



TOWN OF SOUTHAMPTON
CODE ENFORCEMENT
INVESTIGATIONS & ENFORCEMENT UNIT
 116 Hampton Road, Southampton, NY 11968
 Ph: 631-702-1700 Fx: 631-283-2694
www.southamptontownny.gov/codeenforcement

Ryan Murphy
 Town Code Compliance and
 Emergency Management Administrator

Ricardo Larios
 Town Investigator

Michael Chih
 Code Enforcement Officer

RENTAL PERMIT APPLICATION INSTRUCTIONS

Rental Permit Fee \$200 (Application must be renewed every two years)

The items listed below are required to be submitted with the completed application.

- Floor Plans:** Floor plans drawn to 1/4" – 1' scale of the ENTIRE subject structure or building
- Survey:** A copy of the property survey and/or site plan of the premises drawn to scale not greater than forty (40) feet to one inch, showing all buildings, structures, walks, driveways and other physical features of the premises and the number, location and access of existing and proposed on-site vehicle parking facilities.
- Certificates of Occupancy and Compliance:** Certificates of occupancy and compliance for all structures on the property, Building Permit Application is needed if any structures on the subject property do not hold a certificate of occupancy or compliance.
- Residential Smoke and Carbon Monoxide Detector Affidavit (form enclosed):** Included in application package. Must be signed and notarized. Please show the location of all Smoke and Carbon Monoxide Detectors on the floor plans.
- Engineer or Architect Certification of Code Compliance (form enclosed):** Must be submitted by a license architect or engineer if an inspection by Town of Southampton Inspector is declined.
- Designation of Agent for Service (form enclosed):** Must be completed by owner.

Fees:

- New/Renewal Rental Application Standard Fee: \$200
 - Property in Violation of Chapter 270 (Rental Properties) fee \$500
 - Income Qualified Tenant Fee Waived
 - Enhanced Star, Veterans exemption or Senior Citizens exemption fee: \$100
 - Volunteer Fire Dept. or Ambulance Workers Real Property Exemption fee: \$100
 - Inspection/Certification by License Architect or Licensed Engineer Fee: \$150
 - Sr. Citizen (as per §330-5) or Qualified Disabled Person (as per §216-2) fee \$100
- Refuse Removal Affidavit (form enclosed)**



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RENTAL PERMIT APPLICATION

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Property Information:

Rental Property Address: _____

Tax Map Number: 0900- SECTION _____ - BLOCK _____ - LOT _____ - _____

Owner Information:

Property Owner Name: _____ Date of Birth: _____

Property Owner Legal Address:
(Cannot be the same as Rental Property Address)

Property Owner Mailing Address:

Telephone Number (s): Daytime _____ Evening _____ Emergency _____

Property Owner Email Address _____

❖ **If the rental dwelling unit intended for rental occupancy is owned by a corporation, partnership, limited liability company or other business entity, the name, address, telephone number of each owner, office, principal, shareholder, partner, and/or member of such business entity MUST be set forth below:**

Name: _____

Legal Address (No P.O. Boxes): _____

Mailing Address: _____

Title or position held with said corporation, partnership, limited liability company or business entity:

Telephone Number (s): Daytime _____ Evening _____ Emergency _____

If necessary attach additional pages to supply above information.



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Authorized Agent Information:

Name of Authorized Agent of dwelling unit, if any: _____

Address of Authorized Agent (no P.O. Boxes): _____

Mailing Address of Authorized Agent: _____

Telephone Number- Daytime: _____ Evening: _____ Emergency: _____

Managing Agent Information:

Name of Managing Agent of dwelling unit, if any: _____

Address of Managing Agent (no P.O. Boxes): _____

Mailing Address of Managing Agent: _____

Telephone Number- Daytime: _____ Evening: _____ Emergency: _____

Tenant Information:

Term of Lease: Beginning Date: _____ Ending Date: _____

One Family: Yes / No Two Family: Yes / No Townhouse: Yes / No

LIST OF ALL TENANTS:

Name: _____	Age: _____	Name: _____	Age: _____
Name: _____	Age: _____	Name: _____	Age: _____
Name: _____	Age: _____	Name: _____	Age: _____
Name: _____	Age: _____	Name: _____	Age: _____

If necessary, attach pages to supply above information.

