

**TOWN OF GREIG
APPLICATION FOR ZONING PERMIT**

The undersigned hereby makes application for a ZONING PERMIT, TEMPORARY PERMIT for the purposes of and on the site described herein, and agrees that such purposes shall be undertaken in accordance with all the applicable laws, ordinances and requirements of the Town of Greig, County of Lewis, and the State of New York.

Name and address of Applicant:

Name and address of Landowner:
(If other than applicant)

Phone No. _____

Phone No. _____

Description of purposes: (circle one) Zoning Permit Temporary Permit

TO: use, erect, alter, extend, move, occupy, (circle one)

a structure or land located at: _____ Town of Greig

for the following purpose(s) _____

Zoning District: WF1 WF2 RR1 RR2 Hamlet Use: Res _____ Com _____ Other _____

Tax Map Number: _____ - _____ - _____ Corner Lot () Interior Lot ()

Set backs from: Front lot line _____ ft. Rear lot line _____ ft. Left Side Line _____ ft.

Right Side line _____ ft. Height of Structure _____ ft.

Adirondack Park Agency Approval: Yes _____ No _____

Other Agency Approval: _____ Town Building Permit _____

Date: _____ - _____ - _____ Fee \$50.00

Signature Of Applicant or Authorized Agent

Received By: _____ Date _____ - _____ - _____

Approval () Disapproval () Date: _____ - _____ - _____ Signature _____
Code Enforcement Officer

Reasons for disapproval: Article _____ Section _____ Page _____ Town Zoning Law

Remarks/Conditions: _____

Application No. _____ Date _____ - _____ - _____

Permit No. _____ Date _____ - _____ - _____

USE THE SPACE BELOW OR ATTACH A SEPARATE SHEET TO SHOW THE LOCATION OF THE PROPOSED BUILDING(S) IN RELATION TO ALL ROADS PUBLIC OR PRIVATE. DISTANCE PROPOSED BUILDING IS FROM ALL BODIES OF WATER, THE DISTANCE BETWEEN BUILDINGS AND GIVE THE ROAD NAME AS WELL AS THE NAMES OF ALL ADJACENT LANDOWNERS. ALSO SHOW THE LOT WIDTH AND DEPTH, AND SHOW THE DISTANCE OF PROPOSED BUILDINGS(S) TO ALL PROPERTY LINES.

PLOT DIAGRAM

Name of adjacent land owner _____

