



## CERTIFICATE OF OCCUPANCY APPLICATION

Application No \_\_\_\_\_  
Fee \_\_\_\_\_

Taken by \_\_\_\_\_

Date filed \_\_\_\_\_  
Receipt No \_\_\_\_\_

### PART A

(To be completed by applicant. Print clearly.)

**1. Location of property:**

Address \_\_\_\_\_  
Map page \_\_\_\_\_ Block \_\_\_\_\_ Lots \_\_\_\_\_ District \_\_\_\_\_

**2. Use of building / property:**

Number of dwelling units: \_\_\_\_\_

**3. Construction type:** \_\_\_\_\_ **Number of stories:** \_\_\_\_\_

**4. Fire detection: (check all applicable boxes)**

Smoke detectors  CO detectors  Fire alarm  Other: \_\_\_\_\_

**5. Fire suppression: (check all applicable boxes)**

None  Sprinkler system  Other: \_\_\_\_\_

**6. Number of off-street parking spaces:**  Outdoor: \_\_\_\_\_  Indoor: \_\_\_\_\_

**Number of off-street loading spaces:**  Outdoor: \_\_\_\_\_  Indoor: \_\_\_\_\_

**7. This property obtained the following approvals :( most recent approval only)**

Building Permit No. \_\_\_\_\_

Site Plan  No  Yes, resolution # \_\_\_\_\_ with conditions  No  Yes

Special Use Permit  No  Yes, resolution # \_\_\_\_\_ with conditions  No  Yes

Zoning Board  No  Yes, cal.# \_\_\_\_\_ with conditions  No  Yes

Architectural Review Board  No  Yes, resolution # \_\_\_\_\_ with conditions  No  Yes

Health Department  No  Yes **Other City, County and State agency (list all approvals with dates):**

**Owner's name:** \_\_\_\_\_ **tel.:** \_\_\_\_\_ **fax:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **city/state/zip:** \_\_\_\_\_

**Applicant's name:** \_\_\_\_\_ **tel.:** \_\_\_\_\_ **fax:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **city/state/zip:** \_\_\_\_\_

**PART B- BUILDING OCCUPANCY**

*See sample table on other page .For additional space, reproduce this table on a separate sheet of paper.*

Floor Level	Residential Use		Non-Residential Use	
	# OF APTS	DISTRIBUTION AND DESCRIPTION <i>Footnote 1</i>	AREA Footnote 2	USES Footnote 3

**Footnotes:**

**1.** Number of each type of dwelling units, and their number of kitchens, bathrooms and toilets. For example, (4) 1-BR/1K/1B & (6) 3-BR/1K/2B/1T is equivalent to 4 one-bedroom apartments with 1 kitchen and 1 bathroom & 6 three-bedroom apartments with 1 kitchen, 2 bathrooms and 1toilet each.

For 1- and 2- family dwelling, list each room per dwelling and per floor.

**2.** Total area in square feet of space used for non-residential uses.

**3.** For non-residential areas of the building which are designed to be subdivided into tenant spaces, indicate the general use of the space, i.e. retail, offices, medical laboratories, etc... Detailed room count shall be filed separately for each tenancy under the required Certificate of Tenancy.

For non-residential areas which are not designed to be separated into tenant spaces, submit a detailed room count.

PART C- APPLICANT'S AFFIDAVIT

State of New York  
County of Westchester} ss:

\_\_\_\_\_ being duly sworn, deposes and says: that \_\_\_\_\_  
Name of Applicant-Printed- Footnotes 1 & 2 Name of Owner-Printed - Footnote 1.  
\_\_\_\_\_ is the owner in fee of the premises to which this application applies; that she/he  
(applicant) is duly authorized to make this application; and that the statements contained herein are  
true to the best of his/her knowledge and belief; and that an application for a Certificate of Occupancy  
is hereby made to the City of Mount Vernon Department of Buildings for the above described  
property; and that all provisions of the City of Mount Vernon Zoning Code, the New York State  
Uniform Fire Prevention and Building Code, and all other applicable laws, rules and regulations  
shall be complied with before said Certificate of Occupancy is issued and shall continue to be  
complied with thereafter.

Sworn to before me this \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Signature of Notary/Commissioner of Deeds

1. If the owner is the applicant, he/she shall print his/her name as both where requested and sign as applicant.
2. If the owner is a corporation, the applicant shall be a principal officer of the corporation or a duly authorized agent.

PART D- INSTALLATION OF SMOKE AND CARBON MONOXIDE DETECTION  
DEVICES

State of New York  
County of Westchester} ss:

I, \_\_\_\_\_, hereby certify that smoke and carbon monoxide detecting devices  
Name of Applicant-Printed)  
are installed in accordance with New York State Uniform Fire Prevention and Building Code .

Sworn to before me this \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Signature of Notary/Commissioner of Deeds

Part E- EXISTING CONDITIONS

To be completed when the approved plans on records represent the current conditions of the building.

State of New York  
County of Westchester} ss:

I, \_\_\_\_\_, hereby certify that the approved plans for the premises, which are  
Name of Applicant  
on records with the City of Mount Vernon Department of Buildings, depict the current conditions of  
the premises, and that the dimensions of the clear opening and glazing of the windows shown on these  
plans have not been reduced in size.

