

Special Exception Parcel Permit Application

Incorporated Village of Westhampton Beach
Phone: (631) 288 - 1654 | Fax: (631) 288 - 4332
Email: clerk@westhamptonbeach.org



Date: _____

APPLICATION REQUIREMENTS:

In order to obtain a Special Exception Permit for a parcel, it is necessary to give the following information:

- (a) *Plot Plan*
(b) *Existing use statement including intended use*
(c) *Special Exception Fee: \$400*

PART I: OWNER INFO - Please type or Print below

Suffolk County Tax Map Number: 0905- _____ - _____ - _____

Property Location: _____

Owner(s) of Record: [Full Name] _____

Home Phone #: () - Work #: () - Cell #: () -

Email Address: _____

Mailing Address of Owner(s): _____

City, State, Zip Code: _____

If Corporate Officer, Business Name and Title: _____

Business Address: _____

City, State, Zip Code: _____

Business Phone #: _____

PART II: REQUEST

The applicant requests a Special Exception Permit for the above described property under the provisions of _____ of the Zoning Ordinance for the following purposes:

PART III: REASON FOR REQUEST

The applicant alleges that the approval of said permit would be in harmony with the intent and purpose of said Zoning Ordinance and that the proposed use conforms to the standards prescribed therefore in said Ordinance and would not be detrimental to property or persons in the neighborhood for the following reasons: _____

PART IV: SPECIAL FEATURES

In addition to meeting the standards prescribed by the Zoning Ordinance, the applicant will provide

in order that the public convenience and welfare be further served.

PART IV: OWNER AUTHORIZATION

STATE OF NEW YORK)

) ss.:

COUNTY OF SUFFOLK)

OWNER SIGNATURE

Sworn to before me this _____ Day of _____, 20_____.

NOTARY PUBLIC