



Incorporated Village of Westhampton Beach

DEPARTMENT OF BUILDING AND ZONING

165 Mill Road, Westhampton Beach, New York 11978

(631) 288-3478 – Fax (631) 288-4332



SUMMER RENTAL APPLICATION

PART I: Location Information – Please print below

Property Location: _____ SCTM# 905 – _____ – _____ – _____

Unit / Suite (if applicable): _____

PART II: Property Owner Information – Please print below

Owner(s) of Record: _____

Phone: _____ Email: _____

Mailing Address of Owner(s): _____

City State Zip Code

Part III: Seasonal Use Dwelling Unit

I am requesting to register the summer rental described in Part I as a Seasonal Use Dwelling Unit as defined in NYS General

Obligations Law §7-108: ___ Yes ___ No (OPTIONAL) If yes, copy of lease is required for registration

Please be advised that property owners seeking to qualify as a seasonal use dwelling unit pursuant to New York State General Obligations Law §7-108(4) must submit a copy the lease which expressly provides, (i) the dwelling unit is registered as a seasonal use dwelling unit in the Village of Westhampton Beach, (ii) the occupancy of the tenant is only for seasonal use not to exceed one hundred twenty days or a shorter period provided for in the lease; (iii) and such tenant has a primary residence to return to, the address of which is expressly provided in the lease. Please be further advised that a seasonal use dwelling unit may not be rented as a seasonal use dwelling unit for more than one hundred twenty days during each calendar year Failure of an owner to comply with the requirements set forth in New York State General Obligations Law §7-108 will result in the revocation of the dwelling unit from the seasonal use dwelling unit registry created by Board of Trustees Resolution on April 17, 2022.

OWNER SIGNATURE: _____ Date: _____

PLEASE BE ADVISED THAT IN ORDER FOR RENTERS TO UTILIZE THE VILLAGE BEACH PARKING LOTS, OWNER MUST RELINQUISH ONE PARKING PASS

PART IV: Agent Information (Real Estate / Broker) – Please print below (If Applicable)

Name: _____

Phone: _____ Email: _____

Mailing Address: _____

City State Zip Code

PART V: Proposed Occupancy Details – Please print below

Number of Occupants (to be detailed on page 2): _____ Number of Bedrooms: _____

Dates of Lease (to be annexed hereto this application): _____ Duration of Occupancy: _____

Filing Fee: Less than 30 days: \$150 Thirty days or more: \$250

A filing fee of \$150.00 or \$250.00 payable to the Village of Westhampton Beach is required with submission of the Summer Rental Application. Applications will be received by the Building & Zoning Department Monday-Friday between 9:00 am and 4:00 pm.

In order for applications to be processed for the weekend, they must be submitted before 4:00 pm on the Thursday prior.

Garbage/rubbish collection method required; Copy of Contract or signed page 4 included: ___ Yes ___ No (REQUIRED)

Owner’s Summer Rental Attestation (pg 3) signed & notarized by owner: ___ Yes ___ No (REQUIRED IF APPLICABLE)

Copy of lease included (compensatory details may be redacted): ___ Yes ___ No (REQUIRED IF APPLICABLE)

Any violations of the Summer Rental Provisions during last rental season: ___ Yes ___ No

If yes, please explain: _____



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The NAME AND PERMANENT ADDRESS of each adult (18 and over) who will use the property is required and **MUST BE PRINTED AND LEGIBLE. APPLICATIONS THAT ARE NOT LEGIBLE WILL NOT BE ACCEPTED.**

This application will not be accepted for filing unless **SIGNED BY OWNER AND EACH ADULT TENANT.**

Tenants will NOT be issued a beach pass unless their name and signature appear on this application.

1) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____

2) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____

3) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____

4) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____

5) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____

6) NAME: _____ DATE OF BIRTH _____

ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

SIGNATURE: _____ LICENSE PLATE #: _____ STATE: _____



OWNER’S SUMMER RENTAL ATTESTATION

STATE OF _____)
) ss.:
 COUNTY OF _____)

I, (owner) _____

Residing at: _____

Being the owner of premises (Property Location) _____

Also known as Suffolk County Tax Map Number (SCTM #:) _____

Hereby attest that the premises is to be used as a summer rental, as is defined in §197-50 of the Code of the Village of Westhampton Beach. Said summer rental is subject to the terms and conditions of the annexed application, lease and shall comply with all the applicable provisions of the Village Code of the Village of Westhampton Beach, the Laws of the State of New York and any other municipality with jurisdiction. I further acknowledge that to qualify as a “seasonal use dwelling unit” as is defined in NYS General Obligations Law §7-108 the subject property, among the other requirements set forth in NYS General Obligations Law §7-108, shall not be rented for more than 120 days in the calendar year in accordance with the NYS General Obligations Law § 7-108(4)(c).

 Owner Signature

Sworn to before me this _____ day
 of _____, 20_____

 Notary Public



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SUMMER RENTAL GARBAGE ACKNOWLEDGEMENT

This form may be used as an alternative to providing proof of a formal garbage collection contract for the subject summer rental property.

Property Location: _____

Owner / Tenant Name: _____
 (circle one)

This letter states that I am applying for a permit from the Village of Westhampton Beach to rent the above property during the SUMMER SEASON OF 20____, and in conjunction with the rental agreement, I personally accept the responsibility for the maintenance and disposal of household garbage/rubbish for the duration of the rental. I understand that there is no municipal program for solid waste collection and that refuse containers must not be placed within 20' of the road right-of-way.

Signed: _____, Owner / Tenant (circle one)

Date: _____