VILLAGE of SACKETS HARBOR
112 No. Broad St., Sackets Harbor, NY 13685 (315) 646-3548

ZONING APPLICATION – GENERAL

*Applicant may be required to submit an escrow payment for review fees (e.g. legal, engineering, Village staff, etc.) established by the reviewing board or ZEO with its application. See Zoning Law section 7-6.

Date Received: ______________ Fee: _____ Paid: ______ Application Number: ___________

Name of Applicant*: ___________________________ Name of Owner: ___________________________

Mailing Address: ___________________________ Mailing Address: ___________________________

_________________________ ___________________________

Tel. No.: ___________ E-mail: ___________ Tel. No.: ___________ E-mail: ___________

*If applicant is not the owner, attach statement by owner of authority to submit this application.

I request a zoning permit for the following project or activity:

Property Address: ___________________________

Tax Map No.: ___________________________ Zoning District: _____RC _____VR _____VC _____HOD

Project Type: ___Construction ___Use ___Sub-division ___Planned Development District ___Demolition

Project Description: ___________________________

Submit the following documents and information:

___Construction – new, alteration, expansion; or sign
1. Plot plan, drawn to scale with accurate dimensions, showing the location of all parcel boundary lines, and all existing and proposed structures/signs on the lot; and distances between structures/signs and parcel lines
2. Building elevations for construction greater than 120 sq. ft.

___Use - new or change of use permitted without Site Plan Review or Special Permit
1. Explanation of the present use of the property, and the proposed use of the property;
2. Information and documents showing the proposed use is permitted without Site plan or special permit
3. Documents showing all licenses, certifications, etc. required by other agencies.

___Use and/or Area Variance required – application denied and applicant provided with Variance Application

___All Other Projects and Activities:
Submit the following supplemental application(s):

___Site Plan Application
___Special Permit Application
___Demolition Application
___Sub-division Application
___Planned Development District Application

___Use and/or Area Variance required

For Official Use
Action Taken

I, ___________________________, affirm that the information submitted with this application is true and accurate to the best of my knowledge.

Applicant Signature ___________________________ Date ___________________________