## NOTICE OF INTENT TO CONSTRUCT, ENLARGE, OR CONVERT, FOR OCCUPANCY

### **INSTRUCTIONS**

The following are some of the types of properties (facilities) regulated by the State Sanitary Code that require a permit to operate from the local health department office:

Swimming pools Bathing beaches

Hotels Motels

Cabins or bungalow colonies Campgrounds
Travel trailer parks Children's camps
Migrant and other camps Mobile home parks

The following changes, modifications or construction are required to be reported to the local health department office:

1. A new building or facility to be built;

An existing building or facility to be enlarge or remodeled;

An existing property that is not a regulated facility is to be converted to a regulated facility, With or without remodeling;

The addition to or modification of any system serving the facility (examples: water supply system, sewage treatment system or fire alarm and detection system);

Any combination of the preceding.

2. Any changes that will or may increase water consumption or the volume of sewage requiring treatment, or both. In reporting such changes, list the number, if any of the new fixtures/facilities (examples: bedrooms, dining or seating capacities, toilet fixtures, lavatories, showers/bathtubs, dishwashing facilities, swimming pools and/or camping, travel trailer or mobile home sites).

For your information, the following are some of the **permits** that may required before you proceed:

Construction Permit (Uniform Fire Prevention and Building Code);

Certificate of Occupancy (local zoning);

State Pollution Discharge Elimination System (SPDES) – Article 17 of the State Environmental Conservation Law, if applicable.

This form must be returned to the Orange County Department of Health 30 days prior to the date of the proposed construction, enlargement, or conversion.

(Note: only 15 days notice is required for a temporary residence.)

This notice may have to be supplemented by such further information, plans or specifications as may be required by the Orange County Department of Health. Plans or specifications shall be approved by the Orange County Department of Health prior to commencement of any such construction, enlargement, development, improvement or conversion.

# NOTICE OF INTENT TO CONSTRUCT, ENLARGE, OR CONVERT, FOR OCCUPANCY OR USE A

### NEW YORK STATE DEPARTMENT OF HEALTH

**Bureau of Community Sanitation and Food Protection** 

(Facility Type)		

### Please read instructions on page 2 before completing form

To: Orange County Dep 124 Main St.	partment of Health			
Goshen, N.Y.	10924			
Sir/Madam: Notice is he	ereby as required by the		e, regarding the following	property;
County:		Town	, Village or City	
New	Renovation	Conversion	Are plans attached? _	Yes No
Detailed Location (e.g., road,	street, building number, distar	nce from well known poi	nt):	
The property is, or will be known	own as:			
The property is, or will be use	ed as:			
Name of Owner:		Addre	ess	
Name of Operator:		Addre	ess	
It is proposed to (describe in o	detail; use additional sheets if i	necessary):		
The following permits or appr	rovals for the proposed constru	action, enlargement or co	nversion have been applied for o	r received:
Name of the local code enforce	coment officer for facility:	Addre	agg:	
value of the local code enforce		Addic		
Signature:			Date:	
Owner	OperatorOthe	er connection with the pr	operty	
Mailing Address:			Telephone: ( )	
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