



INCORPORATED VILLAGE OF SHOREHAM
BUILDING DEPARTMENT
PO Box 389, Shoreham, New York 11786
(631) 821-0680 – Fax (631) 821-4102
www.shorehamvillage.org

MOTHER-DAUGHTER ACCESSORY APARTMENT APPLICATION
Chapter 14A of the Code of the Village of Shoreham

Physical Address: _____ SCTM# 207- _____ - _____ - _____

Owner-Occupants of Dwelling:

Full Name		Phone Number
Mailing Address		Email
Town or Village	State	Zip Code

The following documents must be provided with this application, in addition to completely filling out this application:

1. Deed or other title information to show ownership;
2. Proof of owner-occupancy is required; attached Affidavit of Residency & Familial Relationship (pp 2-3) with at least two (2) forms of proof of domicile or principal place of abode must be submitted, such as a driver's license, voters registration certificate, utility bills, or any other proof accepted by the Building Department;
3. Floor plans of principle dwelling and accessory apartment drawn to 1/4" scale with square footages shown;
4. Certificates of Occupancy for any and all structures on the subject property;
5. Representative survey showing **ALL** buildings/structures that exist on the property. No fewer than two off-street parking spaces for the dwelling must be provided plus at least one additional space for the proposed mother-daughter accessory apartment;
6. SCDHS stamped-approval for sanitary system with appropriate number of bedrooms or for out-structure (apartment over detached garage);
7. Filing Fee of \$350.00 (alterations may require separate building permit with associated fee).

APPLICATION IS HEREBY MADE to the Building Department as per Chapter 14A of the Code of the Village of Shoreham for a Mother-Daughter Accessory Apartment.

STATE OF NEW YORK)
COUNTY OF SUFFOLK) SS:

_____ being duly sworn and deposes and says that they are the above applicant named
(Name of Owner-Occupant of Dwelling)

They are the owner and occupant of the above mentioned property and that all statements contained in this application are true to the best of his/her knowledge and belief; and that they have read and fully familiarized themselves with Chapter 14A of the Code of the Village of Shoreham and will comply with all requirements contained therein.

Dated:
Sworn to before me this _____ Day
Of _____, 20 _____

Notary Public

Owner-Occupant Applicant



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MOTHER-DAUGHTER ACCESSORY APARTMENT APPLICATION
AFFIDAVIT OF RESIDENCY & FAMILIAL RELATIONSHIP

In the matter of the Application of (Full Name(s) of Owner-Occupant):

for Mother-Daughter Accessory Apartment Permit at:

pursuant to Chapter 14A of Code of the Village of Shoreham.

STATE OF NEW YORK)
COUNTY OF SUFFOLK) SS:

I, _____, being duly sworn, deposes and says:

1. I am the owner of the premises located at _____,
Shoreham, and more particularly described as Suffolk County Tax Map Number:
207– _____ – _____ – _____
2. I am familiar with the buildings and structures located on the subject premises as shown on the survey prepared by _____, dated _____
(copy attached hereto), and acknowledge the use of the premises is for a single family dwelling only, and that a valid Certificate of Occupancy exists for said structures (copy attached hereto).
3. I presently reside in the subject single-family dwelling and this dwelling is my domicile or principal place of abode. In support of this statement, I have attached the following items as a form of proof:

4. Upon receipt of a permit to add the accessory apartment to the subject single-family dwelling, I will reside in the subject single-family dwelling or in the accessory apartment, and the single-family dwelling or accessory apartment will be my domicile or principal place of abode.
5. The person or people who will be occupying the mother-daughter accessory apartment (or main dwelling in the case that I, as owner, will be living in the apartment) are related to me (family members). In support of this statement, the persons and relationship are described herein:

Relationship:

Relationship:

(continued on next page – full affidavit required for application and/or renewals)

6. I understand that the mother-daughter accessory apartment permit is only valid for a period not to exceed twenty-four (24) months and may be renewed, subject to the following conditions:
 - a. The apartment and dwelling are maintained in good standing and have not incurred unresolved violations of the Code of the Village of Shoreham
 - b. The necessary renewal application, with an updated version of this affidavit, is provided to the Building Department so that an inspection may be scheduled and satisfactorily completed by the Building Inspector.
 - c. The property/dwelling has not been sold or leased, or change in occupancy occurred that would extinguish the requisite familial relationship.
7. I make this affidavit knowing full well that the Village of Shoreham will rely upon the facts as stated herein to issue a permit for a Mother-Daughter Accessory Apartment pursuant to Chapter 14A of the Code of the Village of Shoreham, as same was adopted by Local Law Number 6 of 2017, and will adhere to the conditions and provisions of the applicable code.

Dated:

Sworn to before me this _____ Day

Of _____, 20_____

Notary Public

Owner-Occupant Applicant