



VILLAGE OF OSSINING

16 Croton Avenue, Ossining, NY 10562

ANNUAL LANDLORD REGISTRATION

Chapter ____ of the Code of the Village of Ossining

Registration Type (check one): New [] Yearly Renewal [] Revision []

Property Street Address: _____

Tax Map Designation: _____ Zoning District: _____

Total Number of rental units at the property (including owner-occupied units): _____

Number of units per bedroom count: _____ 1-bedroom _____ 2-bedroom _____ 3-bedroom
_____ other (specify _____)

Section 1 – Property Owner Information

Name of Individual or Entity
Mailing Address (and Physical Address if P.O.)
Telephone Numbers (home, business, and mobile)
Email Address(es); Website

CHECK THE APPLICABLE BOX BELOW to identify the legal entity of the Property Owner:

- | | |
|--|---|
| <input type="checkbox"/> Sole Proprietor/Individual | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Business/General Partnership | <input type="checkbox"/> Corporation |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> S-Corporation |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Nonprofit, Other (specify) _____ |

Section 2 – Responsible Parties (if Property Owner is a Non-Individual Business Entity)

Individual Name and Title
Mailing Address (and Physical Address if P.O.)
Telephone Numbers (home, business, and mobile)
Email Address(es); Website

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Section 2 Cont'd. – Responsible Parties

Individual Name and Title
Mailing Address (and Physical Address if P.O.)
Telephone Numbers (home, business, and mobile)
Email Address(es); Website

Section 3 – Primary Local or On-Site Contact & Agent for Service of Process

This individual must be over the age of 21 residing in or doing business in Westchester County who is responsible for the management and care of the property and is authorized by owner to accept service of notices and service of process (if such owner resides or does business outside Westchester County).

Contact Name/Business Name
Mailing Address (and Physical Address if P.O.)
Telephone Numbers (home, business, and mobile)
Email Address(es); Website

NOTE: Registration is valid for 12 calendar months only. All New or Annual Renewal Registrations must be accompanied by the appropriate fee. This registration expires on the final day of the 12th month after the initial (or renewal) registration is received by the Village. No renewal notices will be sent. A complete, updated Landlord Registration form must be filed within 10 days of any change in the information contained herein. There is no fee for a change in information during the calendar year of a Registration which has been duly filed. Upon a transfer of property, a new owner must file an initial Registration within 30 days of the closing of title.

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CERTIFICATION/ACKNOWLEDGEMENT – Please read and sign below in presence of a notary

- ☐ I affirm that I am the Property Owner, or Responsible Party on behalf of the Business Entity Property Owner. I am fully authorized and responsible for the entries made, information provided and any attachments to this registration. I also affirm that I personally reviewed all of the information entered and any attachments to this registration, and that this registration is true, accurate, correct, and complete to the best of my knowledge.
- ☐ I affirm that I have fully complied with any and all applicable provisions of New York State law, local ordinances and/or regulations concerning the property, including but not limited to the NYS Uniform Building, Fire and Property Maintenance Code and/or the Code of the Village of Ossining. Further, I agree to comply with all applicable laws, codes and regulations that may be duly enacted in the future.
- ☐ I understand that false statements on this registration may be punishable as a violation under (i) the Penal Law of the State of New York pertaining to the making and filing of false instruments and (ii) the Village Code.

Signature

Title (if any)

Print Full Name

Date

State of New York)
) ss:
County of _____)

On the ____ day of _____ in the year 201__, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signatures on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public