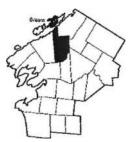
Zoning Officer Lee Shimel Phone 315-658-2057 Town Of Orleans Planning Board PO Box 103 20558 Sunrise Avenue LaFargeville, NY 13656 Phone 315-658-9950 Fax: 315-658-2513 www.townoforleans.com



<u>APPLICATION</u> FOR A SITE PLAN REVIEW

Applicant's Name:	
Address:	
Phone Number (s):	
Describe Location and Boundaries:	

Tax Map Parcel #: _____ State Use Requested:

♦Note: All applications must be accompanied by two (2) plot plans showing lot dimensions, structural dimensions, yard dimensions, and any other information required under Article VII of the Ordinance. Two (2) photos are also required showing the area involved. A C\$100) Application fee is required when this application is submitted.

♦♦PLEASE DRAW TO SCALE AND INCLUDE NORTH ARROW**

I certify that the above information has been provided and the above statements are true and correct.

Date: _____

Owner	Purcha	aser Under Contract	Contractor	
FOR TOWN USE ONLY				
Zoning District:		Hearing Results: Granted	Denied	
239m Review Needed?Yes	s_No	(a) Meets General Criteria? Yes	No	
Favorable?	Yes_No	(b) Meets Specific Requirements?	? Yes	No_N/A_
Hearing Date: Date Notice Published:		(°) Additional Conditions Require	ed? Yes	No_N/A

Chairman's Signature: _____ Date: _____