APPLICATION FOR SPECIAL PERMIT

CITY OF GLOVERSVILLE, NY PLANNING BOARD

Date	of	Applicati	ion:
Name	of	Proposed	Development:

DESCRIPTION OF PROPOSED USE:

Plans Prepared By: Name: Address:				
Telephone:				
ase options)				
ITE (agriculture, co	mmercial,			
Block	Lot			
TOTAL SITE AREA (square feet or acres:				
	Name: Address: Telephone: Telephone: ITE (agriculture, constant)			