VILLAGE OF BROCKPORT
PAID MAY 31 2016 PAID
PER 0334

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
Meeting Date: 6/13/16 **at 7:00pm**
Application Fee: $ ~~250.00~~ 45.00
Date Submitted: 5/31
Plans Submitted (10 copies): N/A
Environmental Assessment Form Submitted: N/A

Change of Use: ✓ Addition: ____
Subdivision: ____ Site Plan: ____
Other: ____

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: 52 State Street Ste 1. Brockport

Tax Map Parcel #(s): 069.53-2-7 Parcel size: 82.5 width 155 depth

Property Zoning District: B-Business Property Class: 483

Present Use of Property: n/a Proposed Use of Property: tax Service

Flood Zone: □Yes ☒No Map # ____ Map Date ____

Description of Proposal: open (relocate) tax service from 61 N main to 52 State St.

Value of Construction: $____ Building Permit required after Planning Board approval: X yes ___ no
(sign)

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.

Irma R Brungard
Applicant Signature

Irma R Brungard
Applicant Name Printed/Typed

1710 Applehollow Lane
Mailing Address Hamlin NY 14464

Phone # / Fax # / E-mail

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.

See attached
Owner Signature

Owner Name Printed/Typed

Mailing Address

Phone # / Fax # / E-mail

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

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PLANNING BOARD APPLICATION

DEADLINE: MONDAY Noon, 2 weeks prior to meeting
Meeting Date: 6/13/16 **at 7:00pm**

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

Application Fee: $ 250
Date Submitted: _____
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: 52 State Street Sta 1. Brockport

Tax Map Parcel #(s): _____ Parcel size: _____ width _____ depth

Property Zoning District: _____ Property Class: _____

Present Use of Property: _____ Proposed Use of Property: _____

Flood Zone: □Yes □No Map # _____ Map Date _____

Description of Proposal: _____

_____

Value of Construction: $_____ 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.

Applicant Signature

Irma R Brungard
Applicant Name Printed/Typed

1710 Appleholow Lane
Mailing Address Hamlin NY 14464

Phone # / Fax # / E-mail

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.

Owner Signature

HARRY SNYDER
Owner Name Printed/Typed

292 MAIN ST BROCKPORT NY 14420
Mailing Address

Phone # / Fax # / E-mail

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

Katie Brown

From: Evert Brungard [redacted]
Sent: Monday, May 30, 2016 7:43 PM
To: Katie Brown
Subject: Brungard Income Tax & Bookkeeping Service

Katie,

Per our conversation last week, there were 3 areas you needed information on -

1.) Hours of operation - January 1 - January 21 - 9-5 - M-T-Thurs-Fr
January 21 - April 15 - 9-7 - M-Sat
April 16 - May 7 - 9-4 - M-T-Thurs-Fri
May 8 - Dec 31 - 9-3 - Tuesdays only

**Hours are estimates and based on typical tax season schedule
***Offseason hours (May 8-Dec 31) may vary dependent on client scheduling

2.) Parking - Public legal parking on street in front of office - Also, off street parking lot on site - Client flow will not impede traffic

3.) Waste disposal - General office waste for 3-4 employees to be disposed of by landlord arranged disposal service and/or carried off site

Please let me know if there is any information lacking - I will be dropping off application fee Tuesday 5/31

Thanks!!

-Evert

2 sided 48"x60"x1/2" alumolite

① Dark BRICK Color For Background

② gold vinil Lettering