Village of Mount Morris

117 Main Street, Mount Morris, NY 14510
Building Zoning Permits/Code Enforcement
Phone (585)741-4021 codeenforcement@mountmorrisny.us

SPECIAL USE PERMIT
PLANNING BOARD APPLICATION

New ☐ Renewal ☐ Change To ☐ Date: _____

Applicant: _____ Owner (If Different): _____

Address: _____ Address: _____

_____ _____

Phone #: _____ Phone #: _____

Email: _____ Email: _____

Tax Map Number: _____ Address: _____

Zoning District: _____ _____

COMPLETE THIS SECTION FOR A NEW SPECIAL USE REQUEST

Request for special use permit for the following purpose: _____

_____

Describe alterations to the existing property, if any and include drawing, if applicable: _____

_____

Describe signage requested (if signage is requested a Zoning/Sign Permit will also need to be filled out): _____

_____

Describe parking and/or lighting if permitted and applicable: _____

_____

Hours of Operation (if applicable): _____

Is site plan review approval required in conjunction with this special use permit? Yes ☐ No ☐

COMPLETE THIS SECTION FOR YEARLY SPECIAL USE RENEWAL

Describe all alterations from the original Special Use permit granted to this property location, if any and include

_____

_____

drawing, if applicable
The undersigned applicant and owner, hereby request review by the Village/Town of Mount Morris Joint Planning Board for the identified special use permit:

By Signing this Application, you agree to charges for the Village of Mount Morris Engineering Firm to review your plans. There will/may be additional charges for the Village of Mount Morris Attorney and/or Code Enforcement Officer for reviewing the plans and specifications. These charges are in addition to the Application fee.

_____ Date: _____
Applicant's Signature or Authorized Representative

_____ Date: _____
Owner's Signature or Authorized Representative

Code Officer's yearly review for the special use renewal: _____

_____

_____

Is the property still in compliance with the Special Use requirements approved the Joint Planning Board?

Check Yes _____ No _____

Reasons for failure: _____

_____

This Application has been reviewed by:

_____ Date: _____
(Signature of Building/Code Officer)

Final Approval Granted by the Joint Planning Board: Date: _____
(Date Approved)

_____ Date: _____
(Signature of Joint Planning Board Chair) (Date)

COMPLETE Application

Received Date: _____

By: _____

CODE ENFORCEMENT USE ONLY:

(non-refundable) Fee Due:_____

Check: _____ Cash: _____

Receipt #: _____ Permit No: _____