



APPLICATION TO THE PLANNING BOARD

FEE: \$40.00

Village of Potsdam,
2 Park Street, P.O. Box 5168
Potsdam, NY 13668
Phone: 315-265-7678 Fax: 315-265-6020

Application No.: _____ Application Date : _____

APPLICATION FOR: Special Use Permit permitted under Section _____ of the Ordinance.

Appeal of action of Building Inspector or Zoning Enforcement Officer:

Request relates to the following provisions of the Zoning Ordinance:

Property Owner's Name: _____ Phone: _____

Property Involved: _____ Tax Map #: _____

Mailing Address: _____

Agent or Officer: _____

Agent/Officer Address and Phone: _____

Purpose of Request: _____

St. Lawrence County Planning Board Review Required: _____ Yes _____ No

Local Planning Board Review: Special Use is _____ Approved _____ Refused

Reason for Refusal: _____

Date of Examination: _____ Planning Board Chairperson: _____

The owner should submit with this application supporting materials including plans, elevations, landscaping diagrams, traffic circulation diagrams, neighborhood land use maps and any other materilas that will assist the Board to understand the request.

Signature of Property Owner