



TOWN OF GREECE
BOARD OF ZONING APPEALS
APPLICATION FORM

1 Vince Tofany Boulevard
Greece, New York 14612-5016
www.greecenyc.gov

Phone: (585) 723-2355
Fax: (585) 723-2442

William D. Reilich
Supervisor

APPLICANT: (Name), (Street Address), (City), (State), (ZIP Code), (Phone), (Fax), (E-mail)

PROPERTY OWNER (If same as Applicant, mark "SAME"): (Name), (Street Address), (City), (State), (ZIP Code)

Note: An application made by the agent of an owner must be accompanied by a nonreturnable copy of an instrument that conveys the right to represent the owner(s) of the property for which an application is made.

CONTACT PERSON: (Name), (Phone), (Fax), (E-mail)

PROPERTY LOCATION: (Street Address, or Distance and Direction to Nearest Intersection) CURRENT ZONING:

TAX MAP NUMBER(S):

APPLICATION FOR: [] Residential Area Variance [] Commercial/Industrial Area Variance [] Use Variance [] Other (Describe below)
[] Special Use Permit for [] Waiver of Special Use Permit for

(Brief Description of Proposal)

DISCLOSURE: As defined by New York State General Municipal Law, Section 809, an officer or employee of the Town of Greece shall be deemed to have an interest in an application when he or she, his or her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them: (1) is the applicant; (2) is an officer, director, partner or employee of the applicant; (3) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association which is applying; or (4) is a partner to an agreement with such an applicant, expressed or implied, whereby he or she may received any payment or other benefit upon the favorable approval of such application.

Pursuant to the provisions of New York State General Municipal Law, Section 809 (Please check one of the following):

- [] There is (are) no person(s) who have an interest in this application.
[] There is (are) person(s) who have an interest in this application. (On a separate sheet of paper, to be attached to this application form, indicate the name(s) and address(es) of such person(s), the nature and extent of the relationship to the applicant, and the nature and extent of the interest in the application.)

SWORN STATEMENT: As applicant or legal agent for the above-described property, I do hereby swear that all statements, descriptions, and signatures appearing on this form and accompanying materials are true and accurate to the best of my knowledge.

Subscribed and sworn to before me
This _____ day of _____, 20__

(Notary Public)

(Owner or Applicant - PLEASE PRINT)

(SIGNATURE of Owner or Applicant)

DO NOT WRITE IN THIS SPACE (For Office Use Only)

Date Received: _____ By: _____ Fee: \$ _____ Receipt No.: _____

Decision: _____ Date: _____