

# TOWN OF WAPPINGER

ZONING ADMINISTRATOR  
Barbara Roberti X128



DEPUTY ZONING ADMINISTRATOR  
Judith Subrize X129

CODE ENFORCEMENT  
Susan Dao X126

FIRE INSPECTOR  
Howie Prager X127

**BUILDING DEPARTMENT**  
20 MIDDLEBUSH ROAD  
WAPPINGERS FALLS, NY 12590-0324  
(845) 297-6256  
FAX: (845) 297-0579

## TEMPORARY SALES – PROMOTIONAL EVENTS

### APPLICATION

Date: \_\_\_\_\_

Fee: \$ 100.00

**Applicant** \_\_\_\_\_

Name / Business: \_\_\_\_\_

Residential or Commercial: \_\_\_\_\_

Location: \_\_\_\_\_

Zone: \_\_\_\_\_ Acres: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Owner's Consent: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Proposed Dates: \_\_\_\_\_

Hours of operation: \_\_\_\_\_

Description of Event and associated activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If using the following, please indicate size and provide sketch of location.

Enclosed Tents: \_\_\_\_\_ (contact Fire Inspector)

Canopies: \_\_\_\_\_

Signs: \_\_\_\_\_ (50 square ft. max)

Provisions for extra parking: \_\_\_\_\_

HAS THIS BUSINESS/APPLICANT CONDUCTED A SMILAR EVENT THIS CALENDAR YEAR? \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## OWNER CONSENT FORM

BUILDING PERMIT # \_\_\_\_\_ APPLICATION # \_\_\_\_\_

SITE LOCATION: \_\_\_\_\_

GRID: # \_\_\_\_\_

Name of APPLICANT/OWNER: \_\_\_\_\_

### ~ CERTIFICATION ~

#### NOTICE TO APPLICANTS: 240-109 Certificate of Occupancy

It shall be unlawful for a building owner to use or permit the use of any building or premises or part thereof hereafter created, erected, changed, converted or enlarged, wholly or partly, in its use or structure *until a Certificate of Occupancy shall have been issued by the Building Inspector and the Zoning Administrator.*

*I, \_\_\_\_\_, owner of the land/site/building hereby give my permission for the Town of Wappinger to approve or deny the above application in accordance with local and state codes and ordinances. I understand that this permit will not be closed out unless all proper inspections are completed which can include the building inspector having access to the interior of my residence/business. If this permit is not issued a certificate before the expiration date it will remain as a violation on my property until it is closed out. After the expiration date a new application and the permit fee will have to be submitted/paid again in order to close out the permit. I understand, as the land/site/building owner, that I am ultimately responsible for the closure/completion of the work described on this permit. FAILURE TO COMPLY MAY RESULT IN COURT PROCEEDINGS.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Owner's Telephone Number

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Owner's Address

# **TEMPORARY SALES – PROMOTIONAL EVENTS PERMIT**

## **INSTRUCTIONS FOR APPLICATION/CHECKLIST:**

1. FILL OUT APPLICATION FORM COMPLETELY.
2. PROVIDE FAX# IN ADDITION TO PHONE # WITH CONTACT PERSON'S NAME.
3. SUBMIT OWNER'S CONSENT FORM.
4. DESCRIBE THE PROPOSED EVENT IN DETAIL:
  - HOURS OF OPERATION
  - NUMBER OF PERSONNEL INVOLVED
  - PROPOSED EXTRA PARKING LOCATIONS
  - OTHER RELEVANT INFORMATION
5. PROVIDE SKETCH OF THE ENTIRE PROPERTY SHOWING WHICH PORTION OF SAME IS TO BE UTILIZED FOR THE EVENT.
6. PLEASE BE ADVISED THAT NO STRUCTURE OR COMBINATION OF STRUCTURES, FOR THIS USE CAN EXCEED 1,000 SQ. FT. IN GROSS FLOOR AREA.
7. THE EVENT MUST NOT POSE ANY SAFETY CONCERNS. IF IN DOUBT, PLEASE CALL 845-297-6256