Permit number_____

Town of Inlet

Inlet, New York 13360

APPLICATION FOR RENTAL OF NON-OWNER OCCUPIED RENTAL DWELLING IN THE R-1 DISTRICT

A non-refundable $125.00 fee shall accompany this application. The renewal fee is $75.00.

1. Address of Premises (include street/911 number): _____
   Tax Map I.D. Number: _____

2. Owner(s) Names(s): _____
   Permanent Mailing Address: _____
   Local Mailing Address: _____
   Telephone Numbers: (work): _____(home): _____

3. *If Property Owner(s) is a non-resident of the Town of Inlet:*
   Managing/Local Agent: _____
   Address: _____
   Telephone Numbers: (work):_____(Home): _____

4. ( ) Attach to this application a plot plan on minimum sheet size of 8 1/2" x 11", drawn to scale, showing all lot dimensions and property line set backs, driveways, parking areas, buildings, septic system showing septic tank location and capacity and leach field location.

5. Identify the number of actual bedrooms, not including living areas which may be used for sleeping, with the dimensions of each bedroom:
   Number of Bedrooms: _____
   Dimensions of Each Bedroom: _____ X _____
   _____ X _____
   _____ X _____
   _____ X _____
   _____ X _____

6. Date of Septic System Installation: _____
   Most recent date of Septic System Testing and Pumping: _____

7. ( ) Attach to this application water sample test results *taken within 30 days of this application.*

8. ( ) In the case of multiple owners, if any owner of the subject property is not signing this application, then attach a copy, or copies of executed power of attorney, which authorized the person(s) signing this application to act on behalf of those owners who are not signing this application.

By submission of this application, the property owner(s) authorize(s) the Zoning Enforcement Officer to enter upon the premises for purposes of inspection pertinent to this application and/or any permit granted thereto. This special use permit does not constitute authority to rent in violation of any federal, state or local law, rules or regulation. A permit from state or federal authorities, including, but not limited to, the Adirondack Park Agency may be required. It is the responsibility of the permit applicant(s) to ensure any other necessary compliance.

CERTIFICATION: I/We hereby certify that the rental dwelling is equipped with a functioning smoke-detector alarm system, installed in conformity with section 1060.1 NYS Building Code "outside each separate sleeping area and in each sleeping space on each floor level", and that the electrical, plumbing, and septic systems are in good working order. I/We hereby certify further that, by submission of this application, the Zoning Enforcement Officer is authorized to enter upon the premises for the purposes of inspection pertinent to this application and/or any permit granted thereto. I/We hereby certify further that I/We have read the above terms and conditions and reviewed this application and its accompanying documents, and that the contents of this application are true.

DATE: ____________________ **SIGNATURE:** ____________________________

PRINT NAME: ____________________________

DATE: ____________________ **SIGNATURE:** ____________________________

PRINT NAME: ____________________________

DATE: ____________________ **SIGNATURE:** ____________________________

PRINT NAME: ____________________________

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This space for official use only

CODE ENFORCEMENT OFFICER: ____
DATE: ______________________

PERMIT (GRANTED) (DENIED) Z.B.A. CHAIRMAN: ____________________________
DATE: ____________________

PERMIT EXPIRES: ______________________

( ) The following conditions are attached to granting this permit application:

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(Z. B. A. COPY) (ZONING OFFICE COPY) (TOWN CLERK COPY) (APPLICANT COPY)