



# TOWN OF CARTHAGE

## ZONING/SUBDIVISION REQUEST FORM

DATE: \_\_\_\_\_

### **TYPE OF REQUEST:**

_____ Zoning Compliance	_____ Zoning Text Amendment
_____ Special Use Permit	_____ Site Plan Approval
_____ Subdivision Plat Approval	_____ Rezoning
_____ Variance	_____ Other: _____

### **APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

### **PROPERTY OWNER INFORMATION: (If different)**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

### **SITE INFORMATION: (if applicable)**

Address: \_\_\_\_\_

LRK/Parcel ID#: \_\_\_\_\_

Current Zoning District: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Lot Size: \_\_\_\_\_ # of Proposed Parcels: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Business Name: \_\_\_\_\_

Proposed Utilities:

\_\_\_\_\_ Public Water \_\_\_\_\_ Private Well \_\_\_\_\_ Public Sewer \_\_\_\_\_ Private Septic

**PROPOSED BUILDING:**

Square footage: \_\_\_\_\_ Height: \_\_\_\_\_

### Required Setbacks:

Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side: \_\_\_\_\_ Corner: \_\_\_\_\_

Number of Parking Spaces: \_\_\_\_\_ Handicapped Space: \_\_\_\_\_ Yes \_\_\_\_\_ No

**EXISTING BUILDING:**

Square footage: \_\_\_\_\_ Height: \_\_\_\_\_

### Current Setbacks:

Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side: \_\_\_\_\_ Corner: \_\_\_\_\_

Number of Parking Spaces: \_\_\_\_\_ Handicapped Space: \_\_\_\_\_ Yes \_\_\_\_\_ No

**EXPLANATION OF REQUEST:** (Please be as specific as possible)

[illegible]

**PLEASE LIST THE NAMES OF ADJOINING PROPERTY OWNERS:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

All application forms must be accompanied by a map/site plan drawn by a professional engineer, a registered land surveyor or by the County mapping office and turned in by the 15th of the month in order to be considered by the appropriate Town Board (s) the following month. An applicant must pay the application fee before a request is put on the agenda.

The applicant agrees to comply with all of the applicable laws regulating the described work and operate or build according to the Town and state regulations in effect at the time of the issuance of the certificate or permit. Where applicable, a building permit or sign permit will be required.

APPLICANT SIGNATURE:

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PROPERTY OWNER SIGNATURE:

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DATE APPLICATION & MATERIALS SUBMITTED: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

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Approved:    Yes {    } No {    }

Date Approved: \_\_\_\_\_

Official Signature: \_\_\_\_\_

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