



Kathleen Mulcahy, Mayor  
James L. Larocca, Trustee  
Aidan Corish, Trustee  
Beth M. Kamper, Clerk-Administrator

**BUILDING DEPARTMENT**  
55 Main St., PO Box 660  
Sag Harbor, N.Y. 11963-0015  
Tel: 631-725-0224 Fax: 631-725-4852

Thomas C. Gardella, Deputy Mayor  
Robert Plumb, Trustee  
Denise R. Schoen, Village Attorney  
Rhonda L. Meserole, Village Treasurer

**OWNER'S 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) Certificate of Appropriateness
- (f) 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.

Dated: \_\_\_\_\_ Sign Here: \_\_\_\_\_  
Print Name: \_\_\_\_\_

Sign Here: \_\_\_\_\_  
Print Name: \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ before me, the undersigned personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory 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