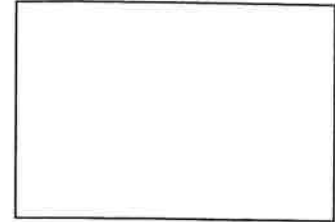




VILLAGE OF BELLPORT REQUEST FOR RESEARCH



Date Stamp

Property Address: _____

Town: _____ Village: _____

District: 0202 Section: _____ Block: _____ Lot: _____

Tax Class: _____

Property Owner: _____

Company Requesting Research: _____

____ Agent for Owner ____ Agent for Architect ____ Agent for Builder

Research Requested (check one):

____ Card File

____ Building Permits

____ Records

____ Violations

____ Certificate of Occupancy (CO)

____ Tax

Signature and Title: _____ Date: _____

Contact Phone: _____

For Office Use Only

Fee Paid: \$50 Check #: _____ Cash: _____ Credit: _____

Research Completed Date: _____

Researcher: _____

Applicant Contacted by: _____ Date: _____