



**APPLICATION FOR CERTIFICATE OF COMPLIANCE
(for buildings of three families or more, or mixed-use structures)**

Property Location: _____

Owner's Name: _____ Telephone: _____

Owner's Address: _____
(street) (city) (state) (ZIP)

If owner lives outside of Onondaga County, Agent's name, address and telephone are required.

Agent's Name: _____ Telephone: _____

Agent's Address: _____
(street) (city) (state) (ZIP)

PROPERTY DESCRIPTION

Number of structures on lot _____ Type of Construction: Masonry _____ Wood Frame _____

Number of: Apartments _____ Sleeping Rooms _____ Commercial Units _____

Total units by stories: Auxiliary Buildings? (INDICATE WITH AN X) (1) Occupied as: _____

Cellar _____ 0. ___ NONE (2) Occupied as: _____

Basement _____ 1. ___ 1-CAR MASONRY GARAGE (3) Occupied as: _____

First Floor _____ 2. ___ 2-CAR MASONRY GARAGE (4) Occupied as: _____

Second Floor _____ 3. ___ 3 OR MORE CAR MASONRY GARAGE

Third Floor _____ 4. ___ 1-CAR WOOD FRAME GARAGE Attic: _____ (Y) _____ (N)

Fourth Floor _____ 5. ___ 2-CAR WOOD FRAME GARAGE

6. ___ 3 OR MORE CAR WOOD FRAME GARAGE

7. ___ CARRIAGE HOUSE Car Spaces: _____

8. ___ SHED

CHECK ONE OF THE FOLLOWING:

___ This application is being made pursuant to Property Conservation Code Section 27-15, A., in contemplation of a transfer of title to:

Purchaser's Name: _____ Address: _____

___ This application is being made pursuant to Property Conservation Code Section 27-15, B., as required every five (5) years for dwellings of three families or more or buildings of mixed occupancy.

Arrangements for making inspection may be obtained by calling:

Name: _____ Telephone: _____

I, the owner of subject property, hereby apply for a Certificate of Compliance and authorize the required inspections.

Date Signature of owner is required.

SEE REVERSE SIDE FOR FEE SCHEDULE

Receipt No. Issued _____ Quadrant _____ District _____ Accepted by _____

Comments: _____

APPLICATION FOR CERTIFICATE OF COMPLIANCE

Schedule of Fees:

Structures containing more than two units or any mixed-use structures	\$55.00 plus \$20.00 additional for each additional unit in excess of two
---	---

Checks should be made payable to COMMISSIONER OF FINANCE, and sent with this application to the Division of Code Enforcement, 201 E. Washington Street, Syracuse, New York 13202-1430.

MAIL CERTIFICATES, APPLICATIONS AND APPROPRIATE FEES TO:

Department of Neighborhood and Business Development
Division of Technical Services
City Hall Commons
201 E. Washington Street – Room 101
Syracuse, New York 13202-1430
(315) 448-8600