

**VILLAGE OF ARDSLEY
BUILDING DEPARTMENT
507 ASHFORD AVENUE
ARDSLEY, NEW YORK 10502
Phone: 914-693-6961 Fax: 914-693-3706**

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Street Address: _____ Permit # _____

Parcel ID #: Section _____ Sub Section _____ Block _____ Lot _____

Property Owner (print name) _____ Phone # _____

Address of owner: _____ City: _____ State: _____ Zip: _____

Contractor (print name) _____ Phone # _____

Contractor Address: _____ City: _____ State: _____ Zip: _____

STATE OF NEW YORK, COUNTY OF WESTCHESTER

_____ being duly sworn, deposes and says that they reside at
(Print Name)

_____ in _____,
(Town, Village, City)

in the County of _____ in the State of _____,

that the actual cost of construction for this project was: \$ _____.

Deponent further states that they have examined the approved plans of the structure herein referred to for which a certificate of occupancy is sought, and that to the best of their knowledge and belief, the structure has been erected in accordance with the approved plans and any amendments thereto except in so far as variations wherefrom have been legally authorized, and as erected complies with the laws governing building construction.

Sworn to before me this _____

day of _____

(Applicant's Signature)

(Notary Public)

(Fire Inspector)