

**STATEMENT OF REGISTRY  
OFFICE OF THE BUILDING INSPECTOR  
VILLAGE OF WALDEN**

**Due Annually by April 1<sup>st</sup> in accordance with Village of Walden Local Law 10 of 2014**

LOCATION OF DWELLING: Street and No. \_\_\_\_\_

OWNER/COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SECTION \_\_\_\_\_, BLOCK \_\_\_\_\_, LOT \_\_\_\_\_

PHONE, & CELL PHONE NO., \_\_\_\_\_

FACSIMILE NO., \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**Information for the Managing Agent or Operator of the Rental Property residing in Orange County (if applicable):**

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE, & CELL PHONE NO., \_\_\_\_\_

FACSIMILE NO., \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**If no changes are being made to any information on this form from prior year, please  
initial here: \_\_\_\_\_ NO CHANGE**

**FEES:**

NUMBER OF BUILDINGS ON SITE: \_\_\_\_\_  
(\$25 Fee per Building)

NUMBER OF UNITS CONTAINED INSIDE EACH BUILDING: \_\_\_\_\_  
(\$10 Fee per Unit)

TOTAL AMOUNT DUE: \_\_\_\_\_

Please remit to the Building Department along with appropriate payment made payable to: **Village of Walden**

**BUILDING INFORMATION.**

1. Type of Construction (frame, brick, stucco, etc.)\_\_\_\_\_.
2. Number and size of Apartments \_\_\_\_\_.
3. Number and size of Kitchens \_\_\_\_\_.
4. Number and size of Bathrooms \_\_\_\_\_.
5. Number and size of Bedrooms \_\_\_\_\_.
6. Number of Electric Services \_\_\_\_\_.
7. Type and Number of Heating Systems \_\_\_\_\_.
8. Number of Stories \_\_\_\_\_.
9. Have Any Variances Been Granted to Property (Yes/No) \_\_\_\_\_.
10. Number of Water Services \_\_\_\_\_.
11. Number of Accessory Buildings \_\_\_\_\_.

I CERTIFY THAT ALL INFORMATION CONTAINED IN THIS STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT THE WILLFUL MAKING OF FALSE STATEMENTS OF MATERIAL FACTS HEREIN WILL SUBJECT ME TO THE PROVISIONS OF LAW RELEVANT TO MAKING OF FILING OF FALSE INSTRUMENTS AND SHALL CONSTITUTE A VIOLATION OF CHAPTER 221.

\_\_\_\_\_  
OWNERS/AGENT SIGNATURE

STATE OF NEW YORK )  
COUNTY OF ORANGE )  
SS.:

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ of 20\_\_\_\_.

\_\_\_\_\_  
Notary Public  
State of New York

(Notary Seal)