



TOWN OF RIVERHEAD BUILDING DEPARTMENT

201 Howell Avenue
Riverhead, New York 11901
631-727-3200 x 213, 268, 266 or 283
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www.riverheadli.com

Leroy E. Barnes, Jr.
Building Department Administrator

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Building Inspector

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Building Inspector

Richard E. Gadzinski
Electrical Inspector

Mark Griffin
Electrical Inspector

BED AND BREAKFAST PERMIT REQUIREMENTS

1. Application for Building and Zoning Permit for use (signed and notarized);
2. Disclosure Affidavit (signed and notarized);
3. Annual Filing Fee of \$100.00;
4. Any interior or exterior renovations require a Building Permit and Certificate of Occupancy prior to issuing a Certificate of Compliance for Bed and Breakfast;
5. Covenant and Restrictions, if required, must be accepted by Town Attorney's Office; after approval and filing in County Clerk's and Town Clerk's Offices with a copy to this Department prior to issuing a Certificate of Compliance.
6. Inspections are required by the Building Department after the Bed and Breakfast Special Permit is granted by the Riverhead Town Board;
7. Annual Compliance Permits and Inspections are required.

Any questions, please feel free to call at (631) 727-3200 Ext. 266 or 283

§ 108-64.5 Bed-and-breakfast facilities. [Added 7-19-1994]

The Town Board, in its consideration of bed-and-breakfast facilities, shall incorporate the special permit requirements of § 108-3 of this chapterEN and shall require the following:

- A. The bed-and-breakfast use shall be an accessory use to the principal use in residential, commercial and agricultural zoning use districts.
- B. The use in all districts allowed under this section shall be exclusively owner-occupied single-family housing. "Owner-occupied single-family housing" shall mean your legal primary residence as defined in the federal and state tax laws, with proof of real estate ownership/title of said premises and property.
- C. Residential buildings incorporating bed-and-breakfast as an accessory use shall be a minimum of 2,000 square feet in living area.
- D. The length of stay within a bed-and-breakfast shall be a maximum duration of one week or seven consecutive days, and documentation verifying the length of stay of each guest, such as a registration ledger or receipts, will be made available to the Code Enforcement Officer or the Building Department upon request.
- E. Cooking facilities shall be restricted from use in guest bedrooms.
- F. Guest rooms may not be used as legal residences in order to enroll children into a school district.
- G. Upon the issuance of a special permit for bed-and-breakfast facilities, the Town Board shall require an annual inspection and compliance permit for bed-and-breakfast use upon real property to be issued by the Building Department for continued operation. The Town Building Department shall either approve or deny the reissuance of this compliance permit for the bed-and-breakfast use as a result of such inspection. Said compliance permit is not transferable with the real property. New property owners must obtain a new compliance permit pursuant to Subsection J of this special permit requirement being fulfilled, i.e., a new written permission from the property owner allowing the Town to conduct periodic inspections including the annual inspection shall be on file with the Building Department before issuance of the new compliance permit.
- H. All guest rooms must conform to the New York State Uniform Fire Prevention and Building Code requirements for habitable space.
- I. A site plan and detailed floor plan shall be required as a condition of this special permit.
- J. Written permission from the property owner allowing the Town to conduct periodic inspections including the annual inspection shall be on file with the Building Department before issuance of the compliance permit.
- K. An application for a compliance permit shall be filed with the Building Department each year with an annual filing fee of \$100. [Added 5-2-1995; amended 9-7-2005 by L.L. No. 48-2005EN]

SECTION AJ704

BED AND BREAKFAST DWELLINGS

AJ704.1 Scope. Owner-occupied one-family dwellings converted for use as bed and breakfast dwellings as defined in Section [AJ202](#) shall comply with this section.

AJ704.2 Occupancy. A residence converted to a bed and breakfast dwelling shall have no more than five sleeping rooms for accommodating up to 10 transient lodgers.

AJ704.3 Special conditions. A one-family dwelling is permitted to be converted for use as a bed and breakfast dwelling under the following conditions:

- 1. No sleeping rooms for transient use shall be located above the second story.
- 2. A fire-safety notice shall be affixed to the occupied side of the entrance door of each bedroom for transient use indicating:
 - 1. Means of egress;
 - 2. Location of means for transmitting fire alarms, if any; and
 - 3. Evacuation procedures to be followed in the event of a fire or smoke condition or upon activation of a fire or smoke-detecting or other alarm device.

AJ704.4 Means of egress. Means of egress shall include at least one of the following alternatives:

- 1. A limited area sprinkler system installed in conformance with NFPA 13D protecting all interior stairs serving as a means of egress;
- 2. An exterior stair conforming to the requirements of Sections [R314.1](#) and Section [R314.2](#) of this code, providing a second means of egress from all above grade stories or levels; or
- 3. An opening for emergency use conforming to the requirements of Section [R310](#) of this code within each bedroom for transient use, such opening to have a sill not more than 14 feet above level grade directly below and, as permanent equipment, a portable escape ladder that attaches securely to such sill. Such ladder shall be constructed with rigid rungs designed to stand off from the building wall, shall be capable of sustaining a minimum load of 1,000 pounds, and shall extend to and provide unobstructed egress to open space at grade.



