



**INCORPORATED VILLAGE OF SAGAPONACK**

PO Box 600, 3175 Montauk Highway  
Sagaponack, NY 11062  
631-537-0017      631-537-0612 (FAX)

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**REQUEST FOR PRE-EXISTING  
CERTIFICATE OF OCCUPANCY  
INSTRUCTIONS**

In order to obtain a Pre-Existing Certificate of Occupancy for a building structure or use that existed prior to October 14, 1957, it is necessary to give the following information:

1. An original survey accurately depicting all buildings and structures on the property.
2. Sworn affidavits before a Notary Public of proof that the building(s) or structure(s) and the use(s) on the property existing prior to the enactment of zoning, which is October 14, 1957. Typical information submitted as proof of a pre-existing use are:
  - A. Affidavits by persons familiar with the property documenting continuous specific uses, buildings and structures on a property from prior to October 14, 1957 to present.
  - B. Copies of leases and other agreements documenting uses and structures at specific time periods.
  - C. Assessor records (available through a property search request).
  - D. Any other information which conclusively proves a continuous chain of pre-existing use.

NOTE: Pre-Existing certificate of occupancies are granted based on *conclusive* evidence of continuous use from prior to October 14, 1957 through the current date. Applications unable to provide adequate documentation will be rejected. An appeal may be filed to the Zoning Board of Appeals as provided for in §245-77.

3. A Certificate of Occupancy request for a nonconforming commercial use or multiple commercial use must be submitted with a floor plan drawn to 1/4" scale which accurately depicts the layout and areas of use throughout the building.
4. A sworn affidavit before a Notary Public stating that there are smoke alarms in the dwelling if applicable.
5. The attached cover sheet completed.
6. A check for \$250.00 (two hundred and fifty dollars) made payable to the Village of Sagaponack.
7. If you are not listed as an owner, a deed or bill of sale for the property must be submitted.



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**REQUEST FOR PRE-EXISTING  
CERTIFICATE OF OCCUPANCY**

This cover sheet must be completed before a Pre-Existing Certificate of Occupancy application can be accepted. All pre-existing Certificate of Occupancies will be mailed to the home owner so be sure that a correct mailing address is listed.

Application Date: \_\_\_\_\_ Application Number: \_\_\_\_\_

1. Property Address \_\_\_\_\_  
2. SCTM# 908- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ . \_\_\_\_\_

3. Present Owner of Premises \_\_\_\_\_  
Present Owner's Address \_\_\_\_\_  
Present Owner's Telephone Number \_\_\_\_\_

4. Name of Agent (if applicable) \_\_\_\_\_  
Agent's Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Note: If this application is being made by someone other than the owner, the owner must sign the owner's authorization at the end of this form.**

5. Name of Attorney for Applicant \_\_\_\_\_  
Attorney's Address \_\_\_\_\_  
Attorney's Telephone Number \_\_\_\_\_

6. Corporate Officer/Partners Name (if applicable) \_\_\_\_\_  
Corporate Officer/Partners Address \_\_\_\_\_

7. Name the Certificate of Occupancy should be issued in \_\_\_\_\_  
Address: \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
**Notary Public**

\_\_\_\_\_  
**Signature of Owner**

If owner is a Corporation, indicate name of corporation and officer's title

\_\_\_\_\_  
Name of Corporation

\_\_\_\_\_  
Title of Officer

**OWNER'S AUTHORIZATION**

STATE OF NEW YORK     )  
  )ss:  
COUNTY OF SUFFOLK    )

\_\_\_\_\_, being duly sworn, depose and say, that I reside at \_\_\_\_\_  
\_\_\_\_\_. That I am the owner (or an officer of the corporation, which is the owner) of the  
premises described in this application, and hereby authorize \_\_\_\_\_  
whose mailing address is \_\_\_\_\_ to make the foregoing  
application and to appear on my behalf before the Planning Board of the Village of Sagaponack with reference to this application. I  
hereby agree to allow my agent, whose name and address appears above, to act on my behalf and I further agree to abide by any  
requirements imposed by the Planning Board as a condition of its approval.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
**Notary Public**

\_\_\_\_\_  
**Signature of Owner**

**AFFIDAVIT**

In the matter of the Application of

\_\_\_\_\_  
(name of property owner)  
For a Pre-Existing Certificate of Occupancy

**STATE OF NEW YORK)**  
**COUNTY OF SUFFOLK) SS:**

I, \_\_\_\_\_, being duly sworn, deposes and says:  
(name of person filing affidavit)

1. I reside at \_\_\_\_\_.

2. I am very familiar with the structures located on the \_\_\_\_\_  
(state north, south, east or west)  
side of \_\_\_\_\_, New York, as shown on the survey of  
(subject property address)  
\_\_\_\_\_ dated \_\_\_\_\_  
(name of surveyor)

(copy annexed hereto). I have known said land and structures since \_\_\_\_\_  
(year you have knowledge  
\_\_\_\_\_ and have had discussions with neighboring  
of land and structures)

property owners and prior owners of the subject premises concerning the construction and use  
of these buildings. Other sources of my knowledge are as follows:

Deed of Property Dated: \_\_\_\_\_  
Sworn affidavit from builder stating that he helped construct the home:  
\_\_\_\_\_  
(name of builder and year of construction)

3. All of the structures shown on said survey were fully completed before October 14, 1957, and  
have remained in their current state without expansion from said date, other than those under  
permit number(s) \_\_\_\_\_. Said structures  
have been continuously used as \_\_\_\_\_  
(ie: one-family dwelling, commercial building, barn, etc)  
since prior to October 14, 1957.

4. I make this affidavit knowing full well that the Village of Sagaponack Building and Zoning  
Division will rely upon the facts as stated herein to issue a pre-existing Certificate of  
Occupancy for said structures to \_\_\_\_\_  
(property owner)  
for use as \_\_\_\_\_.

DATED:  
Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Notary