Sworn to before me this \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Signature of Notary-Commissioner of Deeds

(For official use only)

This is to certify that the premises have been inspected and approved by the undersigned for the use and occupancy applied for in this application (Print name and sign):

<b>Building Department:</b>	_____	_____	_____
	Print	Sign	Date
<b>Plumbing Superintendent:</b>	_____	_____	_____
	Print	Sign	Date
<b>Fire Department:</b>	_____	_____	_____
	Print	Sign	Date
<b>Water Department:</b>	_____	_____	_____
	Print	Sign	Date
<b>Public Works:</b>	_____	_____	_____
	Print	Sign	Date
<b>Electrical Inspector:</b>	_____	_____	_____
	Print	Sign	Date
<b>Elevator Inspector:</b>	_____	_____	_____
	Print	Sign	Date

**SAMPLE OF TABLES FOR OCCUPANCY OF BUILDING:**

**Sample 1:** 2-story building with basement-Each floor is 3,000 sq ft. and is occupied as follows:

Basement: storage and boiler room. First Floor: 1 retail store and 1 restaurant- each one of them will apply for its own certificate of tenancy. Second floor: two 1-bedroom apartment with one bathroom, and one 3-bedroom apartment with two bathrooms each.

Floor Level	Residential Use		Non-Residential Use	
	# APTS	DISTRIBUTION AND DESCRIPTION	AREA	USES
Basement	0	N/A	3,000 sq. ft	Storage-boiler room
1 <sup>st</sup> Floor	0	N/A	3,000 sq. ft	1 retail store & 1 restaurant
2 <sup>nd</sup> Floor	3	(2) 1-BR/1K/1B & (1) 3-BR/1K/2B	0	N/A

**Sample 2:** 10,000 sq.ft., one-story building, with a mezzanine and no basement, used as wholesale business:

Floor Level	Residential Use		Non-Residential Use	
	# APTS	DISTRIBUTION AND DESCRIPTION	AREA	USES
1 <sup>st</sup> Floor	0	N/A	10,000 sq.ft.	5 offices, 2 HC toilets, warehousing, boiler room.
Mezzanine	0	N/A	1,200 sq.ft.	1 office w/1 toilet, 1 conference room, 1 lunchroom w/kitchen.

**Sample 3:** Two-family dwelling, duplex, 2story with basement and two 1-car garages.

Floor Level	Residential Use		Non-Residential Use	
	# APTS	DISTRIBUTION AND DESCRIPTION	AREA	USES
Basement	-	(2) 1-car garages, boiler room, laundry	N/A	N/A
1 <sup>st</sup> Floor	2 apts	Apt 1: LR/DR, K, ½ B & Apt 2: LR/DR, K, ½ B	N/A.	N/A
2 <sup>nd</sup> Floor	-	Apt 1: 3 Br, 2 B & Apt 2: 3BR, 2 B	N/A	N/A

## Documents to Submit to Apply For a Certificate of Occupancy

**Failure to submit ALL the documents listed below will result in a delay in the scheduling of the required inspections.**

1. Documents to be submitted according to the type of Certificate of Occupancy you are applying for:
  - **New Buildings, structures and/or land use:**
    - a) One application: parts A, B and C must be completed.
    - b) One as-built survey, showing all site improvements, including utilities connections, drywell, site drainage, sidewalk, distance to nearest street corner, setbacks, trees, etc...
    - c) Color photographs of each building elevation.
    - d) Signed and notarized permit holder affidavit(s).
  - **Existing Buildings for which approved plans depicting the current conditions are NOT on records with the Department of Buildings:**
    - a) One application: parts A, B, C and D must be completed.
    - b) One set of as-built plans, prepared by a New York State licensed architect or engineer. The as-built plans shall include a site plan of the property, locating off-street parking and loading spaces, and floor plans of each story. The plans shall bear the following certification to be signed and sealed by the registered design professional:  
"I, (name of registered design professional), certify that these plans represent the current conditions of the building and property."
      - c) Survey of the property showing all sites improvements, sidewalk, distance to nearest street corner, setbacks, trees, etc...
      - d) Pictures of each building elevation.
  - **Existing Buildings for which approved plans of the existing conditions are on records with the Department of Buildings:**
    - a) One application: parts A, B, C, D and E must be completed.
    - b) Survey of the property showing all sites improvements, sidewalk, distance to nearest street corner, setbacks, trees, etc...
    - c) Pictures of each building elevation.

**The following documents must be submitted for all types of application:**

2. Letter of authorization, signed by owner and notarized, naming applicant as owner's agent for the filing of this application. This letter of authorization is **only** required **if the applicant is not the owner** of the property.
3. Fee: cash or check made payable to the City of Mount Vernon Department of Buildings.
  - Residential use: \$150.00 plus \$50.00 per dwelling unit.
  - *Other use: \$300.00 per 5,000 sq.ft of gross floor area of non-residential use.*
4. The Fire Department inspection fee must be paid directly to the Fire Prevention Bureau, located at 470 E Lincoln Avenue, prior to the scheduling of the inspection on a Thursday. You may contact the Fire Prevention Bureau at 914-665 2611 to inquire about their inspection fees.
5. The electrical inspection must be scheduled by the applicant or the applicant's electrician. See attached list of acceptable Electrical Inspection companies.

**Inspections for a Certificate of Occupancy are conducted on Thursdays between the hours of 9:00a.m and 2:00p.m. The inspectors must be given access to every part of the building and site, including every dwelling unit and tenant space, on the day the inspections are scheduled.**

**You will be notified in advance of the date on which the inspections will be conducted. Please, make sure that your tenants will provide access to the inspectors, and that you or your designated agent will be available to accompany the inspectors throughout the entire property on the given day.**