

Town of Franklinville, New York 11 Park Square P.O. Box 146 Franklinville New York 14737

TOWN OF FRANKLINVILLE

CODE ENFORCEMENT

APPLICATION FOR ZONING PERMIT

APPLICATION FOR ZONING FERMI	FOR OFFICIAL USE ONLY
Property Owner's Name	No
Property Owner's Address	Application Received By
Address for Permit (if different from above)	Application Fee \$ Date Paid
Address for Fermit (ii different from above)	PAID STAMP
Building zone in which property is located.	Action of Zoning Officer
Intended Use/Occupancy	Approved Denied
What is to be Constructed	Date Zoning Officer's Reason for Denial
Property Dimensions	
Building Dimensions	
Front Yard SetbackSide Yard (2) Side Yard (1)Side Yard (2) Distance to Rear Lot Line	
Height of Building Stories Parking Spaces	
A PLOT PLAN MUST be prepared and attached hereto. Show street name(s), indicating whether interior or corner lot. It must locate clearly and distinctly all building whether existing or proposed, and indicate all set-back dimensions from property lines. Include property description according to Town Tax Roll and Map.	
Applicant agrees to comply with provisions of the Zoning Law of the Town of Franklinville and of the New York State Uniform Fire Prevention and Building Codes.	Signature of Zoning Officer Date
Signature of Applicant Date	2