

TOWN OF SOUTHAMPTON

Department of Land Management
 Building and Zoning Division
 116 HAMPTON ROAD
 SOUTHAMPTON, NY 11968
 Phone: (631) 287-5700
 Fax: (631) 287-5754



JANICE SCHERER
 TOWN PLANNING AND
 DEVELOPMENT ADMINISTRATOR

JAY SCHNEIDERMAN
 TOWN SUPERVISOR
 WWW.SOUTHAMPTONTOWNNY.GOV

REQUEST FOR AN UPDATED CERTIFICATE OF OCCUPANCY

In order to obtain an Updated Certificate of Occupancy for a parcel, it is necessary to give the following information:

Please Note: *A final inspection of the property, and all structures if necessary, is required before a certificate will be issued.*

Owner/Agent must go to <http://www.southamptontownny.gov/Building-Inspection> to schedule a final inspection of the property before a Certificate would be issued

1. An Updated Original survey of the premises with Surveyor's Stamp and Seal.
2. Copies of all Certificates of Occupancies/Compliances relating to the parcel.
3. If new owner, copy of deed or bill of sale must be submitted.
4. All open building permits must be finalized before an updated certificate can be issued.
5. A correct house number that has been recently issued by the Town.
6. A correct Suffolk County Tax Map Number.
7. The attached cover sheet must be completed.
8. A check for \$250.00 (two hundred and fifty dollars) made out to the Town of Southampton or payable by cash or credit card.
9. [Signed Smoke Alarm Form](#)
10. Proof of Corporation for properties owned by LLC, Corporations, etc.
11. Signed [Open Government Disclosure Form](#) from owner and authorized agent.
12. Original Signed & [Notarized Owners Endorsement:](#)

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IMPORTANT MESSAGE REGARDING HOUSE NUMBERS

Southampton Town Code, Chapter [123-10F](#) will require that all Town residents display house numbers. The law requires that you use only the number assigned by the Town. **NO OTHER NUMBER SHOULD BE DISPLAYED AND NO INSPECTIONS WILL BE DONE BY THE BUILDING DEPARTMENT AT PROPERTIES WITHOUT A HOUSE NUMBER.**

If you have a different number for postal delivery, please file a change of address with your post office immediately. If your tax bill does not list a street number, or if you have a question regarding the law or the number assigned to you, please call the Assessor's Office at 283-6000

The following is a description of the manner of display and the style and size of the required house numbers:

A. Manner of Display.

1. During construction period. The owner of a land parcel for which a building permit has been issued shall have the street address number displayed on a sign or a post located at the front of the property. In the case of a flag lot, at the street entrance of flag.
2. Existing and newly completed buildings. The owner of an existing building or newly completed building shall have the street address number displayed by permanently affixing or painting numerals, letters or script, stating the number, to the front of the building. Where the building is not close enough to the street, or is not readily visible from the street, the street address number shall be permanently affixed to a sign, post or mailbox located at the front of the parcel or lot where the building is situate.

B. Style and Size of Numbers.

1. The numerals, letters or script used to display the street address number of the building shall be painted on a plaque or the front of the building, or made of metal or other durable material. The numerals, letters or script shall be at least four (4) inches in height. All street address numbers shall be displayed as to be easily seen from the street by both pedestrians and drivers of vehicles.

The proper posting of your house number will assist the Building Division during the inspection process and ensure prompt and timely inspections.

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UPDATED CERTIFICATE OF OCCUPANCY COVER SHEET

This cover sheet **MUST BE COMPLETED** before an Updated Certificate of Occupancy application can be accepted. **NOTE:** All issued Updated Certificate of Occupancies *will be emailed to the homeowner* so be sure that a correct email address is listed.

Application Number: _____ Date: _____

Property Address: _____

SCTM# 473689-_____._____-_____-_____._____

Present Owners Name: _____

Present Owners Address: _____

Present Owners **Email** Address: _____

Present Owners Telephone Number: _____

Agents Name (if applicable): _____

Agents Address: _____

Agents **Email** Address: _____

Agents Telephone Number: _____

| | |
|---|---------------------------------|
| <p>FOR OFFICIAL USE ONLY</p> <p>APPROVE FOR UPDATED CERTIFICATE OF OCCUPANCY ON _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Total of bedrooms #: _____ Bedrooms in basement #: _____</p> | <p><u>Inspector's Stamp</u></p> |
|---|---------------------------------|

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FOR OFFICIAL USE ONLY UPDATED CERTIFICATE OF OCCUPANCY CHECKLIST

- Single Family Dwelling
- Two Family Dwelling
- _____ Family Dwelling
- Other Residential _____
- Commercial Building Used as _____
- Basement One Story Wood Frame Deck(s) _____
- Cellar Two Story Concrete Block Swimming Pool
- Crawl Space ____ Story _____ Shed(s)
- Pilings Pool House
- Slab
- Bedroom(s) Total _____ Gazebo
- Bedroom(s) in Basement _____
- _____ Garage (_____ Car)
- _____ 1 Story 2 Story
- _____ Home Pro. Office. (_____)
- _____
- _____

1. Were you able to verify all uses of buildings by physical access or visually through windows? Yes No
2. Did you enter any of the Buildings? Yes No
IF YES, which buildings did you enter

3. Are there any obvious violations of subchapter F of the NYSFPABC? Yes No
IF YES, list violations in inspection findings.

4. Are there any buildings or structures on the property that do not have certificate of occupancies/compliances? Yes No
5. Are there any buildings or structures that were not shown on the survey that are on the property? Yes No

| | |
|--|--------------------------------|
| <p>FIELD INSPECTION FINDINGS</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Total of bedrooms #: _____ Bedrooms in basement #: _____</p> <p>INSPECTORS SIGNATURE _____ DATE _____</p> | <p>INSPECTORS STAMP</p> |
|--|--------------------------------|

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SMOKE AND CARBON MONOXIDE ALARM AFFIDAVIT

I, _____ being duly sworn, dispose and say:

- 1) I am the owner of the premises located at _____ Suffolk County Tax Map Number 473689 - _____, a structure for which I am applying for a two-year rental permit.

- 2) That smoke detection alarm devices are installed as per Section 164-9 of the Southampton Town Code requiring multiple smoke detectors in one- or two-family residences which are located in each room used for sleeping purposes, on the ceiling or wall outside of each separate sleeping area in the immediate vicinity of bedrooms and in each story within a dwelling including basements and cellars.

- 3) That carbon monoxide alarm devices are installed as per Section 378-5a of the Executive Law of New York State, which is one for every floor of living space in the structure.

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

Original Signature of Owner/Agent

Date