

TOWN OF SOUTHAMPTON

**Department of Land Management
Building and Zoning Division**
116 HAMPTON ROAD
SOUTHAMPTON, NY 11968



JANICE SCHERER
TOWN PLANNING AND
DEVELOPMENT ADMINISTRATOR

Phone: (631) 287-5700
Fax: (631) 287-5754

JAY SCHNEIDERMAN
TOWN SUPERVISOR
WWW.SOUTHAMPTONTOWNNY.GOV

Electrical Disconnect Affidavit

Owner of Property _____
Property Address _____
Town/Village _____
Owner's Home Telephone # _____
PSEG Account # _____

Date of Disconnect _____
Name of Electrician _____

I _____, hereby certify that I have disconnected the above premises from Public Service Enterprise Group (PSEG).

I understand that the Town of Southampton Building Department will be relying on this certification.
My Suffolk County Electrical License number is _____.

I, _____, as the Owner of the above premises, do hereby agree to release, indemnify, defend, and hold harmless the Town of Southampton, its officers, employees, and representatives, from and against any and all demands, liabilities, losses, damages, expenses (including attorney's fees), and judgments for any personal injuries, death, or property damage in any way relating to or arising from the above disconnection of electrical service to the premises described herein.

Read and Check Box

False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the New York State Penal Law.

Owner's Signature Date Electrician's Signature Date