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		TION	PUBLIC NOTIO	CE FEE:	\$70.00
		T		TOTAL:	
DATE RECEIVED:	RECEIVED BY:		CHECK NO.		
APPLICANT/AGENT			(IF DIFFERENT	THAN A	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:	
CURRENT USE OF PROPERTY:				LOT SIZE:	
PROPOSED USE OF PROPERTY (IF DIFFERENT):					
CURRENT OR PLANNED SEWER SYSTEM:  Municipal DEC-approved on-site system					
CURRENT OR PLANNED 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/18.19 Replat (\$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: Date:					
Owner:			Date:		
Owner:		Date:			