

FILING APPLICATIONS:

Submit the completed form(s), supporting documents, and engineering plans to the Genesee County Health Department Environmental Health Unit, County Building #2, 3837 West Main Street Road, Batavia, New York 14020. The filing will be reviewed to ensure that the form has been correctly completed and that all required documentation is present. If all required documentation is not provided, you will be notified, and your filing will be deemed incomplete.

FACILITY OWNERSHIP (Type or print legibly in blue or black ink)

Name of person filing: _____

Relationship to business: _____

Name of business: _____

Trade name/DBA: _____

Address: # & Street: _____

City, State, Zip Code: _____

Business Telephone #: _____

Operating Permit #: _____

Food Service Permit #: _____

NYS Liquor License #: _____

ACKNOWLEDGEMENT AND CERTIFICATION:

I, _____, state that I am the _____ of
(Name) (Title)

_____, and have completed the above application for
(Name of Applicant Entity)

such entity for waiver to the NYS Clean Indoor Air Act, and the statements made therein and the documents submitted are truthful to the best of my knowledge.

I further acknowledge that I, and the persons I represent, are fully aware of the consequences, including the forfeitures and civil and criminal penalties, which may result if any statement and document provided is determined to be false.

Dated: _____ Signature: _____

Sworn to before me this ____ day of _____, 200 ____.

Notary Public