

# **INCORPORATED VILLAGE OF OYSTER BAY COVE**

## **BUILDING DEPARTMENT**

### **RESIDENTIAL BUILDING PERMIT APPLICATION REQUIREMENTS**

1. Two (2) building permit application forms completely filled out with notarized Owner's signature.
2. Two (2) copies of a recent property survey signed and sealed by a NYS licensed land surveyor.
3. Submit two (2) sets of construction drawings signed and sealed by NYS licensed design professional (Architect or Engineer) demonstrating compliance with the Code of the Village of Oyster Bay Cove and the **2020 Residential Code of New York State and 2020 Energy Conservation Code of New York State** based on the ICC Family of codes and its applicable reference standards.
4. Complete Board of Assessor's Form and Short Environmental Form.
5. When applications are for new dwellings and/or substantial alterations and/or include excavation/site work triggering **Site Plan Review** from the Village's Planning Board, the applicant must submit (4) four sets of construction drawings inclusive of site drawings signed and sealed by licensed NYS design professional addressing the Site Plan Review checklist (see Site Plan Review application) (See New Home Instructions)
6. Affidavit of Truss Construction (OBC standard form – where applicable).
7. Insurance Certificates listing the following (see separate instruction sheet):  
A) Worker's Compensation      B) NYS Disability      C) General Liability

**\*\*\* Certificate holder names on certificate to be written as :**

**Incorporated Village of Oyster Bay Cove (and homeowner's name)**

**C/O Building Inspector, 68 West Main Street, Oyster Bay, NY 11771**

8. Application fee of \$150. Permit fee calculated by Building Inspector and payment required prior to the release of the Building Permit payable by cash or check made out to the Village of Oyster Bay Cove.

### **AFTER PERMIT IS ISSUED – OWNER IS RESPONSIBLE FOR THE FOLLOWING:**

1. Scheduling for inspections (See OBC inspection procedures)– 922-1071 - M/W/F 10am to 2pm
2. Electrical Inspection – See list of approved third party agencies as recognized by the Town of Oyster Bay.

**\*OBTAINING A CERTIFICATE OF OCCUPANCY AND/OR CERTIFICATE OF COMPLETION IS THE HOMEOWNER'S RESPONSIBILITY.**

**INCORPORATED VILLAGE OF OYSTER BAY COVE  
BUILDING DEPARTMENT**

**APPLICATION TO BUILD OR INSTALL**

NEW BUILDINGS, ADDITIONS/ALTERATIONS, EXISTING STRUCTURES, ACCESSORY  
STRUCTURES, DECKS, PORCHES, CONVERSIONS, FIREPLACES, HVAC, SITE WORK

Submit application in duplicate. Each application must be clearly typewritten or printed.  
Incomplete or illegible applications will not be accepted.

**A PERMIT MUST BE OBTAINED BEFORE COMMENCING WORK**

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_ Date \_\_\_\_\_

Property Location No. \_\_\_\_\_ Address \_\_\_\_\_  
.....

**Owner/ Project Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

**Applicant Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

**Design Professional Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

**Contractor Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

**Plumber Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

**Electrician Name** \_\_\_\_\_

Location/Address \_\_\_\_\_

Contact Phone No. \_\_\_\_\_ Contact Email \_\_\_\_\_

DESCRIPTION OF WORK \_\_\_\_\_

PROPERTY INFORMATION

Proposed ☐ Existing/Maintain ☐ Existing GFA \_\_\_\_\_ Proposed GFA \_\_\_\_\_

Estimated Cost of work (proposed or at the time performed) \_\_\_\_\_

Existing Lot Coverage (%) \_\_\_\_\_ Proposed Lot Coverage \_\_\_\_\_

**OWNER AFFIDAVIT**

I agree to permit the Building Inspector and any officer or employee of the Village of Oyster Bay Cove to enter upon the premises in the discharge of their duties under this application for permit.

1. A copy of the approved plans and permit will remain on the premises at all times until a Certificate of Occupancy and/or Completion is issued. These plans will be made available to the Building Inspector.
2. The Building Inspector shall be given a minimum of 48 hours' notice to conduct all required inspections and no work will continue until such inspections have been conducted and approved.
3. Owner or their designated representative will take responsibility to arrange all required inspections. It is not the Village's responsibility to arrange for inspections.
4. Permits expire in one (1) year from the date of issuance with the ability to extend one (1) additional year. If the construction is still in progress upon the year anniversary, it is the Owner's responsibility to contact the Village and extend the permit prior to expiration. No work is to be started until the permit has been issued and posted at the location of permit activity.

