

VILLAGE OF SAG HARBOR



Sandra Schroeder, Mayor
James L. Larocca, Trustee
Thomas C. Gardella, Trustee
Beth M. Kamper, Clerk-Administrator

PO Box 660
55 Main Street
Sag Harbor, NY 11963-0015
Tel: 631-725-0224 Fax: 631-725-4285

Ken O'Donnell, Deputy Mayor
Aidan Corish, Trustee
David J. Gilmartin, Jr., Village Attorney

AUTHORIZATION

The undersigned are the sole owners of the premises located at _____,
Sag Harbor, New York. SCTM #: _____ and hereby authorize
_____ to apply for and obtain:

Check as applicable:

- (a) Building Permit
- (b) Certificate of Occupancy
- (c) Zoning Variance
- (d) Subdivision Approval
- (e) Other _____
(Describe)

The undersigned hereby hold harmless and indemnify the Village of Sag Harbor, including its agencies, officials and employees, against any claim, cost or expense, including attorney`s fees, by reason of their reliance upon this authorization.

Date: _____

Sign Here: _____

Print Here: _____

Sign Here: _____

Print Here: _____

On the _____ day of _____, 20 ____ before me, the undersigned personally appeared _____, personally known to me or proved to me on the basis of satisfaction evidence to be the individual(s) whose name(s) is/are subscribed to within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on this instrument, the individual(s) acted, executed the instrument.

Signature of Notary