

86 Main Street  
East Hampton NY 11937

**JERRY LARSEN**, Mayor



Phone 631.324.4150  
Fax 631.324.4189  
[www.easthamptonvillage.org](http://www.easthamptonvillage.org)

## VILLAGE OF EAST HAMPTON

*Office of the*  
**Administrator**

**Annual Landscaper License Application**  
**Chapter 185 -13-15 Licensed Occupations**  
**Chapter 196 1(11) Noise**

Business Name: \_\_\_\_\_

Principal Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Office Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **Required Documents Checklist**

**\*Please note: if any applications are submitted without all the required documents, Application will not be processed and will be returned to the mailing address above.**

\_\_\_\_\_ Certificate of Liability/Workers Compensation

- The certificate MUST name the Village of East Hampton as an additional insured as well as Certificate Holder. Workers Compensation Certificate/Exemption Form as Certificate Holder
- Certificate Box should read: Village of East Hampton  
86 Main Street,  
East Hampton NY 11937
- The description of operations box should read: "The Village of East Hampton is included as an additional insured"

\_\_\_\_\_ Copy of East Hampton Town Home Improvement License. \* **License #:** \_\_\_\_\_

\_\_\_\_\_ Yes \_\_\_\_\_ N/A - Copy of NYS DEC Certificate for Chemicals and Pesticides

\_\_\_\_\_ Yes \_\_\_\_\_ N/A - Copy of Certificate of Completions of Suffolk County Nitrogen Fertilizer Turf Management Course

\_\_\_\_\_ \$200 License Fee (per year) **plus** \$10 for each Vehicle (Cash acceptable)

- If a check is written, Make check payable to “Inc. Village of East Hampton”

\_\_\_\_\_ List of ALL vehicles used and/or associated with your business. \***Additional form is attached**

- **IF MORE** than 10 Vehicles, **PLEASE** type Vehicle information onto the form.
- **PLEASE** use provided form

\_\_\_\_\_ Copy of **ALL** Vehicle Registrations

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Printed Name**

**Date Signed:** \_\_\_\_\_

Any questions, please contact the following:

Emily Daniell

631-324-4150 ext. 130

edaniell@easthamptonvillage.org

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### **Chapter 196 1 (11) Noise**

I \_\_\_\_\_ verify that I read and understand and agree to comply with the Village's noise law with respect to the dates and times for permitted property maintenance and landscaping, the use of gas-powered leaf blowers and all other relevant Village Laws and Polices. I am responsible for all my employees understanding the applicable rules and regulations.

Business Owner Signature: \_\_\_\_\_





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### For Official Use Only

Insurance Supplied: Yes \_\_\_\_\_ No \_\_\_\_\_

NYS DEC Certificate: Yes \_\_\_\_\_ N/A \_\_\_\_\_

SC Nitrogen Fertilizer Turf Certificate: Yes \_\_\_\_\_ N/A \_\_\_\_\_

License Fee of \$200 Supplied: Yes \_\_\_\_\_ No \_\_\_\_\_

Number of Vehicles: \_\_\_\_\_

Vehicle Fee (\$10 per vehicle): \$ \_\_\_\_\_

Total (with License Fee): \$ \_\_\_\_\_

Date Paid: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

Approved By: \_\_\_\_\_

Date: \_\_\_\_\_

Village Administrator

License # \_\_\_\_\_