State of New York:

County of Nassau:

Please print – Property in the name of \_\_\_\_\_

depose and says that he/she resides at \_\_\_\_\_ Address of Owner \_\_\_\_\_

In the State of \_\_\_\_\_, that he/she is the Owner in fee of all certain lots, parcel of land shown on the attached survey Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ situated, lying and being within the Village of Oyster Bay Cove; that I/we have read and in accordance with the approved application and accompanying plans, of which he/she is familiar with and that he/she hereby names \_\_\_\_\_ as his or her representative to file this application on his/her behalf.

Sworn to me before this:

Signature \_\_\_\_\_  
(Owner signature)

\_\_\_\_\_ Day of \_\_\_\_\_ 20 \_\_\_\_\_

(Notary Public – New York)



Notary Seal

**INCORPORATED VILLAGE OF OYSTER BAY COVE  
BUILDING DEPARTMENT**

68 WEST MAIN ST., OYSTER BAY, NEW YORK 11771  
(516) 922-1071

**APPLICATION FOR PLUMBING FIXTURES**

APPLICATION MUST BE TYPEWRITTEN OR PRINTED IN INK LEGIBLY.

SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

OWNER: \_\_\_\_\_

NAME                      STREET ADDRESS                      POST OFFICE                      ZIP                      PHONE#

PLUMBER: \_\_\_\_\_

ADDRESS OF CONSTRUCTION: \_\_\_\_\_

IF DIFFERENT FROM ABOVE                      NO. & STREET                      POST OFFICE                      ZIP

LOCATION OF PROPERTY:

N.E.S.W. SIDE OF: \_\_\_\_\_ FEET  
(STREET)                      (DIMEN)

N.E.S.W. OF \_\_\_\_\_  
(STREET)                      (POST OFFICE)

N.E.S.W. OF \_\_\_\_\_ corner of \_\_\_\_\_ and \_\_\_\_\_  
(STREET)                      (STREET&POST OFFICE)

TYPE OF BUILDING:

PROPOSED: \_\_\_\_\_ MAINTAINED: \_\_\_\_\_

FIXTURE COUNT:

Draw schematic diagram below-must indicate type of piping,  
Size, runs, & venting:

	B	1st	2nd	
Water Closet				
Lavatory				
Bath Tub				
Shower				
Kitchen Sink				
Dish Washer				
Washing Machine				
Stop Sink				
Indirect Waste				
Urinal				
Other				

PLUMBER'S INFO: \_\_\_\_\_

Sworn to before me this                      day of                      20

LICENSE #: \_\_\_\_\_

NAME(Print): \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

Phone#: \_\_\_\_\_

Acknowledged: \_\_\_\_\_

Master Plumber (Signature)

Notary Public

**Inc. Village of Oyster Bay Cove**  
**68 West Main St., Oyster Bay, NY 11771**  
**Building Dept: (516) 922-1071**

**LOT AREA COMPUTATION SHEET**  
**(PURSUANT TO VILLAGE CODE 320-1)**

<b>Property Owner:</b>	<b>Design Professional:</b>			
<b>Address:</b>	<b>Address:</b>			
<b>Phone:</b>	<b>Phone:</b>			
<b>Fax:</b>	<b>Fax:</b>			
<b>Project Description:</b>				
<b>Project Location:</b>				
<b>NCTM:</b>	<b>SEC:</b>	<b>BLK:</b>	<b>LOT:</b>	<b>ZONE:</b>

The following computations and their supporting documentation must be submitted for **EVERY BUILDING PERMIT APPLICATION WHICH INVOLVES ANY STRUCTURE EXPANSION OR STRUCTURE WHICH IS PROPOSED TO A BUILDING LOT.** (Exception: Interior alterations) Supporting documentation shall include current survey prepared by NYS licensed land surveyor showing all existing structures, driveways, topographic info (2' contours) and contour analysis, wetlands, flood plane, easements, street, right of way and trees which may be affected. **NO application shall be accepted without submission of this computation and supporting document.**

