

Town of Hastings Town Board

Special Use Permit Application

Date: _____

Application No. _____

Fee: _____

TO THE HASTINGS TOWN BOARD, OSWEGO COUNTY, NEW YORK:

I (We), the undersigned, do hereby respectfully make application that a determination be made by the Town Board on the following which is required by the Town of Hastings Zoning Law, in regard to Section _____.

1. Proposed Use (specify all uses): _____

2. Property Location: _____

3. The following are individuals, firms, or corporations owning property adjacent to both sides (to the rear and across the street from the proposed site):

North

East

South

West

4. Show on the site plan (by a licensed surveyor) all information required by the Town of Hastings Zoning Law.

5. Name, Address, and Phone Number (please print):

Signature of Applicant

6. Town of Hastings Planning Board Recommendation:

Planning Board Secretary

Date

Town of Hastings Town Board Decision:

Approved: _____

Date: _____

Resolution No. _____

Denied: _____

Denial Reason: _____

Notes: _____
