

APPLICATION FOR AMENDMENT TO ZONING LAW
Town of Ellicottville, New York

For Town Use Only:

Application Fee \$350 Rec'd by _____ on _____ (Date)

Project Number: _____

Applicant Information

Applicant's Name _____

Corporate or Trade name (if any) _____

Mailing Address _____

Phone Number _____

e-mail _____

Applicant's Engineer or Other Representative: Name _____

Address _____

Phone Number _____ e-mail address _____

Requested Change in the Zoning Law is:

Text Amendment

Zoning Map Amendment

Text Amendment

Section of Zoning Law for which change is requested: _____

Describe the change you are requesting and the reason for the change in the space below or in an attachment:

Zoning Map Amendment

Address of site(s) for which change is requested _____

Real property tax map number _____

Current Zoning Designation of the site _____ Proposed Zoning Designation of the site _____

Current use of the property _____

Proposed use of the property _____

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.

Describe the reason that you are requesting this change in the space below or in an attachment:

Attachments- Attach Part 1 of NYSEQRA Environmental Assessment Form, the application fee, and any supporting documentation.

Signature of Applicant

Date