

November 2014

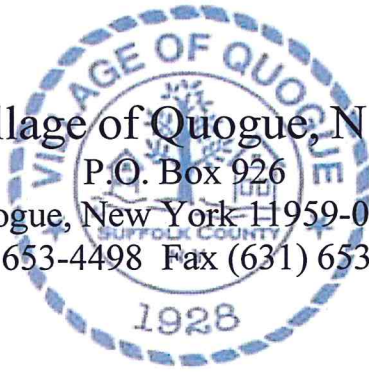
**Request For An
Updated or Pre-Existing Certificate of Occupancy
Instructions**

An Updated Certificate of Occupancy is required as per §196-61F of the Code of the Village of Quogue. In order to obtain an Updated Certificate of Occupancy for a parcel the following information must be provided.

1. An up to date as built original sealed survey.
2. Copies of all Certificates of Occupancy/Compliance for the parcel. (If you do not have them in your possession, you should file a Freedom of Information Law (FOIL) request with the Village office and review the building files for the property. They may be there.)
3. If there is a recent change in ownership, a copy of the deed must be submitted. Be aware that the C of O will be issued in the name of the current owner.
4. Any open building permits **must** be renewed, if necessary, and finalized prior to issuance of the updated C of O.
5. The correct house number must be displayed as per local and State Code.
6. Complete the form titled Request for an Updated or Pre-Existing Certificate of Occupancy.
7. If the request is for a preexisting use, a signed notarized affidavit regarding the history of the property will be required.
8. Submit the required \$250 fee with the application.
9. Submit a signed notarized smoke and carbon monoxide alarm affidavit. If hard wired detectors were not originally installed, battery operated detectors are acceptable.

Sincerely,
William M. Nowak
Chief Building Inspector

Village of Quogue, N.Y.
P.O. Box 926
Quogue, New York 11959-0926
(631) 653-4498 Fax (631) 653-4776



Request For An
Updated or Pre-Existing Certificate of Occupancy

This cover sheet must be completed before an Updated or Pre-Existing C of O application can be accepted. Be sure to include e-mail and owner addresses correctly. A copy of the C of O will be mailed to the owner or, if requested, made available for pick-up at the Village office.

Submittal Date: _____

Property Address: _____

SCTM Number: 902-_____-_____-_____._____

Present Owner's Name: _____

Mailing Address: _____

Phone Number: _____

E-Mail: _____

Applicant's Name (if different): _____

Mailing Address: _____

Phone Number: _____

E-Mail: _____

<p><u>For Official Use Only</u></p> <p>Approved for an Updated / Pre-Existing Certificate of Occupancy on: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>



SMOKE & CARBON MONOXIDE ALARM AFFIDAVIT

STATE OF NEW YORK)

)SS:

COUNTY OF SUFFOLK)

I, _____, being duly sworn, depose and say:

- 1) I am the _____ of the premises located at _____, SCTM# 902-_____.
- 2) That smoke detection alarm devices are installed as per the Residential Code of New York State and /or The Property Maintenance Code of New York State, which requires one in each room used for sleeping purposes and in hallways or common areas outside of rooms for sleeping and at least one be on each story within a dwelling, including basements.
- 3) That carbon monoxide alarms devices are installed as per Section §610 of the Fire Code of New York State, which requires one for every floor of living space in the structure within 15' of rooms used for sleeping.

Original Signature

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

Original Notary Public Signature & Notary Seal