____

Also known as Suffolk County Tax Map Number (SCTM #:) _____

Hereby authorize (Agent) _____

Whose mailing address is (Agent Address) _____

To act on my behalf for purposes of application and interfacing with the Building Department for (Description of Proposed Work)

Of the Village of Westhampton Beach, and to received and/or file any documents required with reference to my application for
(Owner) _____

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by this Board as a condition of their approval.

Owner Signature

Sworn to before me this _____ day
of _____, 20____

Notary Public



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CERTIFICATE OF BUSINESS REGISTRATION

Tax Map # 905 -- _____ -- _____ -- _____

Type of Business: _____

Business/DBA Name: _____

Physical Location: _____, Westhampton Beach

Business Number: _____ Email: _____

Emergency Number: _____ Alternate Emergency Number: _____

Description of activities: _____

Hazardous Materials at Location: _____

Business Owner: _____

Mailing Address: _____
City State Zip Code

Phone: _____ Email Address: _____

Person/Agent in Charge of Premises: _____

Mailing Address of Agent: _____
City State Zip Code

Phone: _____ Email Address: _____

Property Owner(s): _____

Mailing Address of Owner: _____
City State Zip Code

Phone: _____ Email Address: _____

Any false statement made herein is punishable as a misdemeanor pursuant to §201.45 NYS Penal Law.

Signature of registrant: _____ Date: _____

Printed Name: _____

For office use		Date Received		
Alarm	☐ Y ☐ N	Operating Permit	☐ Y ☐ N	Construction Type _____
Sprinkler	☐ Y ☐ N	Hazardous Storage	☐ Y ☐ N	Occupancy _____
H & D	☐ Y ☐ N	Multifamily	☐ Y ☐ N	Other _____
Key Box	☐ Y ☐ N	Assembly	☐ Y ☐ N	Posted Assembly Occupancy # _____