			CO	DE TO:	110.000.404110
DATE RECEIVED:				SE FEE:	
		TION	PUBLIC NOTI		\$70.00
			CHECK NO	TOTAL:	
APPLICANT/AGENT	RECEIVED DY.	LEGAL OWNER			PPLICANT/AGENT)
NAME		NAME			
MAILING ADDRESS		MAILING ADDRESS			
CITY/STATE/ZIP		CITY/STATE/ZIP			
PHONE		PHONE			
EMAIL	EMAIL				
PROPERTY INFORMATION					
PHYSICAL ADDRESS or LEGAL DESCRIPTION:					
PARCEL ID:		ZONE:		OVERLAY:	
PARCELID.	20112.			.	
CURRENT USE OF PROPERTY:			LOT SIZE:		
PROPOSED USE OF PROPERTY (IF DIFFERENT):					
SEPTIC SYSTEM: Is there a septic system on the property? YES NO					
What is current or planned system? Municipal DEC-approved on-site system					
WATER SOURCE: Municipal Cistern/Roof Collection Well					
LEGAL ACCESS TO LOT(S) (Street Name):					
TYPE OF APPLICATION & BASE FEE					
□ 19.84 Zoning Change (\$100)					
□ 18.18 Record of Survey (\$50) (Note: No Public Notice Fee)					
□ 18.20 Minor Subdivision/18.24 Preliminary Plat (\$75 + \$10 per lot)					
18.24 Final Plat (\$25 per lot)					
SUBMITTALS: For Zoning Change, please submit letter stating the new zoning and explaining the need for the change.					
For Subdivision approvals, please submit a prepared plat map as required by borough code.					
SIGNATURE(S):					
I hereby affirm all of the information submitted with this application is true and correct to the best of my knowledge. I					
also affirm that I am the true and legal property owner(s) or authorized agent thereof for the property subject herein.					
Applicant(s): Date:					
Owner:					
Owner:			Date:		
Owner:			Date:		