

CLINTON COUNTY 239M REFERRAL FORM

Municipality _____ Applicant: _____

Referred from: Zoning Board of Appeals Planning Board Legislative BoardRequest for: Area Variance Use Variance Special / Conditional Permit
(check all that apply) 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** Name: _____
- 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 / or 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