



TOWN OF PERINTON

1350 TURK HILL ROAD ■ FAIRPORT, NEW YORK 14450-8796
(585) 223-0770 ■ Fax: (585) 223-3629 ■ www.perinton.org

NUMBER _____ FEE _____

MEETING DATE _____

APPLICATION FORM -APPEALS

Instructions to Applicant

1. Submit **original** and **11 (eleven)** copies of this application. Type or print.
2. A non-refundable fee of \$ _____ shall accompany this application. See Fee Schedule at <http://www.perinton.org/Boards/Feeschedule>
3. **Twelve (12)** copies of a tape location or instrument survey map should be attached to the application.
4. **Twelve (12)** copies of a floor plan, **when necessary**, drawn to scale, should be attached to the application.
5. Zoning Boards of Appeal in New York State are bound by court cases which have clearly set forth the factors to be considered by the Board in reviewing your request. These may seem unnecessary in many instances but by handling all cases under the same guidelines, you are assured equitable treatment by the Board.

1. APPLICANT

Name _____ Phone _____

Street& Number _____ Post Office _____ Zip _____

Interest in Property: Owner _____ Lessee _____ Other _____

2. OWNER (if other than above)

Name _____ Phone _____

Street& Number _____ Post Office _____ Zip _____

3. ATTORNEY (if represented)

Name _____ Phone _____

Street& Number _____ Post Office _____ Zip _____

4. INTEREST: Does any officer or employee of the State of New York, County of Monroe, or Town of Perinton have any interest in the owner/applicant or the subject property?

Yes _____ No _____

If yes, who? Name _____ Address _____

INTEREST (explain): _____



5. **LOCATION:** Street Address or Legal Description (subdivision and lot number)

6. **SIZE OF PARCEL:** _____

7. **PRESENT USE OF PROPERTY:** _____

8. **ZONING DISTRICT:** _____ **TAX ACCOUNT #** _____

9. **DESCRIBE SPECIFICALLY THE NATURE OF YOUR REQUEST:** _____

10. **DESCRIBE THE LOCATION, USE AND SIZE OF STRUCTURES AND OTHER LAND USES WITHIN 100 FEET OF THE BOUNDARIES OF THE SUBJECT PROPERTY:** _____

I certify that the information supplied on this application is complete and accurate, and that the project described, if approved, will be completed and the premises used as stipulated in this request.

Signature of Applicant: _____ Date: _____

Owner (If other than above)

I have read and familiarized myself with the contents of this application and do hereby consent to its submission and processing.

Signature of owner: _____ Date: _____