Pursuant to the Town Code of the Town of Southampton, Chapter 270 (Rental Properties), a safety inspection by the Chief Building Inspector, his designee, or a Code Enforcement Officer is required. If the owner chooses not to have said inspection performed by one of the aforementioned officials, a certification from a licensed architect or a licensed professional engineer is required stating that the property which is the subject of the rental permit application is in compliance with all of the provisions of the Code of the Town of Southampton, the laws and sanitary and housing regulations of the County of Suffolk and by the laws adopted by the New York State Fire Prevention and Building Code Council.

I am requesting a fire safety inspection to be performed by a Code Enforcement Official from the Town of Southampton.

I am submitting a completed Town of Southampton certification form from a licensed architect or a licensed professional engineer.

DECLARATION: *Signature must be notarized and MUST be by the owner of the dwelling unit.*

STATE OF NEW YORK }

}

COUNTY OF SUFFOLK }

I _____ certify, under penalty of perjury, that the statements made in this application (including statements made in any accompanying papers) have been examined by me and the same are true and accurate. I have read copies of Chapter 270 (Rental Properties) of the Code of the Town of Southampton and the New York State Property Maintenance Code and agree to abide by the same. To the best of my knowledge there is no existing safety or health code violation of the code of the Town of Southampton or the New York State Uniform Fire Prevention and Building Code at the property which is the subject of this rental permit application. I do not have any knowledge of complaints from tenants or others regarding any existing code, safety or health violations at the property which is the subject of this rental permit application.

Property Owner's Name: _____

Owner's Original Signature: _____

Sworn to before me this ___ day of _____ 20 ___

Original Notary Public Signature and Original Notary Stamp



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RENTAL PERMIT APPLICATION

Rental Property Certification

Form is to be completed by a licensed architect or engineer.

Professional seal required.

Rental Property SCTM Number: _____

Rental Property Address: _____

Owner/ Name: _____

Number & Square footage of each bedroom as depicted in the attached floor plan:
(i.e. Bedroom #1- 100 sq. ft., Bedroom #2- 90 sq. ft., etc.)

Property Description (Include all improvements indicated on survey)

I certify that I have done a physical inspection of the subject rental property and find that this property fully complies with all of the provisions of the Code of the Town of Southampton, the Residential Code of New York State, the Building Code of New York State, the Plumbing Code of New York State, the Fuel Gas Code of New York State, and the Energy Conservation Construction Code of New York State.

Print Name and Title

Original Signature

Please place professional seal:



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SMOKE AND CARBON MONOXIDE ALARM AFFIDAVIT

STATE OF NEW YORK }
 }SS:
COUNTY OF SUFFOLK }

I, _____, being duly sworn, dispose and say:

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.

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 bedroom and in each story within a dwelling including basements and cellars.

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.

That I make this affidavit pursuant to Section 1193.2 of the New York State Fire Prevention and Building Code.

Owners Original Signature

Date

Sworn to before this _____
Day of _____, 20 _____.

Original Notary Public Signature and Original Notary Stamp



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RENTAL PERMIT APPLICATION
Refuse Removal Affidavit

1. A copy of a contract with a carter providing for weekly pick up, at a minimum of refuse and proof by letter from the carter indicating that full payment for the **ENTIRE** term of the rental has been made

OR

2. An affidavit from the owner acknowledging for refuse removal in a timely efficient manner (by signing this form before a notary this becomes an Affidavit)

I, _____, being duly sworn, depose and say: I am the owner of the said

Premises at: _____.

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

I make this affidavit pursuant to: Chapter 261-1 (B) (4) Property Maintenance

Owner's Original Signature _____

Sworn to before me this _____ Day of _____, 20 _____

Notary Public Original Signature and Notary Public Original Stamp

DESIGNATION OF AGENT FOR SERVICE

_____, residing at No. _____ Street, City
of _____ State _____ of
_____,
[or _____, a partnership, its principal office
located _____ at
_____,][or _____ a
corporation duly organized pursuant to the laws of the State of _____, with
a business office located at _____,]does hereby designate the Town Clerk
of the Town of Southampton with an office at No. 116 Hampton Road, Town of Southampton, County of
Suffolk, State of New York, as his [or her or its] agent for service pursuant to CPLR 318.

Dated: _____, 20 ____.

