### **CITY OF BUFFALO - BUSINESS LICENSE APPLICATION**



65 Niagara Sq. City Hall Room 301 Buffalo, NY 14202 Phone (716) 851-4078 / (716) 851-6583 Fax (716) 851-4952

# REQUIRED COPIES of DOCUMENTATION with BUSINESS LICENSE APPLICATION

Copy of	current Government Issued Photo Identification			
	(i.e. Driver's License) (owner)			
Copy of	Two pieces of official mail proving residency of applicant			
Copy of	DBA (Business Certificate), Corporate or LLC Filing Receipt (If in business name) (List of Corporate Officers)			
Copy of	Exit Plan			
Complete	e Application Form			
Complete License Affidavit				
<b>Submit Required Documentation with Fee</b>				
Signed C	ouncil Notification Form			
If Not OV of City Ha	WNER OCCUPIED must file for SPECIAL USE PERMIT in Room 301 ll.			
reside wi telephon	to chapter 265 of the City of Buffalo Code if the owner does not thin the County of Erie (New York State) the name address and e number of contact/agent who resides in the County of Erie rk) must be provided.			
Agent in	nformation if owner doesn't live in Erie County (copy of cense)			

**POLICE RECOMMEND** but Not required if you have cameras to register them with "Buffalo Safe Cam" (**Note**: they can't watch your camera's its just information so that if something happens in your area they can contact you for the film) www.bpdny.org/Buffalo-SafeCam

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#### HOUSING COURT VIOLATION LICENSE APPLICATION AFFIDAVIT

I,	have submitted a License Application(s)
(print applicant name)	<del></del> - · · ·
with the City of Buffalo's Office of Licenses at:	
	(business location)
I am applying for the following license types:	·
By signing this affidavit, I do hereby attest to the far officers of this business entity have any existing and proceedings against the property listed above nor ar further understand that if, or any reason, the Office that the City of Buffalo reserves the right to deny the requested to operate this business entity.	d/or pending City of Buffalo Housing Court ny other properties owned in the City of Buffalo. I of Licenses finds this information to be inaccurate;
requested to operate and business entity.	
NEW LICENSE APPI	LICATION AFFIDAVIT
all the required licenses have been issued. I further Licenses deems my business establishment to have	perate my business establishment until said time that understand, that if for any reason, the Office of been open and/or operated prior to the issuance of all plation of city ordinances and said violation shall be
Subscribed and sworn before me this day of 20	Applicant Signature
Commissioner of Deeds in and for the City of Buffalo	Date

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#### All information on this form is public record

#### SHORT TERM RENTAL DWELLING

☐ Owner Occupied \$150.00 Rei	newal \$75.00	□ Non Owner Occupied \$250.	00 Renewal \$	150.00	
Rental Dwelling Address		, Buffalo NY			
Number, S	Street			IP	
Business Name:					
Owner Name:		Phone #			
Owner's Address					
(NO PO Boxes) N	umber, Street	City, town or Village	State	ZIP	
Owner's Date of Birth		E-Mail	_		
Agent (Erie County) Name:		Phone			
Agent Address					
(NO PO Boxes) N	umber, Street	City, town or Village	State	ZIP	
		Phone# no (If no please state which rooms are being			
Leased)	•			S	
☐ I, the owner, reside on the premise I am aware of the obligation to provide all owners, managers, or other principa restrictions and conditions to the licens business.	timely notice o	of any change in required informati ninal and/or civic responsibility for	ion, and I have the timely fulfi	illment of	
Subscribed an sworn to before me ais day of 20	•	Formation on this form is true, correct knowledge and belief.	, complete and o	current to	
Commissioner of Deeds	Signature of A	Applicant			
	Print Name		<u>-</u>		
	_				

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#### SAFETY ITEMS FOR SHORT TERM RENTAL DWELLINGS

- CARBON MONOXIDE AND SMOKE DETECTORS
- SAFE PATH OF TRAVEL (HALLWAYS, CORRIDORS, OPERABLE WINDOWS & DOORS)
- LEGAL OCCUPANCY (NO BASEMENTS, ATTICS, SUN PORCHES, GARAGES)
- NO PUBLIC ASSEMBLY (PARTY HOUSES NOT ALLOWED)
- PROPERLY FUNCTIONING MECHANICALS (HEAT, WATER, BATHROOMS)
- NO OVERCROWDING (SEE LINK)
   https://up.codes/viewer/new\_york/ipmc-2015/chapter/4/light-ventilation-and-occupancy-limitations#4
- DIAGRAM FOR EXITING POSTED BEHIND EACH BEDROOM DOOR
- EMERGENCY CONTACT NUMBERS REQUIRED (OWNER, AGENT, PORPERTY MANAGERS)

#### **APPLICANT NOTIFICATION**

ALL Applications/Applicants requiring Common Council Approval MUST HAVE THIS NOTIFICATION SIGNED BY COUNCIL

PERSONNEL FOR THE APPLICABLE DISTRICT COUNCILMEMBER LISED BELOW & RETURN THIS NOTIFICATION TO THE

OFFICE OF LICENSE prior to the application being considered for Approval.

# THIS IS NOT AN APPROVAL NOR DOES THIS DOCUMENT INFER THAT SAID APPROVALS WILL BE GRANTED

License Application Address	Buffalo, NY		
DELAWARE DISTRICT	JOEL P. FEROLETO	1405 CITY HALL	851-5155
ELLICOTT DISTRICT	DARIUS G. PRIDGEN	1315 CITY HALL	851-4980
FILLMORE DISTRICT	MITCHELL P. NOWAKOWSKI	1408 CITY HALL	851-4138
LOVEJOY DISTRICT	BRYAN BOLLMAN	1316A CITY HALL	851-5151
MASTEN DISTRICT	ULYSEES O. WINGO, SR.	1414 CITY HALL	851-5145
NIAGARA DISTRICT	DAVID A. RIVERA	1504 CITY HALL	851-5125
NORTH DISTRICT	JOSEPH GOLOMBEK JR.	1502 CITY HALL	851-5116
SOUTH DISTRICT	CHRISTOPHER P. SCANLON	1401 CITY HALL	851-5169
UNIVERSITY DISTRICT	RASHEED N. C. WYATT	1508 CITY HALL	851-5165
Council Personnel Signature	District		
Date			