



PERMIT APPLICATION

TOWN OF ISLIP CODE ENFORCEMENT DIVISION
FIRE PREVENTION BUREAU
24 NASSAU AVE. ISLIP NY 11751 (631)224-5458

FAX (631)224-5458

Tax map # 0500: _____

Rental address: _____

Hamlet: _____

Owner (Please Print)

Name: _____ telephone#: _____

Address: _____

Mailing address if different: _____

Condo Co-op Inspection date: _____

Requirements

Floor Plan: _____ Received: _____

Fee: **\$375** Receipt: _____ Expiration date: _____

I swear that this application is a true and complete statement.

Name: _____ (Print)

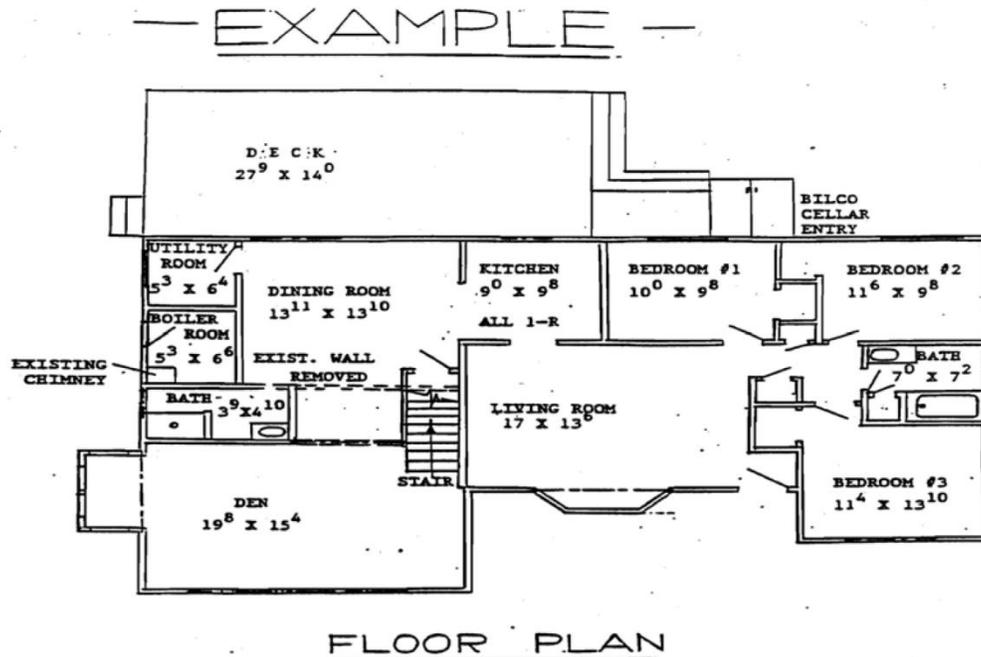
_____ (Signature of Property Owner)

Sworn to before me:

This _____ day of _____ 20_____

Rental Permit Requirements:

1. Application form completed, signed and notarized - Tax Map # can be found of your Tax Bill.
2. Address **MUST BE LEGAL ADDRESS**. PO Box can be used as Mailing Address.
3. **Telephone # MUST BE LISTED. THIS OFFICE WILL CALL TO SET UP APPOINTMENT.**
(All inspections are done MONDAY THRU FRIDAY, except holidays, 10:00 AM TO 3:00 PM.)
4. **COPY OF CERTIFICATE OF OCCUPANCY** or **COMPLIANCE** for **ALL STRUCTURES** on property.
5. Copy of the property survey.
6. Floor plan showing layout of your rental dwelling - labeling all rooms. Sample below.



New owners must submit copy of RECORDED DEED. If deed has not yet been recorded, a copy of the deed **AND** a notarized letter from the title company, or from your attorney on letterhead stating that this is the deed they took to be recorded.

FAXED COPIES OF ANY DOCUMENT REQUIRED ARE NOT ACCEPTABLE