Property Owner Original Signature

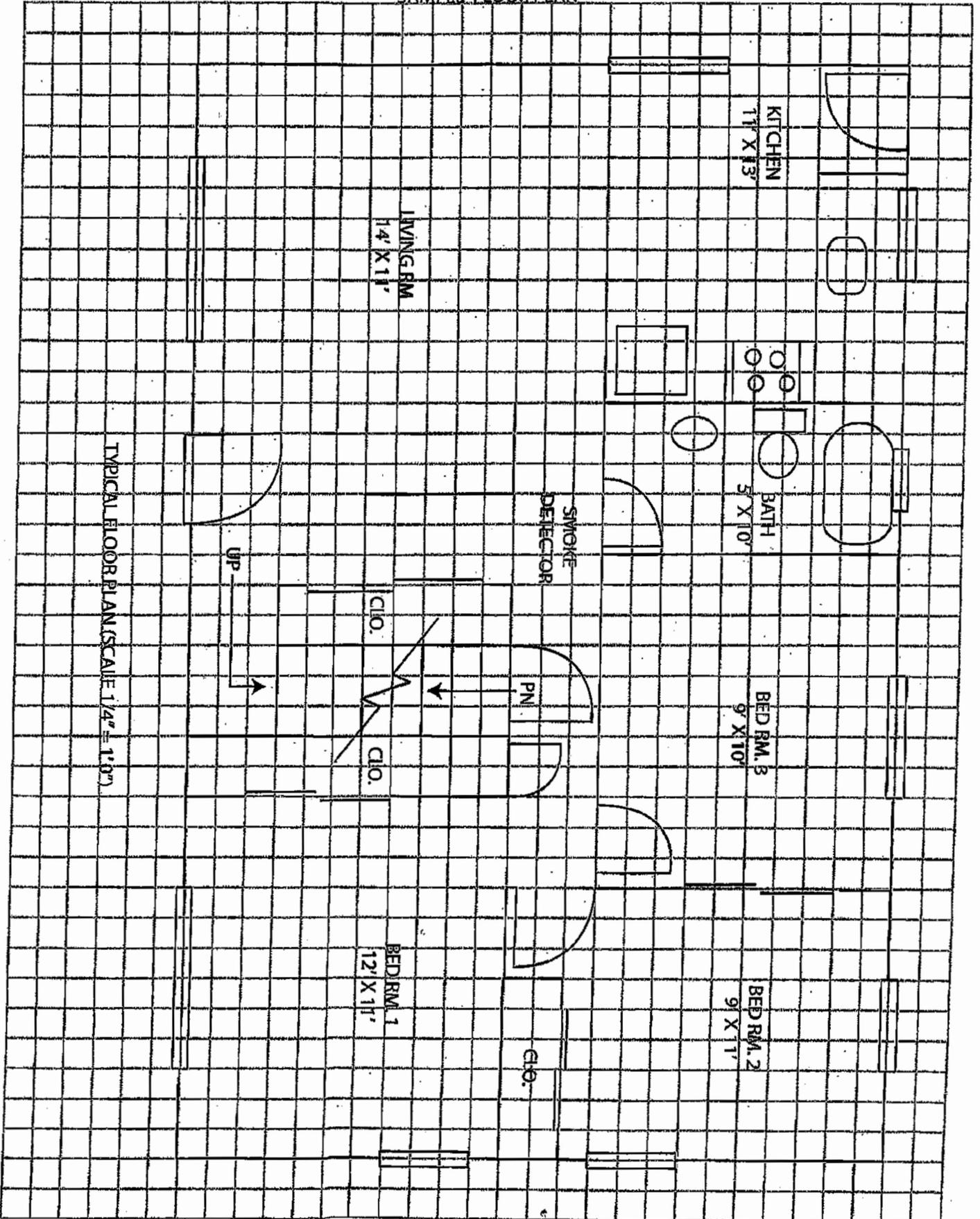
ACKNOWLEDGMENT

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

On the _____ day of _____, in the year 20 _____, before me, the undersigned personally
appeared _____, personally known to be or proved to me on the basis of
satisfactory evidence to be the individuals whose names are subscribed to the within instrument and
acknowledged to me that they executed the same in their capacities, and that by their signatures on the
instrument, the individuals or the person upon behalf of which the individuals acted, executed the
instrument.

ORIGINAL NOTARY
SIGNATURE AND ORIGINAL
NOTARY STAMP

SAMPLE FLOOR PLAN



TYPICAL FLOOR PLAN SCALE 1/4" = 1'-0"

