

TOWN OF GREECE TOWN BOARD APPLICATION FORM

1 Vince Tofany Boulevard Greece, New York 14612-5016 www.greeceny.gov

> Phone: (585) 723-2345 Fax: (585) 723-2442

APPLICANT:			PROPERTY O	DWNER (If same as A	Applicant, print "SA	ME"):
	(Name)					
(Applicant's Street Address)			(Name)			
(City)	(State)	(ZIP Code)	(Street Address)			
(Phone)	(Fax)		(City))	(State)	(ZIP Code)
	- "					
Note: An application made by the agent	E-mail) of an owner must be accomp	anied by a nonreturnable copy (of an instrument that co	nvevs the right to represent i	the owner(s) of the prop	erty for which an annlication is made
Such instrument may be in the form of po					the owner(s) or the prop	сту тог үчнен ан аррксасын 13 таас.
CONTACT PERSON:	(Name)		(Phone)	(Fax)	(F-ı	mail)
DD OJECT I OCATION	(Name)		(Filone)	, ,	,	,
PROJECT LOCATION:	Street Address, or Distance ar	nd Direction to Nearest Intersect	tion)	_ CURRENI ZO	NING:	
TAX MAP NUMBER(S):						
APPLICATION FOR: [] F				Acres:		
		(Proposed Zoning)				
[] Special Use Permit for			[] Waiver o	f Special Use Permit f	or	
		(Priof P	inting of Dunganal)			
		(Brief De	escription of Proposal)			
DISCLOSURE: As defined by interest in an application when applicant; (2) is an officer, directly of a partnership or association wany payment or other benefit u	he or she, his or her ctor, partner or employ which is applying; or (4)	spouse, or their brother yee of the applicant; (3) is a partner to an agre	rs, sisters, parents legally or beneficement with such a	, children, grandchild ially owns or controls	ren, or the spouse stock of a corpora	of any of them: (1) is the te applicant or is a member
Pursuant to the provisions of No	ew York State General	Municipal Law, Section	809 (Please check one	of the following):		
[] There is (are) no person(s) who have an interest	in this application.				
[] There is (are) person(s) w and address(es) of such per						
SWORN STATEMENT: As approperty, I do hereby swear that	it all statements, descr	iptions, and signatures		ed and sworn to befor		
appearing on this form and acco	ompanying materials a	re true and accurate to	This	day of		, 20

DO NOT WRITE IN THIS SPACE (For Office Use Only)

(Notary Public)

(Owner or Applicant — PLEASE PRINT)

(SIGNATURE of Owner or Applicant)

the best of my knowledge.