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INCORPORATED VILLAGE OF LINDENHURST
430 SO. WELLWOOD AVENUE • LINDENHURST, NEW YORK 11757

State of New York

Telephone # _____

SS:

County of Suffolk

**AFFIDAVIT FOR RENEWAL OF
TWO FAMILY USE PERMIT
INC. VILLAGE OF LINDENHURST**

I, _____, being duly sworn, depose and say:

That I reside at _____
(STREET & NUMBER) (POST OFFICE)

That my Two Family Use permit for the premises at _____
_____, (expires) or (expired) on _____

_____, and I do hereby apply for renewal of said permit.

I do hereby attest and affirm that there has been no change in the information provided by me in my original application to the two Family Review Board of the Incorporated Village of Lindenhurst, except as follows:
(if no changes, please write NONE)

(Signature)

SWORN TO before me this

_____ day of _____, _____

(Notary Public)