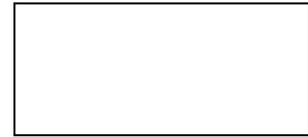




Town of Oyster Bay
Department of Planning and Development
Town Hall
Oyster Bay, New York 11771



TIMOTHY R. ZIKE
DEPUTY COMMISSIONER

DIANA S. AQUIAR
DEPUTY COMMISSIONER

AFFIDAVIT OF FOOTINGS, FOUNDATIONS AND EXISTING SUPPORT SYSTEMS

STATE OF NEW YORK

) ss:

COUNTY OF NASSAU )

(Architect/Engineer's Full Name)

Section: Block: Lot(s):

BEING DULY SWORN, deposes and says that he/she is a professional Engineer/Architect, and is duly licensed to practice said profession in the State of New York and maintain an office for the practice of same at:

In connection with the attached building permit application for a permit to construct a second story addition or new dwelling on an existing foundation or part of an existing foundation on the premises therein described, deponent certifies to the Department of Planning and Development of the Town of Oyster Bay the following:

- (a) Upon information and belief, the name and office and post office address of the owner in fee of the property which is subject of said application is:
(b) Said owner of said premises has authorized the construction/alteration of the proposed building mentioned in the attached application.
(c) Said owner has retained and authorized deponent to design the construction work mentioned in the attached application.
(d) Deponent stipulates that he/she has reviewed the application, including the plans for the proposed construction, and has reviewed, tested or otherwise satisfied himself/herself that the existing footings, foundation and existing support systems upon which the new dwelling or second story addition referenced in the attached application will be added, and certifies that the existing footings, foundation and existing support systems can support the proposed construction.
(e) The deponent shall notify, in writing, the Department of Planning and Development of the Town of Oyster Bay of any structural, construction, fire safety or other defect of which deponent may have knowledge which may be in violation of the New York State Building Code or present an imminent health or safety risk to the dwelling or its occupants.

The owner in fee of the premises in question has read this affidavit, knows the contents hereof, and has authorized the deponent to conduct any invasive or destructive testing that may be necessary to enable the deponent to make the statement in paragraph (d) and consents to same and authorizes the execution and delivery thereof.

Deponent and the owner are mindful that a Certificate of Occupancy will not be issued for such building, unless and until a final certification is filed with the Department of Planning and Development by deponent, certifying that to the best of his/her professional opinion, the construction proposed in the attached application when completed, was in general conformity with the New York State Building Code and the Town of Oyster Bay approved construction plans.

Deponent affixes his/her signature and professional seal hereto with knowledge that the Department of Planning and Development of the Town of Oyster Bay relies on the truth of the statements herein contained and is induced hereby in issuing the building permit as requested by the applicant.

Architect/Engineer Name:



Signature: Date:

Sworn to before me this day of, 20

Notary Public

Notary Stamp

I Certify that I have read the above statements, understand the content and consequences thereof:

Property Owner Signature and Date: