

**APPLICATION FOR AMENDMENT TO SPECIAL USE PERMIT
Town of Ellicottville, New York**

For Town Use Only:

Application Fee _____ Rec'd by _____ on _____ (Date)

Project Number: _____ (from approved Special Use Permit)

Applicant Information

Applicant's Name _____

Corporate or Trade name (if any) _____

Mailing Address _____

Phone Number _____

e-mail address _____

Applicant's Engineer or Other Representative: Name _____

Address _____

Phone Number _____ e-mail address _____

Site Information

Address (or location) _____

Real property tax map number _____

Size of site _____ (in acres).

Owner(s) of record of the site _____

If applicant is not the property owner, **at the time of application**, a letter or other written documentation, stating that the applicant has the property owner's permission to make the application, signed by **all** property owners, shall be provided.

Project Description

Project name (if any) _____

Briefly describe the approved project and the proposed change here or attach additional page(s), if necessary:

Attachments- Attach a revised site plan and/or any other information that may be necessary to describe the proposed change to the property. At a minimum, one original and 10 copies of **all** plans, documents and other application materials are required. If referral to the Cattaraugus County Planning Board and/or a coordinated SEQRA review is required, additional copies will be required.

I have read and am familiar with Article 6 Special Use Permits, of the Town of Ellicottville Zoning Law

Signature of Applicant

Date