APPLICATION FOR BUILDING & ZONING PERMIT

Town of Riverhead
Suffolk County, New York

Tax Map # _____
Section Block Lot

Application No. _____ Date ____/____/____ Permit No. _____ Date ____/____/____

Permit Expires: ____/____/____ Zoning District: _____ Disapproved Zoning: _____

Approved By: _____ Building Fee: \$ _____ Electrical Fee: \$ _____ Receipt: _____

All information BELOW to be filled out by APPLICANT: A PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK. This Application is to be submitted ACCOMPANIED by BUILDING PLANS DRAWN TO SCALE IN DUPLICATE, showing elevations, floor plans, run and size of joists, rafters, girders, details of footings and foundation, schematic of plumbing and electrical layouts and grade and species of lumber and quality of all material where applicable.

THE OWNER OF THE PROPERTY IS: (PLEASE PRINT CLEARLY)

First name Last name Business Name

Street No. Street Name Hamlet

Property Location of Proposed Work

() - () - () -
Phone Contact Fax Number Cellular Number

Street No. Street Name Town State Zip

Mailing Address (if different from property location):

The person responsible for the supervision of the work insofar as the Building Code and the Zoning Ordinance apply is: CONTACT PERSON (if different from owner)

First name Last name

Street No. Street Name Town State Zip

() - () - () -
Phone Number Fax Number Cellular Number

- Residential Est. of Value \$ _____
- Commercial Est. of Value \$ _____
- Accessory Structure _____ (describe)
- Addition
- Alteration
- Condo
- Deck
- Bulkhead / Dock
- Miscellaneous _____ (Describe)
- _____ Car Attached / Detached Garage
- Mobile/Modular Home
- Demolition
- Single Family Residence
- New Commercial Structure
- Swimming Pool
- Excavation/Land Clearing: Approx. _____ cubic yards to be removed.
- Agriculture Worker Housing
- Use Permit _____ (describe)

Pool Specifications (if applicable)

- In-Ground Above Ground Hot Tub / SPA
- Pool Heater Propane Natural Gas Oil Fired

APPLICATION FOR BUILDING & ZONING PERMIT

Tax Map # _____
Section Block Lot

Please Describe Project and/or Special Conditions:

ZONING SPECIFICATIONS. Fill in for new building, or addition to existing building or a change of occupancy. Indicate on the PLOT PLAN IN TRIPLICATE, street names, the location and size of the property, the location, size and setbacks of proposed buildings and the location of all existing building. Show proposed building(s) in dotted line and existing building(s) in solid line.

| | |
|--|--|
| Proposed building _____ sq.ft. | Second (2nd) Floor _____ sq.ft. |
| Size of proposed addition _____ sq.ft. | Garage _____ sq.ft. |
| Ground floor _____ sq.ft. | Height (from grade to ridge) _____ ft. |
| No#. of Bedrooms _____ | Impervious Surface _____ % |

| | | |
|---------------------|--------------|----------------|
| Electrician: | _____ | _____ |
| | Company Name | License # |
| _____ | _____ | _____ |
| Street No. | Street Name | Town State Zip |
| Plumber: | _____ | _____ |
| | Company Name | License # |
| _____ | _____ | _____ |
| Street No. | Street Name | Town State Zip |
| Home Imp: | _____ | _____ |
| | Company Name | License # |
| _____ | _____ | _____ |
| Street No. | Street Name | Town State Zip |

Note: All distances are net, as measured from property line to nearest part of building.
All work must be in compliance with the New York State Fire Prevention & Building Construction

AFFIDAVIT

Town of Riverhead)
 County of Suffolk) s.s.
 State of New York)

I swear that to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are true and complete statements of proposed work to be done on the described premises and that all provisions of the BUILDING CODE, THE ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work and inspections are authorized by the owner.

Sworn to me before this _____ day Signature _____
 of _____, _____ Owner's Agent, Architect

 Notary Public, Suffolk County, New York)

Read this document carefully.
You may consult your attorney before completing.

Disclosure Affidavit

STATE OF NEW YORK)

SS:

COUNTY OF SUFFOLK)

I, _____ an applicant for
the following relief: _____ and being duly
(Type of Permit)
sworn, deposes and says:

That I make and complete this affidavit under the penalty of perjury and swear to the truth thereof.

That I understand that this affidavit is required by Section 809 of the General Municipal Law and that a knowing failure to provide true information is punishable as a misdemeanor. Being so warned, I state:

That _____ is a State Officer, is an officer or employee of Riverhead
(Name of Relative)
Town, and:

- Check here if not applicable (i.e., you have no relative working for the Town of Riverhead.) and please sign below before a notary public.

That this person has an interest in the person, partnership or association requesting the above stated relief.

That for the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant where he, his spouse, or their brothers, sisters, parents, children, grandchildren or the spouse of any of them.

- a. is an applicant,
- b. is an officer, director, partner or employee of the applicant,
- c. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association, applicant, or
- d. is a party to an agreement with such an application, express or implied whereby he may receive any payment or other benefit, whether or not for services rendered, dependant or contingent upon the favorable approval of such application, petition or request.
- e. That ownership of less than five (5) per cent of the stock of a corporation whose stock is listed on the New York or American Stock Exchange shall not constitute an interest for the purpose of this section.

(Signature)

Sworn to before me this _____ day

of _____, 20_____

Notary Public



Authorization Letter from the Property Owner to the Town of Riverhead

SCTM: 0600/ _____

Premises: _____

Owner of Record: _____

Regarding Bed & Breakfast Inspection Authorization:

I am the owner of record for the above referenced property. I _____

Hereby authorize the Town of and the Building Department to conduct inspections as required by Chapter 108-64.5 of the Town of Riverhead Town Code.

Owner(s)

Sworn before me on this _____ day

Of _____, 20_____

(Notary Public)