



TOWN OF SCHUYLER FALLS

P.O. BOX 99
MORRISONVILLE, NEW YORK 12962
(518) 563-1129 (518) 563-2503
Fax # 561-7845

PLANNING BOARD

APPLICATION FOR SPECIAL USE PERMIT

NAME OF APPLICANT _____

Address: _____

CITY/TOWN: _____ STATE: _____ PHONE: _____

1. Location of Proposed Special Permit Activity:

911 Address: _____

Tax Parcel Number: Map: _____ Block: _____ Lot: _____

2. Special Use Requested: _____

3. Description of Proposed Use: _____

(Attach Additional Sheets If More Space Is Needed)

4. Required Attachments:
1. Tax Map
 2. Site Plan (Do NOT Use Tax Map)
 3. Evidence of Ownership/Authority
 - 4.

Signature of Applicant: _____

APPROVED _____

NOT APPROVED _____