

Town of Clifton Park
Saratoga County, New York
518-371-6702 Fax 383-2668

APPLICATION FOR
TENANCY PERMIT

Date _____

Permit No. _____

SBL # _____

APPLICATION IS HEREBY MADE to the Department of Building and Development for the issuance of a permit pursuant to the New York State Fire Prevention and Building Code for a nonresidential tenancy per §73-3(B) of the Code of the Town of Clifton Park, as herein described. The Applicant agrees to comply with all applicable laws, ordinances, or regulations governing building and occupancy activities in the Town of Clifton Park and will also allow all inspectors to enter the premises for inspections. The Applicant also understands that within three business days after occupying the space, the occupant must request an inspection from the Department, and when such an inspection is passed a Certificate of Tenancy will be issued. Certificates of Tenancy for all nonresidential space must be displayed in a prominent location where an inspector on a routine inspection can observe them. This applies to both tenant certificates and owner certificates for the building shell and public areas.

| | |
|---|--|
| Applicant's Name _____ | Property Owner's Name _____ |
| Address _____ | Address _____ |
| _____ Zip _____ | _____ Zip _____ |
| Phone _____ OR _____ | Phone _____ OR _____ |
| Project Description _____ Change of Tenancy _____ | Business/Project Name _____ |
| Address of Tenancy _____ | Prior Occupant of Space (if known) _____ |
| Space or Suite # _____ | _____ |
| _____ | _____ |
| Clearly Print Name | Signature of Owner, Applicant or Agent |

TOTAL FEE DUE:

| | | | |
|---------|------------------|-------|----------|
| _____ | _____ | _____ | _____ |
| Check # | Amount Collected | Date | Initials |

The application of _____ dated _____ is hereby approved (disapproved) and permission granted (refused) for the occupancy of a building and/or accessory structure as set forth above.

Reason for refusal of permit: _____

Dated _____

Authorized Signature