TOWN OF HARTLAND

ZONING OFFICE
8942 RIDGE RD. GASPORT, N.Y. 14067-9705

PHONE 735-7778
FAX 735-3061

Type of Permit:

_____ Single Owner/Operator _____ Special Use

_____ ECHO _____ Other _____

Pursuant to Article IV, Title I, Section 411 of the Town of Hartland Zoning Ordinance, I:

_____ The undersigned, are owners of the
Property Owner

Property located at _____

New York _____
Zip Code

Telephone _____

The above property is described as follows:

Parcel ID Number _____

Acreage _____

The undersigned requests a permit for the following:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

The sketch submitted with this application fairly represents the configuration of the property and correctly states the dimensions, including the setbacks and side lines. We understand that any misstatement of fact herein, or non conformance to the terms of this permit, will result in the revocation of this permit which might be granted pursuant to this application.

_____
Signature

_____
Signature

For Official Use Only

Permit Granted _____

Permit Denied _____

Date _____

Permit Fee _____ Date Paid _____

Public Hearing Fee _____ Date Paid _____

Engineering Fee _____ Date Paid _____