

TOWN OF GOSHEN
TOWN BOARD
TOWN HALL, 41 WEBSTER AVENUE
GOSHEN, ORANGE COUNTY, NEW YORK 10924
TELEPHONE: (845) 294-6430

APPLICANT:

Name: _____
Address: _____
Telephone: _____
Date of Application: _____

* For billing purposes, please indicate where all bills should be sent.

OWNER(S)*:

Name: _____
Address: _____
Telephone: _____

* **All** owners of the property shall be listed. If there are more than two owners, attach an additional sheet setting forth their contact information to this application.

GENERAL INFORMATION:

Project Name: _____
Location: _____

Tax Map Number: _____ Section: _____ Section: _____
Block: _____ Block: _____
Lot: _____ Lot: _____
Total Acreage: _____ Zoning District(s): _____ Overlay District(s): _____

CONSULTANTS

Engineer: _____
Contact Information: _____
Surveyor: _____
Contact Information: _____
Architect: _____
Contact Information: _____
Attorney: _____
Contact Information: _____
Wetlands Delineator: _____
Contact Information: _____
Other: _____
Contact Information: _____

Has the Zoning Board of Appeals granted any variance or special permit concerning this property? _____
Specify: _____

Has the Planning Board granted any approvals concerning this property? _____
Specify: _____

Has an application been submitted to the Planning Board relating to this Town Board application? _____
Specify: _____

TYPE OF APPLICATION:

Special Permit
 Other
Specify: _____

FOR OFFICE USE ONLY

Date Received: _____ Fees Paid: _____ Date Paid: _____ Copies: _____

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OWNER'S ENDORSEMENT

STATE OF NEW YORK:

SS:

COUNTY OF ORANGE:

_____ being duly sworn, deposes and says that he/she resides at _____ in the County of _____, State of _____ and that he/she is (the owner in fee) or _____ (official title) of the _____ corporation which is the owner in fee of the premises described in the foregoing application and that he/she has authorized _____ to make the foregoing application for special permit approval from the Town Board as described herein and that he/she agrees to be bound by all statements, conditions and representations contained therein as if he/she had so petitioned.

Owner's Signature

Notary Public

SITE INSPECTION AUTHORIZATION

I hereby give permission for the Town of Goshen's municipal agencies and their agents to come upon and inspect these premises with respect to this application for _____.

Section: _____

Block: _____

Lot: _____

Date: _____

Applicant's Signature: _____