APPLICATION FOR SPECIAL PERMIT

CITY OF GLOVERSVILLE, NY PLANNING BOARD

Date	οf	Applicati	ion:
Name	of	Proposed	Development:

DESCRIPTION OF PROPOSED USE:

Name of Proposed Development:		
Applicant Name: Address:	Plans Prepared By: Name: Address:	
Telephone:	Telephone:	
<pre>Owner (if different) Name: Address:</pre>		
Telephone:		
OWNERSHIP INTENTIONS, (i.e., purch	ase options)	
LOCATION AND CURRENT LAND USE OF S undeveloped, etc.)	ITE (agriculture, c	commercial,
TAX MAP DESCRIPTION: Section	Block	Lot
TOTAL SITE AREA (square feet or ac	res:	
ANTICIPATED CONSTRUCTION TIME:		
WILL DEVELOPMENT BE STAGED?		
CURRENT ZONING CLASSIFICATION:		