



(631) 957-7500
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INCORPORATED VILLAGE OF LINDENHURST

430 SO. WELLWOOD AVENUE - LINDENHURST, NEW YORK 11757

AFFIDAVIT FOR RENEWAL OF SECOND KITCHEN FOR PERSONAL USE

FEE: \$25.00

Tax Map #: _____

I, _____, being duly sworn, depose and say: That I reside at
(PLEASE PRINT NAME)

_____, Lindenhurst, NY 11757; that my Village of Lindenhurst
(NUMBER AND STREET)

Second Kitchen for Personal Use Permit for the premises at _____,

Lindenhurst, NY 11757 (expires) or (expired) on _____ and that
I do hereby apply for renewal of said permit.

I do hereby attest and affirm that there has been no change in the information provided by me in
my original application to the Two-Family Review Board, Lindenhurst, except as follows:

(If NONE, write NONE)

Signature

Telephone Number

PUBLIC HEARING DUE: _____