

**TOWN OF FRANKFORT
201 THIRD AVE
FRANKFORT, NEW YORK 13340**

**ZONING BOARD OF APPEALS
APPLICATION FOR A SPECIAL USE PERMIT**

I, _____ at _____
(Applicant) (Address)

Hereby request a Special Use Permit to the Town of Frankfort Zoning Board of Appeals.

Special Use Permit for _____

Zoning District Asking for Special Use Permit: _____

Existing Use of Property: _____

Location of Property and Tax Map Number: _____

Bordering Highways: _____

Name & Address of Property Owners Bordering said property:

North: _____ South: _____

East: _____ West: _____

Dimensions of Property: Frontage: _____ Depth: _____
(FT) (FT)

Total Area: _____ / _____
Acres / Square feet

Applicant must include a Plot Plan and Map with this application showing the boundaries and dimensions of the land, present structures on or within 500 feet of the land on both sides of the road, and proposed structures to be built on the land.

Applicant tenders \$250 fee to cover the cost of the Public Hearing. (Make check payable to the "Town of Frankfort" and enclose with application.)

I declare that to the best of my knowledge and belief, this application is true, correct and complete.

Date

Applicant's Signature