LOT AREA [Amended 11/25/1991 by L.L. No. 2-1991; 11-15-2005 by L.L. No. 14-2005]

A. The total horizontal area of a lot within its legal boundaries measured to the street line, excluding:

- 1) Any portion which has less than ½ of the minimum lot width for the zoning district; \_\_\_\_\_ **SF**
- 2) Any portion which lies within a driveway, right-of-way, or access easement serving any other lot or lots; \_\_\_\_\_ **SF**
- 3) Any portion which is within a street, right-of-way or lane; \_\_\_\_\_ **SF**
- 4) Any portion which is burdened by an easement or restriction that substantially affects the use or development of that portion of the lot which is not within the minimum front, side and rear yard and is not a customary easement for utilities and similar services to the premises. \_\_\_\_\_ **SF**
- 5) Any portion which is within "an area of special flood hazard" as defined in § 320-72 of this chapter; \_\_\_\_\_ **SF**
- 6) Seventy-five percent of any portion which constitutes a wetland, water body or watercourse, or is within a buffer area, as defined in the Village Code; and [Amended 3-21-2006 by L.L. 4-2006] \_\_\_\_\_ **SF**

- 7) Twenty-five percent of any portion which constitutes a steep slope, and 50% of any portion which constitutes a very steep slope area, as defined in the Village Code.

- STEEP SLOPE \_\_\_\_\_ SF x .25 = \_\_\_\_\_ SF
- VERY STEEP SLOPE \_\_\_\_\_ SF x .5 = \_\_\_\_\_ SF \_\_\_\_\_ SF

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**SUB TOTAL AREA EXCLUSIONS** \_\_\_\_\_ SF

( \_\_\_\_\_ )  
**ACRE(S)**

B. Notwithstanding the foregoing, the area of any lot which lawfully existed in the Village prior to September 1, 2004, shall not be deemed to be less than the minimum lot size required in the district in which it is located, or to otherwise be made nonconforming, as a result of exclusions in Subsection A(6) and (7) above. Lot area exclusion in Subsection A(1) and (4) above shall not be deducted from the lot area when computing the maximum building area on any such lot. Any such nonconforming lot may continue to exist and be used without the need for variances; provided, however, that any change in use or development of any such lot shall comply with all requirements of the zoning regulations of the Village of Oyster Bay Cove other than requirements for minimum lot area. In case of a nonconforming building which lawfully existed as of February 1, 2006, alterations or additions to such building are permitted notwithstanding the front setback requirements in this section, provided that the alterations or additions are located within the existing footprint of the building and are at least 75 feet from the front property line. [Amended 3-21-2006 by L.L. No. 4-2006]

**TOTAL LOT AREA EXCLUSIONS** \_\_\_\_\_ SF

( \_\_\_\_\_ )  
**ACRE(S)**

\_\_\_\_\_ SF - \_\_\_\_\_ SF = \_\_\_\_\_ SF  
**BASE LOT AREA                      LOT AREA EXCLUSIONS                      \*NET TOTAL LOT AREA**

( \_\_\_\_\_ )  
**\*NET ACRES**

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**SIGNATURE AND STAMP OF DESIGN PROFESSIONAL**

**\*THIS NET LOT AREA (S.F.) SHALL BE USED AS THE BASELINE FOR COMPUTING ALL ZONING LOT COVERAGE CALCULATIONS.**

# EXCAVATION AFFIDAVIT

Incorporated Village of Oyster Bay Cove

New York State Rule 753 requires that no person shall commence or engage in any excavation or demolition unless and until they have served timely notice as provided in the law to operators (Utility's) who maintain underground facilities in the Village of Oyster Bay Cove.

**753.1-1 Purpose.** The purpose of these rules is to establish procedures for the protection of underground facilities in order to assure public safety and to prevent damage to public and private property, as required by General Business Law Article 36 and Public Service Law Section 119-b. This Part may be cited as Industrial code 53 or Code Rule 53, in addition to its designation as Part 753.

## **SUBPART 753-2 DUTIES OF LOCAL GOVERNING BODIES**

**753.-2.1 Provision and Display of Notice.** Any local governing body that issues permits for excavation and demolition shall provide a notice to applicants for permits that informs them about their responsibilities under state law to protect underground facilities and the existence, operation, programs and telephone number of the one-call notification system. Every such local governing body shall continuously display such notice in a conspicuous location in the office or agency it designates.

