INCORPORATED VILLAGE



OF PLANDOME HEIGHTS

Established 1929 37 ORCHARD STREET-MANHASSET, NY 11030

P.O. Box 1384, Manhasset, New York 11030 Tel. (516) 627-1136 -- Fax: (516) 627-1393 www.plandomeheights-ny.gov info@plandomeheights-ny.gov

APPLICATION FOR CERTIFICATE OF COMPLETION/OCCUPANCY

Applicant/Homeowner Name:				
Address:		Ph. #:		Cell #:
*****	*****	*****	*****	*****
I,, owner/agent for the property				ne property located at:
	Street Address	in the	e Incorporated Vill	age of Plandome Heights
	Street Address			
known as:	Section:	Block:	Lot(s)	,
	nit this application fo onstruction in conne	r a certificate of completion/oction with:	occupancy for the	building referred to above
BUILDING P	ERMIT NO:	DATED:		
AFFIDAVIT	OF FINAL COST	OF CONSTRUCTION: F	Final Cost: \$	
construction cos is subject to aud and should any	sts listed above, are acc dit by the Village for poo discrepancies be found	ding Code; and (b) that all the inferrate and have not been falsified of of construction costs, Certificate same will invalidate any Certificate	or altered in any way. of Completion/Occupa e of Completion/Occup	I understand that this application ancy from municipal agencies, etc, pancy so issued.
		day of		
GWOIII to boi	ore me on une	day or		
(Notary Public	c, County of)		
	FFICE USE ONL		******	***********
Final survey	dated:	Electrical Inspection Certificate:		
I have exami	ined this application	and hereby agree to issue a	a Certificate of Occ	cupancy. Additional
Building Perr	mit Fee of \$	required.		
Signed		Da	ated	
	Building I	nspector		