

TOWN OF YORKTOWN**APPLICATION FOR A SPECIAL USE PERMIT
FOR PROFESSIONAL OFFICE USE**

DATE: _____

TO: THE ZONING BOARD OF APPEALS
TOWN OF YORKTOWN, NEW YORK

The undersigned, as owner or tenant of certain premises located on the _____ side of _____, and known as Section _____, Parcel _____, Lot(s) _____, on the Tax Map of the Town of Yorktown, does hereby make application for a Special Use Permit to permit THE CONDUCTING OF A PROFESSIONAL OFFICE USE ACCESSORY TO RESIDENTIAL USE IN AN EXISTING RESIDENTIAL DWELLING.

Owner's Name (if different from applicant) _____

Do you reside or intend to reside in premise _____

Type of Professional Use _____

Useable floor area of main building _____

% of useable floor area devoted to use _____

No. of persons, including applicant engaged in use _____

No. of parking spaces existing _____ location _____

No. of parking spaces proposed _____ location _____

Proposed buffering and landscaping _____

Proposed architectural treatment _____

Estimated amount of traffic generated by use _____ vehicles per day

Source of data _____

Extenuating circumstances _____

When was such use established _____

Attached hereto is a residency affidavit, a survey plot plan of the area showing driveways, parking and any buffering. Incorporation papers, rental or lease agreement and consent of owner when necessary, all of which are made part of this application, together with the required fee of \$625.00 (Renewal Fee of \$312.00).

In the event the permit is issued, the applicant certifies that he/she will comply with all of the requirements of the Zoning Ordinance and the Building Department Ordinance of the Town of Yorktown and with the requirements of any other local laws or ordinances, laws, rules and regulations of any Federal, State or County Government, bureau of department thereof having jurisdiction over said premises and the business to be conducted thereat.

(OVER)

Applicant or representative must appear on meeting date of Zoning Board which is generally the fourth Thursday of each month, at 8:00 p.m., in the Board Room of Town Hall, 363 Underhill Avenue, unless otherwise noticed.

All applications must be submitted to the Office of the Building Department **before noon on the Friday preceding the scheduled meeting.**

ADDRESS OF SUBJECT PROPERTY: _____

Name of Owner (please print)

Name of Applicant (please print)

Signature of Owner/Applicant

Address of Owner/Applicant

Daytime Telephone Number

Fax Number

Application received on _____ day of _____, 20 _____.

Fee of \$625.00 received on the _____ day of _____, 20 _____.

Renewal Fee of \$312.00 received on the _____ day of _____, 20 _____.

Application submitted to the Board of Appeals on the _____ day of _____, 20 _____.

Tax I.D. Number Verified by _____ of the Assessor's Office on _____.