



Operating Permit Application

FOR OFFICE USE ONLY

Application Number: _____

OFFICE USE ONLY

SECTION _____ BLOCK _____ LOT _____

APPLICANT/BUILDING INFORMATION

Applicant's Name: _____

Applicant's Address: _____

Contact Person: _____

Other (specify): _____ Telephone: _____

Current Occupancy Class: _____

TYPE OF OPERATING PERMIT

An Operating Permit is required to conduct any activity or to use and class of building listed below.

Please indicate the type(s) of Operating Permit(s) requested by checking each applicable box. (If you require assistance, or would like more information, contact the Village of Patchogue Building Department at 631-475-4300.)

____ Manufacturing, storing or handling hazardous materials in quantities exceeding those listed in Tables 2703.1.1(1), 2703.1.1(2), 2703.1.1(3), or 2703.1.1(4), of the Fire Code of New York State (see 19 NYCRR Part 1225); **(See Appendix A.)** Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled (attach additional sheets if necessary):

____ Conducting a hazardous process or activity (Including but not limited to, any commercial or industrial operations which produces combustible dust as a byproduct, fruit or crop ripening, and waste handling; **(See Appendix B.)** Describe the process(es) or activity(ies) to be conducted (attach additional sheets if necessary):

____ Use of pyrotechnic devices in assembly occupancies; **(See Appendix C.)** Describe the proposed use (attach additional sheets if necessary):



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TYPE OF OPERATING PERMIT (CONT.)

____ Use of a building containing one or more areas of public assembly with an occupant load of 100 persons or more **(See Appendix D.)** Describe the proposed use (attach additional sheets if necessary):

____ Use of a building whose use or occupancy classification has been determined by [Name of Authority Having Jurisdiction] as posing as substantial potential hazard to public safety, **(See Appendix E.)** Describe proposed use (attach additional sheets if necessary):

PREMISES/BUILDING INFORMATION

1. Date of last Inspection of the Premises: _____
2. Has a Certificate of Occupancy been issued for the premises? ____ Yes ____ No
Type: Permanent ____ Temporary ____ Date of Issuance: _____
3. Date(s) of issuance of previous Certificate(s) of Occupancy (if any): _____
4. Has a Certificate of Compliance been issued for these Premises? ____ Yes ____ No
Type: Permanent ____ Temporary ____ Date of Issuance: _____
5. Are there currently any open Building Permits associated with the premises? ____ Yes ____ No
If yes, please describe (attach additional sheets if necessary): _____
6. Have any violations to the Uniform Code been issued in relation to the premises? ____ Yes ____ No
If yes, please describe (attach additional sheets if necessary): _____
7. Have any variances to the Uniform Fire Prevention and Building Code been granted in relation to the premises? ____ Yes ____ No
If yes, please describe (attach additional sheets if necessary): _____
8. Additional Comments: _____

Signature of Applicant

I hereby certify that the foregoing information (and all information in attached sheets, if any) is true and complete.

Signature of Applicant or Authorized Representative

Date

Name (and Title, if applicable of person signing application (Please Print)



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TO BE COMPLETED BY THE INCORPORATED VILLAGE OF PATCHOGUE

Inspection Required ☐ Yes ☐ No

Inspections Performed ☐ Yes ☐ No Date of Inspection: _____

Test or Reports required to verify compliance? ☐ Yes ☐ No

If yes, have Test or Reports been received? ☐ Yes ☐ No

Description: _____

Application(s) Approved ☐ Yes ☐ No

Operating Permit issued by: _____

Date Operating Permit Issued: _____

Date Operating Permit Expires: _____

Type/Description of Operating Permit: _____

Conditions of Operating Permit (list conditions here AND in the space provided in the Operating Permit):

Additional Comments:

