



**Building Department**

Town Hall, 363 Underhill Avenue, Yorktown Heights, NY 10598  
Tel. (914) 962-5722 ext.233 Email: [zba@yorktownny.gov](mailto:zba@yorktownny.gov)

**Application for a Special Use Permit - Accessory Dwelling**

(Please legibly complete all lines on the application)

Office use only

Application #: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Received by: \_\_\_\_\_

A total of **6 copies** of the following are to be submitted to the Legal Assistant:

- Application Form
- Floor plan of the house, showing the location of the main units, accessory units, and parking plans
- Property Survey
- \*Please check with the Building Department to determine if you need to fill out an Environmental Assessment Form

**Application Fee: \$187.00 Certificate of Occupancy Fee: \$125.00 Total: \$312.00**

***All items (1-24) must be completed***

DATE: \_\_\_\_\_

- New Application or  Renewal (check one)  
 1a: If renewal: Expiration of previous grant \_\_\_\_\_  
 1b: If renewal: Have conditions changed since previous grant?  Yes  No (check one)  
 If yes, please specify \_\_\_\_\_
- Is the accessory dwelling unit  existing or  proposed (check one)
- Name of Applicant \_\_\_\_\_
- Address of Property \_\_\_\_\_
- Address of Applicant (if different than property) \_\_\_\_\_
- Tax Designation Section \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_
- Lot Area \_\_\_\_\_
- Portion of Dwelling occupied by owner:  
 Location in Dwelling \_\_\_\_\_  
 # of Rooms \_\_\_\_\_ # of Bedrooms \_\_\_\_\_  
 Square Feet \_\_\_\_\_
- Portion of Dwelling occupied by tenant:  
 Location in Dwelling \_\_\_\_\_  
 # of Rooms \_\_\_\_\_ # of Bedrooms \_\_\_\_\_  
 Square Feet \_\_\_\_\_
- Total Square Feet of Dwelling \_\_\_\_\_ Total # of Bedrooms \_\_\_\_\_

11. The accessory dwelling unit will be occupied by  Owner  Tenant (check one)
12. Number of Vehicles in use for entire residence \_\_\_\_\_
13. Number of Off Street spaces provided \_\_\_\_\_
14. Owner of Title (if different from applicant) \_\_\_\_\_
15. Date owner received title to the property \_\_\_\_\_
16. Date owner actually occupied the residence \_\_\_\_\_
17. Has owner continuously occupied the residence since date of initial occupancy?  
 Yes  No (check one)  
 If no, please explain \_\_\_\_\_

18. Has the house been enlarged by construction of an addition?  Yes  No (check one)  
 If yes, on what date was addition completed? \_\_\_\_\_
19. Does owner have any boarders living on the premises?  Yes  No (check one)
20. Telephone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_
21. Email \_\_\_\_\_

22. As applicant, I hereby acknowledge that:
- A. The request is for a permit for a period of up to three years.
  - B. The permit must be renewed at the end of such time.
  - C. The property will be maintained in a neat and orderly manner.
  - D. The peace and tranquility of the neighborhood will be insured.
  - E. If conditions change or the property is sold, this permit shall be null and void.
  - F. The permit is not transferable.
  - G. If the application is approved, the applicant agrees to comply with all the requirements of Section 300-38 of the Zoning Ordinance of the Town of Yorktown, and the New York State Fire Prevention and Building Code.
  - H. If I do not continue to comply with the requirements of the permit, it may be revoked.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner (If not applicant)

\_\_\_\_\_  
Date

**NOTICE:** Smoke detectors and Carbon monoxide detectors are now required in all homes. The detectors may be battery operated (in existing dwellings and apartments only) or direct-wired, and must be located as follows:

- **SMOKE DETECTORS:** 1 in every bedroom, 1 outside the bedrooms, and 1 on every floor level. This includes the accessory dwelling and the main dwelling.
- **CARBON MONOXIDE DETECTORS:** On the lowest floor level containing a bedroom in each dwelling unit (accessory and main dwelling).
- Please have the smoke detectors and carbon monoxide detectors installed and operational at the time of your accessory dwelling inspection.