



INCORPORATED VILLAGE OF PORT JEFFERSON

Building & Planning Department

88 North Country Road, Port Jefferson, NY 11777

Ph (631) 473-4744 Fax (631) 473-2049

www.portjeff.com

Pursuant to Chapter 85 of the Code of the Incorporated Village of Port Jefferson, you are required to have a Special Operating license as follows:

§85-8 License required

- 1. No person shall conduct or engage in any of the following trades or occupations unless such person shall have obtained previously a special license therefore, for which the fee shall be as hereinafter specified:**
 - A. Running a restaurant, eating place or similar place for the sale for consumption on the premises of alcoholic beverages.**
 - B. Public exhibitions of any kind or places of amusement.**
 - C. Places for the giving of performance or entertainment of any kind, including dancing, singing or dramatic plays, or places in which mechanically operated amusement devices are maintained.**
 - D. Dance halls, cabarets or places in which dancing is an incidental use or activity.**

This license is effective for one year starting January 1st and expiring December 31st each year.

Please (re) apply for said license by completing the enclosed application and return it together with the required fee of \$250.00 + any additional fees for special licenses as reflected in §85-11 fee table payable to THE VILLAGE OF PORT JEFFERSON

Attention: Fire Marshal's Office



INCORPORATED VILLAGE OF PORT JEFFERSON

Bureau of Fire Prevention

88 North Country Road, Port Jefferson, NY 11777

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OPERATING LICENSE APPLICATION

Pursuant to Chapter 85 AND 139 of the Port Jefferson Village Code

Date: _____ Name of Business: _____

Business Address: _____ Tax Map No.: _____

Business Ph. #: _____ Business Owner Name: _____

Business Owner Mailing Address: _____

Business Owner Ph#: _____ Business Owner Email: _____

Principal Use: _____ Accessory Uses: _____

(See Below)

Premises ____ owned, ____ leased or ____ rented (choose one)

Building Owner Name: _____ Phone: _____

Mailing Address: _____

Days of Operation: ____ MONDAY ____ TUESDAY ____ WEDNESDAY ____ THURSDAY ____ FRIDAY ____ SATURDAY ____ SUNDAY

Hours of Operation: _____

Location of Dumpster: _____

Name of Refuse Removal Company: _____

Number of Weekly Pickups: _____

Have there been any changes or alterations to the business or building in the last twelve (12) months? ____ YES ____ NO

§85-11 Fees: The fee for the special licenses provided for shall be as follows:

Restaurant, standard: \$250.00 per year.

Restaurant, take-out: \$100.00 per year.

Places for the giving of performances, exhibitions or entertainment of any kind, including live music, dancing, singing, dramatic plays, dance halls, cabarets and/or places in which dancing is an incidental use or activity: \$200.00 per year.

Places in which manual or automatically operated electronic, mechanical or computerized amusement dives are maintained: \$100.00 per year.

If more than one of the above described activities takes place on the same premises, then a combined fee for all such activities shall be due.

Fee Amount: \$ _____ Fee Paid: _____



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OPERATING LICENSE APPLICATION

THIS APPLICATION AND ANY LICENSE / PERMIT ISSUED ARE PURSUANT TO THE PROVISIONS OF CHAPTERS 85 AND / OR 139 OF THE VILLAGE CODE

THIS LICENSE /PERMIT DOES NOT TAKE THE PLACE OF ANY LICENSE REQUIRED BY LAW AND IS NOT TRANSFERABLE. ANY CHANGE IN THE USE, OCCUPANCY OR OWNERSHIP OF PREMISES SHALL REQUIRE A NEW LICENSE / PERMIT.

PRINT NAME: _____

SIGN: _____ DATE: _____

I, (We), swear that the foregoing matters set forth herein are true.

Signature

Title

Date

I understand that false statements made herein are punishable as a Class A misdemeanor pursuant to §210.45 of the New York State Penal Law. _____ Read and acknowledged

**ADDENDUM TO APPLICATION FOR
BUSINESS OWNER**

Gross Square Footage of Occupancy Space:

Maximum Permitted Occupancy
(As determined by Fire Marshal)

I, the undersigned owner, understand that I (or my manager on duty) am responsible for ensuring that the occupancy of my business does not exceed that approved by the Fire Marshal (as listed above). I understand that it is a violation of the New York State Fire Prevention and Building Code to exceed this maximum permitted occupancy and that I am subject to legal action (and revocation of this license) if it is determined at any time that the occupancy of my business exceeds the approved limits.

PRINT NAME: _____

SIGN: _____

DATE: _____

NOTE: This Addendum must be completed for each and every assembly space/room within the business.

TO BE COMPLETED BY FIRE INSPECTOR

Occupancy: _____

Violations: _____

Effective Date: _____

Expiration Date: _____

Approved: _____

Date: _____