		Application No.
FEE:		
DATE:		
	APPLICATION I	FOR ZONING PERMIT
Office of the Zoning Officer Schroon Lake, NY 12870		
The undersigned her this application and describe	reby makes application for a plud herein:	permit to perform the work shown on the drawing accompanying
Owner	Address	Phone
		Phone
Intended Use: ( ) Resid	lence ( ) Commercial	Business ( ) Industrial
Structure will be as follows:		Front Yard Setback
Height (stories	& feet)	
Number of Family Units		Rear Yard Setback
Dimensions of Lot		Percentage of lot covered
Project Location:	* }	
		·
Building Zone:		Estimated Construction Cost:
Deed Restrictions:		
Note: Town Building Permit	s are required for all construc	etion.
STATE OF NEW YORK )		
COUNTY OF ESSEX )	SS:	
		ally sworn, disposes and says:
that he/she (the		ner in fee of the premises to which this application applies; make this application; and that the statements contained
	the best of his/her knowledge	
Sworn to me this		
Sworn to me this		

Signature of Applicant

Notary Public