

MICHAEL P. GALIME, MAYOR  
CITY OF UTICA



DEPARTMENT OF CODE ENFORCEMENT  
1 KENNEDY PLAZA  
UTICA, NEW YORK 13502  
PHONE: (315) 792-0163  
FAX: (315) 792-0219

## REQUEST FOR CERTIFICATE OF OCCUPANCY

I, \_\_\_\_\_, am the owner/agent/other \_\_\_\_\_  
of the structure herein described, and I hereby request a Certificate of Occupancy for the described  
structure:

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

City of: \_\_\_\_\_

State: \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Occupancy: \_\_\_\_\_

Building Name and Address: \_\_\_\_\_

Date: \_\_\_\_\_ Applicants Name (print) \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

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### AFFIDAVIT

State of New York)

County of Oneida) ss.:

City of Utica)

Print Name: \_\_\_\_\_

Being duly sworn, deposes and says that he/she is the person who completed and signed the foregoing  
application, that the statements set forth in said application are true to his/her own knowledge, that he/she  
is authorized to make said application, that all work to be performed will comply in all respects to the  
Building Code for the City of Utica, New York, and all other applicable codes and ordinances.

Signature: \_\_\_\_\_

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

Notary Public/Commissioner of Deeds \_\_\_\_\_