

Town of Hastings
Code Enforcement Office
Application for Rezoning

1134 U.S. Rt. 11
Central Square, New York 13036
Phone – (315) 668-2326
Fax – (315) 668-8392

Application No.: _____

Date: _____

Fee: _____

TO THE PLANNING BOARD AND THE TOWN BOARD OF HASTINGS, NY:

I (We), the undersigned, do hereby respectfully make application and petition the Town Board to amend the Zoning Ordinance and to change the Zoning Map of the Town of Hastings, NY as hereinafter requested, and in support of this application, the following facts are shown:

1. The property sought to be rezoned is located at:

BETWEEN _____ and _____

On the _____ side of the street and known as lot (s) number (s) _____

It has a frontage of _____ feet and a depth of _____ feet.

2. The property sought to be rezoned is owned by:

3. It is desired and requested that the foregoing property be rezoned from _____ district to _____ district.

4. The following as shown on the reverse side of this application are all the individuals, firms, or corporations owning property within 100 feet adjacent to both sides and rear and across the street from the property sought to be rezoned.

5. It is proposed that the property will be put to the following use:

6. It is proposed that the following buildings will be constructed or altered:

7. It is proposed that the following off-street parking provisions will be made:

8. Attached is a copy of a map which shows the meets and bounds of my property and the outside dimensions of any existing and proposed structures, and fully describes the surrounding properties and their use.

Signature of Applicant

Phone Number of Applicant

Address of Applicant

Application No.: _____

Date: _____

Fee: _____

TO THE TOWN BOARD OF HASTINGS, NY:

This petition for rezoning property within the limits of the Town of Hastings, NY was received on _____, and the Town Board wishes to make the following recommendations:

APPROVE _____ DENY _____ BY REASON OF _____

The following are all the firms, individuals or corporations owning property within 100 feet adjacent to both sides and rear and across the street from the property in question:

<u>Name</u>	<u>Address</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

(For use of Planning Board Only as provided for in the Zoning Ordinance)

Date received for review _____ Date of Meeting _____
Recommendation of Planning Board: The granting of the applicant's request
(would / would not) be in conformance with the general Plan of the Town of Hastings because:

Planning Board

By _____, Secretary