List of all operators (Utility Companies) that operate in the Village of Oyster Bay Cove are provided below:

### **UNDERGROUND OPERATORS (Utility Companies)**

PSEG –NATIONAL GRID

N.Y.S.D.O.T.

NASSAU COUNTY D.P.W.

NASSAU COUNTY DEPT OF HEALTH

TELEPHONE & CABLE SERVICE

JERICHO WATER DISTRICT

OYSTER BAY WATER DISTRICT

OYSTER BAY SEWER DISTRICT

**CONTACT THE NUMBER BELOW FOR NOTIFICATION OF EXCAVATION  
TO ALL UNDERGROUND OPERATORS. 1-800-272-4480 or 811**

SECTION \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

TYPE OF APPLICATION \_\_\_\_\_

AGENT FOR OWNER \_\_\_\_\_

AGENT FOR OWNER \_\_\_\_\_

ADDRESS OF PROPERTY \_\_\_\_\_



### **AFFIDAVIT OF EXCAVATION**

I hereby affirm that the above property owner or agent for this application shall comply with New York State. Rule 753 regarding underground facilities.

Date \_\_\_\_\_ Signed \_\_\_\_\_

Title \_\_\_\_\_

**(Owner, Agent, Contractor)**

NOTARY: Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Inc. Village of Oyster Bay Cove  
68 West Main Street  
Oyster Bay NY 11771

**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,  
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER  
CONSTRUCTION IN RESIDENTIAL STRUCTURES**

(In accordance with Title 19 NYCRR Part 1265)

Owner of Property: \_\_\_\_\_

Subject Property (Address and SBL#)

\_\_\_\_\_  
\_\_\_\_\_

**Type of Structure (Check all that apply):**

- ☐ New Residential Structure
- ☐ Addition to Existing Residential Structure
- ☐ Rehabilitation of Existing Residential Structure

**Utilization Type (Check all that apply):**

- ☐ Truss Type Construction (TT)
- ☐ Pre-Engineered Wood Construction (PW)
- ☐ Timber Construction (TC)

**In the Following Locations (Check all that apply):**

- ☐ Floor Framing, Including Girders and Beams (F)
- ☐ Roof Framing (R)
- ☐ Floor Framing and Roof Framing (FR)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ ☐ Owner or ☐ Owner Agent



# *Short Environmental Assessment Form*

## *Part 1 - Project Information*

### Instructions for Completing

**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

<b>Part 1 – Project and Sponsor Information</b>				
Name of Action or Project:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:			Telephone:	
			E-Mail:	
Address:				
City/PO:			State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			<input type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO	YES
If Yes, list agency(s) name and permit or approval:			<input type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres				
b. Total acreage to be physically disturbed? _____ acres				
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres				
4. Check all land uses that occur on, <u>are</u> adjoining [and] <u>or</u> near the proposed action.				
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)				
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____				
<input type="checkbox"/> Parkland				

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Are public transportation service[is] available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near <u>the</u> site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
12. a. Does the <u>project site contain, or is it substantially contiguous to, a building, archeological site, or district that [a structure that] is listed on [either] the National Register of Historic Places or the State Register of Historic Places or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?</u>	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Is the [proposed action] <u>project site, or any portion of it, located in or adjacent to an area designated as [archaeologically] sensitive [area] for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?</u>	<input type="checkbox"/>	<input type="checkbox"/>	
13. A. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO <input type="checkbox"/>	YES <input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
18. Does the proposed action include construction or other activities that <u>would</u> result in the impoundment of water or other liquids ( <u>e.g.</u> , retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO <input type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO <input type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
20. Has the site of the proposed action or an adjoining property been <u>the</u> subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO <input type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
<b>I [AFFIRM] CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>  Applicant/sponsor name: _____ Date: _____ Signature: _____ Title: _____		

Rev 08/11

**Inc. Village of Oyster Bay Cove  
68 West Main Street  
Oyster Bay NY 11771  
516-922-1071 516-922-1761 Fax**

**1) Worker's Compensation Insurance Requirements**

**Please be advised that the following forms are the only acceptable documents for proof of worker's compensation insurance on all proposed building permit applications (No Accord Forms accepted)**

