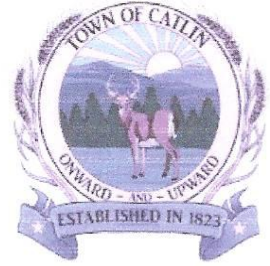


Town of Catlin
1448 Chambers Rd
Beaver Dams, New York 14812
607-739-5598



Application to the Zoning Board of Appeals

APPEAL # _____
DATE _____

This application, made on the _____ day of _____, is an appeal from the decision of the Code Enforcement Officer, to grant _____ or deny _____ a Permit based on the requirements set forth in the Town of Catlin Zoning Laws. Included with this application is a site plan of the property and the appropriate filing fee.

File Number: ZB _____ Zone: _____ Tax Map ID # _____

Applicant: _____ Phone(s) _____

Street Address: _____ Fax: _____

City: _____ State: _____ Zip: _____ Home: _____

Property Owner: _____ Phone(s) _____

Street Address: _____ Fax: _____

City: _____ State: _____ Zip: _____ Office: _____

Pursuant to the Provisions of _____, of the Town of Catlin Zoning Law, I (we) do hereby apply to the Zoning Board of Appeals for the Following:

LOCATION BY ADDRESS: _____

Project Description: _____

Action(s) Required:

_____ Area Variance, Minor

_____ Special Use Permit

_____ Area Variance, Major

_____ Temporary Use Permit

_____ Use Permit

_____ Rezoning Request

_____ Change of Non-Conforming Use

_____ Flood Zone Variance

Continue on Back

RESIDENTIAL GARAGE SHED POLE BARN CARPORT

Attached_____ Unattached_____ Dimensions: Structure_____ Lot Size_____

Indicate distance from: Side Lines_____ Rear Line_____ Street Line_____

ADDITIONS DECKS

To Side of House _____ Rear of House _____ To Front _____

Dimensions: Entire House_____ Proposed Addition _____ Lot Size _____

Indicate distance from: Side Lines _____ Rear Line _____ Street Line _____

NEW DWELLING

One Family_____ Two Family_____ Apartment_____ Other_____

Dimensions: Building _____ Lot Size _____

Indicate distance from: Side Lines _____ Rear Line _____ Street Line _____

COMMERCIAL AND INDUSTRIAL SIGNS

Building_____ Gas Station _____ Other _____

Dimensions: Building _____ Sign _____ Lot Size _____

Indicate distance from: Side Lines _____ Rear Line _____ Street Line _____

REASON FOR VARIANCE: _____

INDICATE HARDSHIP: _____

Fee: _____

I/We do hereby certify that the information contained herein and on the site plan submitted herewith is to the best of my/our knowledge true, accurate and correct.

Applicants Signature: _____ Date: _____

All Zoning Board of Appeals applications for an Area Variance or Use Variance must be submitted to the Planning Board per Article 12 Sub 6 of the Zoning Law.