

# CLINTON COUNTY 239-M REFERRAL FORM

REFERRAL NUMBER:

(CCPD Use Only)

Municipality:

Applicant:

Referred From: ☐ Zoning Board of Appeal

☐ Planning Board ☐ Legislative Board

Request for (check all that apply):

☐ Area Variance

☐ Use Variance

☐ Special/ Conditional Permit

☐ Site Plan Review

☐ Zoning/ Planning Law/ Amendment

☐ Other

Physical Site Location/ Address:

Project Description:

This zoning matter is forwarded to the County Planning Board for review because the real property affected is located within 500 feet of the following (check all that apply):

☐ **County or State Right-of-Way** of any county or state road, thruway, expressway, parkway, highway or other right-of-way. County/State Highway Name:

☐ **County or State Owned Land with Public Building/ Institution:**

☐ **Municipal Boundary** of your Town, Village, or City

☐ **Farm Operation** located within an Agricultural District, which includes any land used in agricultural production.

☐ **State or County Owned Public Land/ Park/ Recreation Area**

☐ **Zoning or Comprehensive Plan**, new law or amendment

☐ **Right-of-Way of any Stream** or drainage channel owned by the County or for which the County has established channel lines

**REQUIRED ENCLOSURES:** One copy of all materials required and accepted by the local board must be forwarded to the County Planning Board.

Tax Parcel ID:

Zoning District:

Minimum Lot Size:

Public Mtg/ Hearing Date:

Required Setbacks

Front yard:                      ft.      Side Yard:                      ft.      Rear Yard:                      ft.

Sign Regulations Size/ Number:      Free Standing                      Building Sign

OTHER:

\_\_\_\_\_  
Referring Officer for Local Municipality

\_\_\_\_\_  
Date