



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



APPLICATION FOR CERTIFICATE OF OCCUPANCY

For Permits Issued Prior to July 2, 1999

Must be filled out by Owner/Applicant

Date	
Applicant Name	
Applicant Address	
Applicant Phone Number	
Owners Name	
Property Address	

AFFIDAVIT OF OWNERSHIP
(To be completed for all applications)

State of New York
County of Westchester

_____ being duly sworn,
(Owner, Agent)

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)

For Office Use Only

Permit Number	
Block - Lot	
Year structure was built	
Name of Owner on original permit	
Electrical permit required?	[] Yes [] No
Plumbing permit required?	[] Yes [] No
Survey required?	[] Yes [] No