Form: 2 -19 (6/22)

Town of Butternuts P.O. Box 318 Gilbertsville, NY 13776 Attn: Planning Board

Application for Site Plan Review

Name of Property Owner: Address:		Date: Phone:	
Location of Property: Tax Map Number:			
Check Appropriate Use(s):			
Dwelling	Accesso	ory Structure	Other
Explanation of proposed land use with	dimensions:		
Attach all items on the checklist. The si	te plan filing fee is	\$10; checks made pay	able to the Town of Butternuts
The property owner or a duly authorized	d representative m	ust attend the Site Plar	n Review Meeting.
authorize	to repre	sent me at the Site Pla	n Review Meeting.
By signing this application, I certify that	I am the owner of	record of the above pa	rcel.
As the property owner, I swear the abo	ve information is tr	ue to the best of my kn	owledge.
	Signed:		
	Notary Public:		
Received by:			
Planning Board Secretar		Town Clerk	Date

^{*} Must be received 10 days prior to the scheduled Site Plan Review Meeting date.

^{*} Application expires one year from the date of stamped approval.