



Town of Harrison
Village of Harrison
Alfred F. Sulla, Jr. Municipal Building
Building Department
1 Heineman Place, Harrison, NY 10528
Phone: 914-670-3050
Fax: 914-835-7491



OPERATING PERMIT-PARKING GARAGE

DATE FILED: _____

APPLICATION NO: _____ RECEIPT NO. _____

PROPERTY ADDRESS:

Address: _____ Block _____ Lot _____

Owner's Name: _____ Address: _____

Phone: _____ Email: _____

ENGINEER:

Name: _____

Address: _____ Phone: _____

Email: _____

License No: _____

AFFIDAVIT OF OWNERSHIP

State of New York/ County of Westchester

_____ being duly sworn,

(Owner, Engineer, Applicant)

deposes and says that: _____ is the owner in fee of the premises to which this application applies; that he/she (the 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.

Sworn to before me this _____
day of _____ 20____.

_____ (Signature of Applicant)

_____ (Notary Public)

Must include the following:

[] Original signed and sealed condition assessment report, to include the following

1. Parking garage location and year constructed
2. Number of floors and/or spaces
3. Construction type

[] Operating permit fee of \$500.00
