

APPLICATION FOR DEMOLITION PERMIT

TOWN OF HUNTINGTON, SUFFOLK COUNTY, N.Y.

Suffolk County Tax Map# 0400.00 Sec. _____ Blk. _____ Lot _____

ZBA# _____ Date Filed: _____ Zone: _____

Filed Map Name: _____

Filed Map Section _____ Block _____ Lot _____

Property Location: _____

Structure(s) to be demolished _____

Method of demolition (explain briefly) _____

How will you dispose of debris? _____

If excavation results, how do you intend to fill? _____

Have you advised all Public Utilities of this demolition? yes no

Is this structure(s) in a historical area? yes no

NOTE: A permit is good for one (1) year after the date of issuance. A building permit may be renewed by the Department of Engineering Services for two (2) one-year terms. The renewal fee for each renewal period shall be one-half (1/2) of the application fee paid for the original permit.

AFFIDAVIT OF PROPERTY OWNER

STATE OF NEW YORK
COUNTY OF SUFFOLK

SS:

Property in Name of (Individual or Corporation) Please Print

Deposes and says: That I reside at _____ Zip _____ Mailing Address of Owner

in the State of _____, that I am the owner in fee of all that certain lot, piece or parcel of land shown on the attached survey situate, lying and being within the unincorporated area of the Town of Huntington; (a) the proposed work will be faithfully carried out as described in the application and as shown on the accompanying plans and specifications and not otherwise: (b) all laws and regulations applicable to the premises and to the proposed work will be complied with, whether stated in the application and plans or not: (c) the statements contained in the application are true: (d) the premises will not be maintained, operated, occupied or utilized for any purpose other than as set forth in the application, plans and specifications: (e) the premises will not be maintained in violation of the zoning ordinance: and (f) that said representations are made with full knowledge that the Town of Huntington is relying on same in issuing a building permit.

Sworn to me this _____ day

Owner _____ Print Name

Of _____, 20 _____

Owner _____ Signature

Notary Public

Address _____ Zip _____

Owner Phone _____

No work is to be started until permit has been received

Email: _____

False statements made herein are punishable as a class "A" misdemeanor pursuant to section 210.45 of the penal law of New York State.

Forms 87-04 Rev 10/16

OFFICE USE ONLY

Application ID# _____

Receipt# _____ Date: _____

Fee \$ _____ C/O \$ _____

Total \$ _____

Application # _____

Permit# _____

Occupancy Code _____

Type of Construction _____

Occupancy Load _____

Required Fire Sprinkler System _____