

Town of Goshen
Building & Zoning Department
Town Hall, 41 Webster Avenue
Goshen, Orange County, New York 10924
Telephone: (845) 294-6430

APPLICANT:

Name: _____
Address: _____
Email: _____
Telephone: _____
Application Date: _____

*For billing purposes, please indicate where all bills should be sent.

Owner(s)

Name: _____
Address: _____
Email: _____
Telephone: _____

*All owners of the property shall be listed. If there are more than two owners, attach an additional sheet setting forth their contact information to this application.

General Information:

Project Name: _____
Location: _____

Tax Map Number: Section/Block/Lot _____ Section/Block/Lot _____

Total Acreage: _____ Zoning District(s) _____ Overlay District(s): _____

Consultants

Engineer: _____
Contact Information: _____ Email: _____
Surveyor: _____
Contact Information: _____ Email: _____
Architect: _____
Contact Information: _____ Email: _____
Attorney: _____
Contact Information: _____ Email: _____
Wetlands Delineator: _____
Contact Information: _____ Email: _____
Other: _____
Contact Information: _____ Email: _____

Has the Zoning Board of Appeals granted any variance or special permit concerning this property? _____

Specify: _____

Has the Town Board granted any special permit concerning this property? _____

Specify: _____

Type of Application:

Subdivision: Sketch Minor Major Number of Lots Proposed _____

Site Plan

Special Permit

Zoning Board of Appeals: Appeal Use Variance Area Variance Interpretation

*For ZBA Application, attach an additional sheet setting forth the specific relief requested.

For Submission

Ag. Data Statement* 1 hard copy & digitally of the current deed(s) Copies of application, plans & EAF as per B&Z Dept.

FOR OFFICE USE ONLY

Date Received: _____ Fees Paid: _____ Date Paid _____ Copies: _____

TOWN OF GOSHEN
BUILDING AND ZONING DEPARTMENT
TOWN HALL, 41 WEBSTER AVENUE
GOSHEN, ORANGE COUNTY, NEW YORK 10924
TELEPHONE: (845) 294-6430

OWNER'S ENDORSEMENT

STATE OF NEW YORK:

SS:

COUNTY OF ORANGE:

_____ being duly sworn, deposes and says that he/she resides at
_____ in the County of _____, State of
_____ and that he/she is (the owner in fee) or _____
(official title) of the _____ corporation which is the owner in fee of the premises
described in the foregoing application and that he/she has authorized _____ to make the
foregoing application for subdivision plat approval as described herein and that he/she agrees to be bound by all
statements, conditions and representations contained therein as if he/she had so petitioned.

Owner's Signature

Dated: _____

Sworn to before me this _____
day of _____, 20____

Notary Public

SITE INSPECTION AUTHORIZATION

I hereby give permission for the Town of Goshen's municipal agencies and their agents to come upon
and inspect these premises with respect to this application for _____.

Section: _____

Block: _____

Lot: _____

Date: _____

Applicant's Signature: _____