



Town of New Castle

200 South Greeley Avenue, Chappaqua NY 10514 • Ph. (914) 238-4723 • Fax (914) 238-5177
e-mail: building@town.new-castle.ny.us

APPLICATION FOR A CERTIFICATE OF OCCUPANCY/COMPLIANCE

Fee: \$50.00*

Permit No. _____

Date of Application ____/____/____

Date Issued ____/____/____

Property Owner _____

Location of Property _____

Tax Map Designation: Section _____ Block _____ Lot _____

The undersigned requests that a CO/CC be issued, stating that the building at the above location conforms to the requirements of the Building Code and all other laws, rules and regulations applicable thereto.

(Print Name)

(Arch., Eng., Builder, Owner, Etc...)

Being duly sworn, deposes and says that he/she resides at

(Street)

(City/Zip)

and that the estimated cost stated in the application for the building permit was \$_____

and that the actual final cost was \$_____ plus

inspection fees \$_____ (if applicable).

If the final cost is more than the estimate, please call for cost of additional fee if required.

The deponent further states that he/she has examined the approved plans of the structure herein referred to for which a certificate of occupancy/compliance is sought and that to the best of his/her knowledge and belief, the structure has been erected in accordance with the approved plans and any amendments thereto except in so far as variations there from have been legally authorized, and as erected complies with the laws governing building construction.

(APPLICANT'S SIGNATURE)