



Building Department  
Town Hall, 363 Underhill Avenue, Yorktown Heights, NY 10598  
Tel. (914) 962-5722 ext. 233

### Application for Change of Ownership/ Occupancy/Use

Applicant: Complete all information lines, below, except those marked "Office use only"  
**Please provide floor plan of current and proposed space with application.**

#### SUBJECT PROPERTY INFORMATION

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Address/Location \_\_\_\_\_

#### OWNER INFORMATION

OWNER NAME: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

#### FORMER & PROPOSED TENANT INFORMATION

Former Tenant Name \_\_\_\_\_ Former Business Name \_\_\_\_\_

Proposed Tenant Name \_\_\_\_\_ Proposed Business Name \_\_\_\_\_

E-mail \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

#### USE & OCCUPANCY CLASSIFICATION

(REFER TO CHAPTER 3 OF NYSBC)

Assembly-A Business- B Educational- E Factory-F High Hazard-H

Institutional-I Mercantile-M Residential-R Storage- S Utility-U

Existing Use & Occupancy Classification: \_\_\_\_\_

Proposed Use & Occupancy Classification: \_\_\_\_\_

Existing Fire Sprinkler System: YES \_\_\_\_\_ NO \_\_\_\_\_

Hazardous Materials Stored on Site: YES \_\_\_\_\_ NO \_\_\_\_\_ If Yes, please attached list of materials and amounts to be stored

#### Detailed Description of Proposed Tenants Use:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME (Please print) \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

Office Use Only

Site Visit: \_\_\_\_\_ Building Permits Needed: Yes \_\_\_\_\_ NO \_\_\_\_\_

Fire Inspection: \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_  
BUILDING INSPECTOR, TOWN OF YORKTOWN