



VILLAGE OF SAGAPONACK

PO Box 600
3175 Montauk Highway
Sagaponack, NY 11962
www.sagaponackvillage.org
631-537-0017 631-537-0612 (FAX)

REQUEST FOR PRE-EXISTING CERTIFICATE OF OCCUPANCY INSTRUCTIONS

In order to obtain a Pre-Existing Certificate of Occupancy for a building structure or use that existed prior to October 14, 1957, it is necessary to give the following information:

1. An original survey accurately depicting all buildings and structures on the property.
2. Sworn affidavits before a Notary Public of proof that the building(s) or structure(s) and the use(s) on the property existing prior to the enactment of zoning, which is October 14, 1957. Typical information submitted as proof of a pre-existing use are:
 - A. Affidavits by persons familiar with the property documenting continuous specific uses, buildings and structures on a property from prior to October 14, 1957 to present.
 - B. Copies of leases and other agreements documenting uses and structures at specific time periods.
 - C. Assessor records (available through a property search request).
 - D. Any other information which conclusively proves a continuous chain of pre-existing use.

NOTE: Pre-Existing certificate of occupancies are granted based on *conclusive* evidence of continuous use from prior to October 14, 1957 through the current date. Applications unable to provide adequate documentation will be rejected. An appeal may be filed to the Zoning Board of Appeals as provided for in §245-77.

3. A Certificate of Occupancy request for a nonconforming commercial use or multiple commercial use must be submitted with a floor plan drawn to 1/4" scale which accurately depicts the layout and areas of use throughout the building.
4. A sworn affidavit before a Notary Public stating that there are smoke alarms in the dwelling if applicable.
5. The attached application completed in ink or typed.
6. A check for \$250.00 (two hundred and fifty dollars) made payable to the Village of Sagaponack.
7. If you are not listed as an owner, a deed or bill of sale for the property must be submitted.



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This application must be completed before a request for a Pre-Existing Certificate of Occupancy can be considered. All pre-existing Certificate of Occupancies will be mailed to the homeowner so be sure that a correct mailing address is listed.

Application Date: _____ Application Number: _____

Property Address: _____ SCTM# 908- _____ - _____ - _____

1. **Name of Owner of Premises:** _____

Owner's Address: _____

Owner's Telephone Number: _____ Owner's Email Address: _____

Note: If this application is being made by someone other than the owner, the owner must sign the Authorization and Consent at the end of this form.

2. **Name of Agent (if applicable):** _____

Agent's Address: _____

Agent's Email Address: _____ Telephone Number: _____

3. **Name of Attorney for applicant:** _____

Attorney's Address: _____

Attorney's Email Address: _____ Telephone Number: _____

4. Corporate Officer/Partners Name (if applicable): _____

Corporate Officer/Partners Address: _____

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

Notary Public

Signature of Owner

If owner is a Corporation, indicate name of corporation and officer's title

Name of Corporation

Title of Officer



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AUTHORIZATION AND CONSENT

STATE OF NEW YORK)
COUNTY OF _____) ss:

_____ being duly sworn depose

and say:

1. The undersigned are the sole owners of premises at (address of premises):

2. The undersigned consent to entry and inspection of the above premises as needed by the Building Inspector/AHRB/ZBA/Planning Board.

3. The undersigned authorizes _____ whose contact information is _____ to appear on our behalf before the officials and agencies of the Village of Sagaponack.

Sworn to before this
___ day of _____, 20__

Print Name

Notary Public

Signature

Sworn to before this
___ day of _____, 20__

Print Name

Notary Public

Signature



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**AFFIDAVIT
REQUEST FOR PRE-EXISTING CERTIFICATE OF OCCUPANCY**

In the matter of the Application of

_____ For a Pre-Existing Certificate of Occupancy
(Name of Property Owner)

**STATE OF NEW YORK)
COUNTY OF _____) SS:**

I, _____, being duly sworn, deposes and says:
(Name of Person Filing Affidavit)

1. I reside at _____.

2. I am very familiar with the structures located on the _____ side of
(state north, south, east or west)
_____, New York, as shown on the survey of
(subject property address)
_____ dated _____
(name of surveyor)

(copy annexed hereto). I have known said land and structures since _____
(year you have knowledge of land and structures)
and have had discussions with neighboring property owners and prior owners of the subject premises concerning
the construction and use of these buildings. Other sources of my knowledge are as follows:

Deed of Property Dated: _____

Sworn affidavit from builder stating that he helped construct the home:

(name of builder and year of construction)

3. All of the structures shown on said survey were fully completed before October 14, 1957, and have remained in
their current state without expansion from said date, other than those under permit number(s) _____.
Said structures have been continuously used as _____
(ie: one-family dwelling, commercial building, barn, etc)
since prior to October 14, 1957.

4. I make this affidavit knowing full well that the Village of Sagaponack Building and Zoning
Division will rely upon the facts as stated herein to issue a pre-existing Certificate of
Occupancy for said structures to _____ for use as
(property owner)
_____.

DATED:
Before me, this _____ day of _____, 20____

Signature

Printed Name

Notary