



CITY OF WHITE PLAINS
DEPARTMENT OF BUILDING

70 Church Street, White Plains, New York 10601

Phone: (914) 422 - 1269 * Fax: (914) 422 - 1471

http://www.cityofwhiteplains.com

ARCHITECT / ENGINEER'S AFFIDAVIT FOR FINAL INSPECTION:

This application must be printed or typewritten and sworn to by applicant.

To: Commissioner of Building Subject: Building Permit #
Address: SBL:
Work Description:

Application is hereby made for final inspection and a Certificate of Occupancy for the above indicated premises:

STATE OF NEW YORK }
COUNTY OF }

being duly sworn, desposes and says: that he /she resides at

(PRINT NAME OF ARCHITECT / ENGINEER)
in the City of , in the County of , in the State of

that he/she is a licensed (ARCHITECT / ENGINEER) in the State of New York , the license number being ; that he/she is

making application for final approval of all (Architectural, Structural or Mechanical) work performed as authorized by Building Permit #

issued for SBL# ; Deponent further says that he has made regular and periodic inspections of the construction work , including

critical construction components, and all controlled construction procedures and controlled materials as defined in the White Plains Supplemental Code and in its

referenced standards, for the purpose of determining that to the best of his knowledge and belief the structure(s) as erected complies with the filed drawings and

with the White Plains Supplemental Code and other applicable laws and regulations governing building construction except as to the specific variations duly

authorized under the provisions of the White Plains Supplemental code and as specifically noted in the verified report and cited in the Temporary Certificate of

Occupancy.

(SIGNATURE OF APPLICANT)

(PRINT NAME OF APPLICANT)

Sworn to before me, this day of , .

NOTARY PUBLIC