Town of Oyster Bay
Department of Planning and Development
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ELIZABETH L. MACCARONE
COMMISSIONER

TIMOTHY R. ZIKE
DEPUTY COMMISSIONER

Request for Waiver of Complete Application Requirement
FOR PROPOSED RESIDENTIAL WORK ONLY

Attached hereto is an Application for Building Permit(s) together with the attached required
amount of surveys showing proposed work with setback, three (3) sets of final building plans and
the required affidavits for rejection; i.e. Affidavit of Average Setback.

These are submitted only for the purpose of a REJECTION necessary to appear before the
Zoning Board of Appeals. If the variance is granted, I (we) will immediately file a complete
application which MUST include the following:

APPLICANT MUST INDICATE WHAT IS BEING WAIVED

1. Name and address of General Contractor(s) along with an original Certificate of
Worker’s Compensation with the Town of Oyster Bay as Certificate holder.

2. Contractor’s Nassau County Home Improvement License Number with expiration
date. (Residential only).

3. Application by a Town of Oyster Bay approved licensed and insured plumber
and/or electrician.


I (We) understand that the Division of Buildings will take no action with respect to this
application other than to reject it unless and until a complete application in acceptable form has
been submitted. After variance is approved from the Zoning Board of Appeals, the Division of
Plan Examination will not review the application until the above-waived documents are
submitted.

Date: ___________________________ Signature: ___________________________
(Applicant)

Office use only:
Date Approved: ____________________________ Superintendent of Buildings ________
(Rev. 02/22/2017)