



**PEEKSKILL**  
**NEW YORK**

**APPLICATION for CERTIFICATE OF OCCUPANCY**

**City of Peekskill, New York**  
**840 Main Street, 914-734-4140**  
**County of Westchester**

Permit No. \_\_\_\_\_

Fee \$ \_\_\_\_\_

Code: A2590

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_

Receipt No. \_\_\_\_\_

Date: / / 20 \_\_\_\_\_

Check No. \_\_\_\_\_

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Office Use Only

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

Occupancy Use: Check One: One Family:  Two Family:  Multi Family:  (Number of units)   
Commercial:  Other: \_\_\_\_\_

Applicant: \_\_\_\_\_

(Please print legibly)

Signature of Applicant

APPLICATION IS HEREBY MADE FOR ISSUANCE OF A CERTIFICATE OF OCCUPANCY FOR THE STRUCTURE OF THESE PREMISES. APPLICANT FURTHER STATES THAT THEY ARE THE: (Check Applicable)

REGISTERED ARCHITECT

LICENSED ENGINEER

BUILDER

OWNER

AGENT

Address: \_\_\_\_\_

Tel.#: \_\_\_\_\_

Tel.#: \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Email: \_\_\_\_\_

Description of Business:

(Use for Commercial Properties) \_\_\_\_\_

Mailing Address for Certificate to be sent:

Address \_\_\_\_\_

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

(Please print legibly)

Tel.#: \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Email: \_\_\_\_\_



## Certificate of Occupancy Requirements

1. **Property address** shall be **visible** from the street.
2. **Smoke alarms required at:** Inside of all bedrooms, outside of all bedrooms (within 15'-0") of bedroom door, at all levels if the structure, and shall be installed as per manufacturer's instructions.
3. **CO alarms required at:** Every room that contains a carbon monoxide source. (Gas stove, fireplace, heating units) All alarms shall be installed as per manufacturer's instructions and within 10' of all sleeping areas.
4. **64 Sq. ft.** (2-4'x8' sheets) of 5/8" Type X "Fire Rated" sheetrock shall be installed and the joints shall be taped, above any fuel burning appliances in the basement.
5. An **updated property survey** shall be obtained if a proper survey is not on file.
6. **Graspable handrails** shall be installed at all interior and exterior stairs that consist of 4 risers or greater.
7. **Multifamily residences** shall have fire extinguishers, wall mounted not less than 4 inches and no greater than 60 inches off the floor), at all exists, and serviced or purchased within 12 months. (min. size 2A-10BC)
8. **Exterior property areas and interior spaces** shall be in sanitary condition. Inspectors will not enter if the structure is determined to be unsanitary.
9. **SAFTEY DEFECTS OTHER THEN ITEMS LISTED ABOVE MAY BE OBSERVED DURING INSPECTION.**

### Smoke and Carbon Monoxide Alarm Diagram

