Town Hall Annex
54375 Main Road
P.O. Box 1179
Southold, NY 11971-0959

Telephone (631) 765-1802

BUILDING DEPARTMENT
TOWN OF SOUTHOLD

RENTAL PERMIT APPLICATION INSTRUCTIONS

Effective September 27th 2023

Rental Permit Fee: $300 (*Application must be renewed every two years*)

The items listed below are required to be submitted with the completed application.

- **Floor plans:** Floor plans of each rental dwelling unit, please show location of all smoke & carbon monoxide detectors.

- **Certificates of Occupancy and Pre-Certificates of Occupancy:** Certificates of occupancy or Pre-Certificates of Occupancy for each rental dwelling unit.

- **Certification of Code Compliance (form enclosed):** Must be submitted by a license architect, engineer or license home inspector if an inspection by Town of Southold Inspector is declined.

- **Rental Permit Fee:** $300.00

TOWN OF SOUTHOLD – BUILDING DEPARTMENT

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RENTAL PERMIT APPLICATION

Rental Permit Fee $300 *(Application must be renewed every two years)*

Section A.
Property Information:

Rental Property Address:

_____

Tax Map Number: 1000 SECTION _____-BLOCK_____-LOT_____-_____

SECTION B.
OWNER INFORMATION:

Property Owner Name: _____

Property Owner Legal Address:
(Cannot be the same as Rental Property Address)

_____
_____
_____

Property Owner Mailing Address:

_____
_____
_____

Telephone Number (s): Daytime_____ Evening_____ Emergency_____

Property Owner Email Address: _____

Section C.
Authorized Agent Information:

Name of Authorized Agent of dwelling unit, if any: _____

Address of Authorized Agent (no P.O. Boxes):_____

Mailing Address of Authorized Agent: _____

Telephone Number (s): Daytime_____ Evening_____ Emergency_____

Email Address: _____

Section D.
Managing Agent Information:

Name of Authorized Agent of dwelling unit, if any: _____

Address of Authorized Agent (no P.O. Boxes):_____

Mailing Address of Authorized Agent: _____

Telephone Number (s): Daytime_____ Evening_____ Emergency_____

Email Address: _____

SECTION E.
SITE MANAGER INFORMATION: (required for rental properties containing 8 or more rental units)

Name of Managing Agent of dwelling unit, if any: _____

Address of Managing Agent (no P.O. Boxes):_____

Mailing Address of Managing Agent: _____

Telephone Number (s): Daytime_____ Evening_____ Emergency_____

Email Address: _____

SECTION F.
PROPERTY DESCRIPTION:

Number of Rental Dwelling Units on property: _____

For each Rental Dwelling Unit set forth the Rental Dwelling Unit identifier (for example, Unit 1, Unit 2, Unit 3 or Apt A, B, C); the use of each room in the Rental Dwelling Unit (for example, Kitchen, Bedroom 1, Bedroom 2, Living Room) and the dimensions of each room.

For properties with multiple Rental Dwelling Units use "Rental Permit Application Addendum."

Rental Dwelling Unit Identifier: _____

Requested Maximum number of persons allowed to occupy Dwelling Unit: _____

Number of rooms in Rental Dwelling Unit: _____

Use and Dimensions of each room in Rental Dwelling Unit: _____

_____

_____

_____

SECTION G.
INSPECTION:

Pursuant to the Town Code of the Town of Southold Chapter 207 (Rental Properties), a safety inspection by Code Enforcement Official is required. If the owner chooses not to have said inspection performed by the Town, a certification from a licensed architect, a licensed professional engineer or a home inspector who has a valid New York State Uniform Fire Prevention Building Code Certification is required stating that the property which is the subject of the rental permit application is in compliance with all of the provisions of the code of the Town of Southold, the laws and sanitary and housing regulations of the County of Suffolk and by the laws adopted by the New York State Fire Prevention and Building Code Council.

- ☐ I am requesting a fire safety inspection to be performed by a Code Enforcement Official from the Town of Southold
- ☐ I am submitting a completed Town of Southold certification form from a licensed architect or a licensed professional engineer.

SECTION H.

DECLARATION: *Signature must be notarized and MUST be the owner of the dwelling unit.*

STATE OF NEW YORK)
)
COUNTY OF SUFFOLK)

I _____, certify under penalty of perjury, the following:

1. I am the owner of the property identified in "Section A" of this application.
2. The property owner's legal address set forth in "Section B" of this application is my legal address and I understand the Town will use the address for service pursuant to all applicable laws and rules. I further acknowledge that I will notify the Town of Southold Building Department of any changes of address within five (5) days of any changes thereto.
3. I have read and received a copy of Chapter 207 of the Code of the Town of Southold and agreed to abide by the same.
4. I will notify the Town within five (5) business days s to any change to the information regarding Authorized Agent, Managing Agent, or Site Manager.

   Property Owner's Name: _____

   Property Owner's Signature: _____

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

_____
Official Notary Public Signature and Original Notary Stamp

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BUILDING DEPARTMENT
TOWN OF SOUTHOLD

RENTAL PERMIT APPLICATION ADDENDUM

Rental Dwelling Unit Identifier: _____
Requested maximum number of persons allowed to occupy each dwelling unit: _____
Number of Rooms in Rental Dwelling Unit: _____
Use and Dimension of each room:
_____
_____
_____
_____

Rental Dwelling Unit Identifier: _____
Requested maximum number of persons allowed to occupy each dwelling unit: _____
Number of Rooms in Rental Dwelling Unit: _____
Use and Dimension of each room:
_____
_____
_____
_____

Rental Dwelling Unit Identifier: _____
Requested maximum number of persons allowed to occupy each dwelling unit: _____
Number of Rooms in Rental Dwelling Unit: _____
Use and Dimension of each room:
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BUILDING DEPARTMENT
TOWN OF SOUTHOLD
RENTAL PROPERTY CERTIFICATION

Form is to be completed by a licensed architect, licensed engineer or licensed home inspector
Separate form is required for each individual Rental Dwelling Unit

Professional seal required for Architect or Engineer, Licensed Home Inspector must provide copy of valid current certification

Rental Property SCTM Number: _____

Rental Property Address: _____

Owner/Name: _____

Rental Dwelling Unit Identifier: _____

Number & Square footage of each bedroom as depicted in the attached floor plan:

(i.e. Bedroom #1 – 100 sqft., Bedroom #2 – 90 sqft., etc.)

_____
_____
_____

Property Description (Include all improvements indicated on survey)

_____
_____
_____

I certify that I have done a physical inspection of the subject rental dwelling unit and find that it fully complies with all the provisions of the Code of the Town of Southold, the Residential Code of New York State, the Building Code of New York State, the Plumbing Code of New York State, the Fuel Gas Code of New York State, the Fire Code of New York State, the Property Maintenance Code of New York State and the Energy Conservation Construction Code of New York State.

_____ _____

Print Name and Title Original Signature

Please place Professional Seal: