

**APPLICATION FOR AMENDMENT TO FINAL PLAT  
Town of Ellicottville, New York**

For Town Use Only:

Application Fee \_\_\_\_\_ Rec'd by \_\_\_\_\_ on \_\_\_\_\_ (Date)

Project Number: \_\_\_\_\_ (from Final Plat application)

**Applicant Information**

Applicant's Name \_\_\_\_\_

Corporate or Trade name (if any) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_

e-mail address \_\_\_\_\_

Name of Project Engineer \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ email address \_\_\_\_\_

Name of Project Surveyor \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ email address \_\_\_\_\_

Other Project Contacts: Name and Title \_\_\_\_\_

Phone Number \_\_\_\_\_ email address \_\_\_\_\_

**Project Description**

Subdivision Name \_\_\_\_\_

Address (or location) \_\_\_\_\_

Real property tax map number(s) \_\_\_\_\_

Date of Final Plat Approval \_\_\_\_\_

Type of Amendment:

Lot Line Adjustment

Reversion to Acreage

Other ( Please Specify) \_\_\_\_\_

Describe the proposed amendment here, or attach additional page(s), if necessary:

**Attachments-** Attach a Plat, prepared by a surveyor licensed in the State of New York, and all other items listed in Section 2.6 of the Town of Ellicottville Subdivision Regulations, unless the Planning Board has waived one or more submittal requirements. At a minimum, one original and 10 copies of **all** plans, documents and other application materials are required.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date