



# TOWN OF EAST HAMPTON

300 Pantigo Place – Suite 105  
East Hampton, New York 11937-2684

Zoning Board of Appeals

Telephone (631) 324-8816  
Fax (631) 324-1476

## Zoning Board of Appeals

# Inspection Request Form

Name on Zoning Board Determination:

\_\_\_\_\_

Suffolk County Tax Map Number:

300-\_\_\_\_\_

Contact Information:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Property Street Address and Hamlet:

\_\_\_\_\_

Project Approval/Determination Date:

\_\_\_\_\_

Last Extension of Time: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_

- **Review and fulfill the required Conditions of Approval** as per a ZBA's Determination filed with the Town Clerk prior to submitting this inspection.
- **Attach a copy** of said determination to this form.

Please certify that said conditions of approval have been met for the purposes of obtaining a:

a) Building Permit:

b) Certificate of Occupancy:

### **REQUIRED**

When an on-site visit is required, an inspection fee in the form of a certified check or money order made payable to the Town of East Hampton in the amount of \$250.00.

When submitting for a Certificate of Occupancy, a **current as-built survey**.

Signature (Agent or Applicant) \_\_\_\_\_

Date: \_\_\_\_\_