

Town of Oyster Bay Department of Planning and Development

artment of Planning and Development Town Hall Oyster Bay, New York 11771 www.oysterbaytown.com

"PRELIMINARY" AFFIDAVIT OF FOOTINGS, FOUNDATIONS AND EXISTING SUPPORT SYSTEMS

	COUNTY OF NASSAU)	(.	Architect/Engineer's Full Name)	
	Section:	Block:	Lot(s):	
he/s	she is a professional Engineer/A New York and maintain an offi	Architect, and is dul	BEING DULY SWORN, deposes and says that ly licensed to practice said profession in the State of same at:	
dwe		art of an existing found	for a permit to construct a second story addition or new lation on the premises therein described, deponent certifies 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 applicate			
(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. Deponent understands that the Department of Planning and Development is relying on his/her certification, and agrees that based upon said certification the deponent, as architect for the proposed construction, is assuming the liability for said 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.			
depo		tructive testing that may	avit, knows the contents hereof, and has authorized the y be necessary to enable the deponent to make the statement tion and delivery thereof.	
unti the in g plar	l a final certification is filed with the best of his/her professional opinion eneral conformity with the New Yes. onent affixes his/her signature and p	the Department of Pla n, the construction proork State Building Construction	Occupancy will not be issued for such building, unless and anning and Development by deponent, certifying that to oposed in the attached application when completed, was ode and the Town of Oyster Bay approved construction with knowledge that the Department of Planning and	
	elopment of the Town of Oyster Bay ing the building permit as requested		he statements herein contained and is induced hereby in	
	hitect/Engineer Name:			
Sigi	nature:	В	Date:	
Swo	rn to before me this day o	of	, 20	
			Notary Stamp	

Property Owner Signature and Date: