



VILLAGE OF BROCKPORT

49 State Street, Brockport, New York 14420
Telephone: (585)-637-5300 Fax: (585)-637-1045
Website: www.brockportny.org

PLANNING BOARD APPLICATION

DEADLINE: MONDAY Noon, 2 weeks prior to meeting

Change of Use: _____ Addition: _____
Subdivision: _____ Site Plan: _____
Other: driveway

Meeting Date: 2/13 at 7:00pm
Application Fee: \$ 50
Date Submitted: 1/4/17
Plans Submitted (10 copies): _____
Environmental Assessment Form Submitted: _____

Please note:

- Applicant must attend meeting(s).
- Failure to show, withdrawal of application, or denial will result in forfeiture of fee.
- Applicant may be billed for Village Engineer fees related to the review of application.
- The Planning Board will determine the need for a public hearing. If so, a separate fee will be billed.

PROPERTY ADDRESS: 51 Quarry St Brockport NY 14420

Tax Map Parcel #(s): 069.10-3-63-1 Parcel size: 156.22 width 198.24 depth

Property Zoning District: Residential Property Class: 210

Present Use of Property: Single family home Proposed Use of Property: same

Flood Zone: Yes No Map # _____ Map Date _____

Description of Proposal: ADDITION OF 600 sqft TO EXISTING DRIVEWAY

Value of Construction: \$ 800 Building Permit required after Planning Board approval: yes no

Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

I/We hereby certify that I/We are title owner(s) of the property property identified in the above application and that the applicant(s) named is/are authorized to make the application described herein.

Michelle O'Dell
Applicant Signature

Michelle O'Dell
Owner Signature

Michelle O'Dell
Applicant Name Printed/Typed

Michelle O'Dell
Owner Name Printed/Typed

51 Quarry St Brockport NY 14420
Mailing Address

51 Quarry St Brockport NY 14420
Mailing Address

~~XXXXXXXXXXXXXXXXXXXX~~
Phone # / Fax # / E-mail

Phone # / Fax # / E-mail

Copies to: ___ Planning Board ___ B/Z Officer ___ Village Attorney ___ Village Engineer ___ DPW Spt.