



TOWN OF PAWLING

The Pride of the Harlem Valley

Town Hall
154 Charles Colman Blvd.
Pawling, NY 12564

jdaley@pawling.org

JoAnne Daley
Planning/Zoning/Environmental

Tel (845) 855-0959

Application for a Special Use Permit

Note: This application shall conform in all respects to the Zoning Ordinance of the Town of Pawling.

1) Name and application of Record Owner (s):

Phone # _____ Fax# _____

Cell # _____

If Corporation, name and address: _____

Phone # _____ Fax # _____

2) Name and address of Applicant: _____

Phone # _____ Fax # _____

Cell# _____

3) Relationship of Applicant to Owner: (Same, Engineer, Contract Vendee, etc.)

Phone # _____ Fax # _____

4) Location of property:

A) Street (s) _____

B) Nearest cross street (s) _____

C) Tax map designation 134089- _____

D) This property is situated in the _____ zone.

E) This property contains _____ acres.

5) Statement of liens, mortgages or other encumbrances (use separate sheet if required). If none, so state:

6) Deed or deeds recorded in County Clerk's office: _____

Date: _____ Deed Book: _____ Page: _____

7) Are there any deed restrictions that apply to, or easements that exist over the act of land?

8) I (we) own or have an interest in abutting property (use separate sheet if necessary). If none, so state.

9) Name, address and license number of Architect, Engineer, Landscape Architect or Surveyor:

Phone # _____ Fax # _____

10) Present use of property: If vacant, so state.

11) Purposed use of property: (Use separate sheet if necessary).

12) Does the proposed use (s) comply with the Zoning Ordinance? (If no, state variations sought).

13) Was a Zoning Board of Appeals variance granted? () Yes () No

Date Granted: _____

Variance Granted: _____

14) Does applicant intend to construct his entire project at one time, or develop same in sections?

15) Does the driveway exceed a 10% grade?

16) Is the property within 500 feet from any municipal boundary or any existing or proposed County or state park or other recreation area, or the right-of-way of any existing or proposed county or State road or highway, stream or drainage channel, or an existing or proposed boundary of any County or state owned land on which a public building or institution is located?

___ Yes

___ No

The undersigned applicant hereby requests consideration and processing of approvals by the Planning Board.

BOTH SIGNATURES REQUIRED

Owner: _____

Applicant: _____

Date: _____



The undersigned Applicant hereby requests consideration and processing of approval by the Planning Board.

Applicant's Signature: _____

Date: _____



Authorization for Filing Application

This section must be executed if anyone other than the owner is making this application.

_____ is hereby authorized to make the within application

By: _____ Dated: _____

Property Owner

Site Inspection Authorization Form

I hereby give permission for the Town of Pawling Municipal Agencies and their agents to come upon and inspect these premises with respect to this application for:

Map: _____ Block: _____ Lot: _____

Applicant's Signature:

_____ Date: _____

Completed application, plans, and checks must be submitted to the Planning Board at least fourteen (14) days prior to the regularly scheduled meetings. For Major development projects the material must be submitted 21 days prior to a scheduled Planning Board Meeting for an applicant to be placed on the agenda (held on the first and third Monday of each month) in order to be duly considered being placed on an agenda.

- 1) 11 paper copies of all forms/documents, 4-full-size paper copies of plans, and 7-11”x17” paper copies of plans must be submitted to the Planning office.
- 2) All applications and re-submissions shall include a digital copy of all applications, forms, documents, and survey maps. All survey maps must be submitted on a flash drive for viewing during a meeting.
- 3) Electronic files must be submitted via email to jdaley@pawling.org. The digital copy shall be in a pdf or other suitable write –protected image format capable of being opened and viewed using a Windows

For Office Use Only:	
Received by: _____	Date: _____
Application Fee: _____	Date: _____
Technical/Escrow Fee: _____	Date: _____
Application Number: _____	