**Standard Form Numbers**

**C-105.21**

**C-105.2**

**U-26.3**

**The insurance documents must be an original (no faxes or copies)**

**2) Liability Insurance**

**Please be advised the Accord form must be an original (no copies)**

**3) Disability Insurance**

**Standard form DB120.1**

**ATTENTION APPLICANT:**

**Please notify your contractor that their insurances must be updated and current for the duration of the project to be valid**

- **The project name and address must be on the certificate**
- **Please note the Village as the certificate holder as follows:**

**The Inc. Village of Oyster Bay Cove  
68 West Main Street  
Oyster Bay, NY 11771**

**INCORPORATED VILLAGE OF OYSTER BAY COVE  
68W. MAIN STREET, OYSTER BAY NY 11771**

**Note: General Municipal Law of the State of New York Section 809 enacted in 1969 requires of the following completed Disclosure statement**

**DISCLOSURE STATEMENT**

\_\_\_\_\_ depose and says:  
Applicant(s)/Appellant(s) Name

**FOR INDIVIDUAL APPLICATION (strike out if not applicable)**

- A. am over the age of 21 and reside at \_\_\_\_\_
- B. am the \_\_\_\_\_ of the property designated  
(owner/contract vendee-insert one)

Section \_\_\_\_\_ Block \_\_\_\_\_ Lots(s) on the Nassau County Land and Tax Map which forms the subject matter of this application and am fully familiar with all the facts and circumstances hereinafter set forth.

**FOR CORPORATE APPLICATIONS (Strike out if not applicable)**

- A. I am the \_\_\_\_\_ of the \_\_\_\_\_ with  
(Office Held) (Name of Corp)

Office locate at: \_\_\_\_\_  
and am fully familiar with all the facts and circumstances hereinafter set forth.

- B. The corporation was incorporated under the Laws of the State of \_\_\_\_\_ and is the  
\_\_\_\_\_ of the property designated as Section \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_ on the  
Nassau County Land Tax Map
- C. The following are the names and residences of each officer, director and shareholder: (Set forth names, residences and relationship to corp.)(Add additional sheet if necessary.)
- D. That the corporate stock of said corporation has not been pledged to any person nor has any agreement been made to pledge the said stock (except: If any set forth details.)

**FOR PARTNERSHIP APPLICANTS (Strike out if not applicable)**

- A. That I am \_\_\_\_\_ of the \_\_\_\_\_  
(Partner, Joint Venture, etc.) (Name of Partnership)

and am fully familiar with all the facts and circumstances hereinafter set forth.

**INCORPORATED VILLAGE OF OYSTER BAY COVE  
68W. MAIN STREET, OYSTER BAY NY 11771**

B. That the above partnership was established in \_\_\_\_\_ on \_\_\_\_\_  
and is the \_\_\_\_\_ of the property designated as Section \_\_\_\_ Block \_\_\_\_\_ lot(s)  
on the Nassau County Land and Tax Map.

C. That the following are the names, addresses and interests, respectively, of all partners (joint ventures,  
etc. (additional sheet if necessary)

**DISCLOSURE STATEMENT MUST BE COMPLETED**

1. That there are no encumbrances or holders of any instruments creating an encumbrance upon the subject property(except: if ay set forth details)
2. That neither deponent nor any other person mentioned; in this statement is a Village officer or employee, or is related to a Village Officer or employee. (except: if any set forth details. )
3. That no State Officer or employee or local municipal officer or employee in the Nassau County or his spouse or a person by consanguinity related to either of them within the third degree is (are) the Applicant(s) or an officer, director or employee of the Applicant(s) or legally or beneficially owns or controls the corporate stock of the Applicant(s) or is a partner of Applicant(s),expressed or implied whereby his compensation for services is to be dependent or contingent upon the favorable exercise of discretion in the granting of the application herein.(except: if any set forth details.)
4. That in the event there is any change in the matters set forth herein prior to the public hearing relating to the property affected hereby, deponent(s) will file with the Village a supplemental statement indicating the details of such change within 48 hours of such change.

**I HAVE READ THE FOREGOING AND UNDERSTAND THAT ANY FALSE STATEMENTS(S)  
MADE THEREIN ARE PUNISHCABLE AS A CLASS A MISDEMEANOR PURASUNT OT SECIOTN  
210.45 OF THE PENAL LAW**

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)