

**TOWN OF COXSACKIE
APPLICATION FOR SPECIAL USE PERMIT**

56 Bailey Street
518/731-2727
Coxsackie, NY 12051

Phone:

Fax: 518/731-2720

Approved _____, 20____

Fee: \$50.00

Permit No: _____

Disapproved _____, 20____

Planning Board Chairman, Bruce Haeussler
brucebuilder@gmail.com

Applicant is: Owner Engineer Contractor

Owner Name/ Address/ Telephone: _____

Property address (if different): _____

Engineer Name/ Address/ Telephone: _____

Contractor Name/ Address/ Telephone: _____

Existing use of Property: _____

Proposed special use: _____

Signature of Applicant

Date

Application is made for the issuance of a Special Use Permit in accordance with the Town of Coxsackie's Zoning Law. The applicant/owner agrees to comply with all applicable sections of Town law and any other applicable laws, ordinances, regulations and requirements. The Town of Coxsackie's Zoning Law can be found on the Town Website www.townofcoxsackie.org