



**Hazardous Materials – Use Permit Application**

**PERMITS REQUESTED: (USE OR STORAGE)**

**FEE: \$300 for the following permits – 2 year Permit**

- Hazardous Materials Storage/Use
- Flammable Liquid Spraying or Dipping Operations
- Welding and Cutting Operations
- Motor Vehicle Repair or Servicing (Indoors)
- Combustible Material or High Piled Storage
- Flammable Liquids
- Non-Flammable Compressed Gas
- Flammable Compressed Gas
- Lumber Storage
- Rubber Tires or Bulk Rubber
- Explosives/Blasting Agents
- Operations Producing Combustible Dust
- Flammable Liquid Processing
- Magnesium Operations
- Baking or Drying Operations (Industrial)

REQUIREMENTS: (Please provide the following)  
1) Copy of Certificate of Occupancy of Building Permit  
2) Floor Plan (to scale or include dimensions)

**PROPERTY OWNER: (PLEASE PRINT)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone#: \_\_\_\_\_

**PERMITTED PROPERTY LOCATION: (PLEASE PRINT)**

Business Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone#: \_\_\_\_\_

**AFFIRMATIONS**

\_\_\_\_\_  
*Print Name*  
\_\_\_\_\_  
*Signature of Property Owner*

*Notary Stamp and Signature*

*For Internal Use Only*

TM#500 \_\_\_\_\_

Receipt# \_\_\_\_\_

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

**BUSINESS OWNER INFORMATION: (PLEASE PRINT)**

Type of Organization:  Corporation  Partnership  
Corp Name: \_\_\_\_\_  
D/B/A: \_\_\_\_\_  
Officer Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone#: \_\_\_\_\_  
Partner #2 Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Phone#: \_\_\_\_\_

**Sole Proprietor**

Name: \_\_\_\_\_  
D/B/A: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone#: \_\_\_\_\_

**AFFIRMATIONS**

\_\_\_\_\_  
*Print Name*  
\_\_\_\_\_  
*Signature of Tenant*

*Notary Stamp and Signature*

I swear that this application is true and complete statement of the approved use of proposed use or process on the described locations or described persons or business. I understand that any false statements made herein are punishable as a class A misdemeanor pursuant to section 210.45 of the NYS penal law.

Important – Please be advised that by submitting the within application to the Town of Islip for the requested purpose, you, as the applicant, acknowledge and agree that a modification or addition may be made to your Certificate of Occupancy/Compliance. No further notice of resultant modification or addition shall be required.