

# Application for Special Use Permit

Office of Building Inspections  
Cheektowaga Town Hall  
3301 Broadway  
Cheektowaga, New York 14227 (716) 686-3470 686-3516 fax



**TO : THE TOWN BOARD OF THE TOWN OF CHEEKTOWAGA, N.Y.**

**The undersigned hereby applies to the Town Board for a Special Use Permit pursuant to Article VI of the Zoning Law of the Town of Cheektowaga affecting the following described premises :**

1. Name of Petitioner ..... Telephone No. .... Email Address .....  
Mailing Address (street & number) ..... (city, village or town) ..... (state) ..... (zip code) .....
2. Location of Property subject to special permit request: .....
3. Name of Record Landowner: .....
4. A special permit is requested for a:  alcoholic beverages/side lot  motor service use  petroleum bulk storage  bituminous products,  
 solid waste transfer  industrial processes  communications facility  accessory drive through window
5. Present zoning classification(s) of property: R RS RA RSC RMH NS C CM MS CF M1 M2 AG  
(circle classification)
6. Present use of property: .....
7. Proposed use of property: .....
8. Attached are (4) four legal descriptions of the parcel subject to the special permit request (an electronic copy of the legal description must also be provided in word format ) and four (4) copies of a boundary survey.
10. Attached are (20) copies of a development or site plan providing the minimum required information as specified in the "Town of Cheektowaga Development Review Application".
11. The petitioner acknowledges that payment of an application fee is for administrative and advertising expenses to the Town as a result of this application and in no way relates to either approval or disapproval of application, and is not refundable.
12. The petitioner affirms that he/she is the current owner of the subject property or that he/she has attached written permission from the owner of the subject property to allow for the filing of this request.

Date: ..... (Signature of Petitioner / Owner)

STATE OF NEW YORK: ..... : SS:  
COUNTY OF ERIE :

On this .....day of ....., 20....., personally appeared before me .....  
(Name of Owner/Petitioner)  
The petitioner, to me well known to be the same person described in and who signed and executed the forgoing petition and who duly

<i>Referred to Erie County D.E.P.</i> .....	<i>Recommendation Received</i> <input type="checkbox"/> <i>yes</i> <input type="checkbox"/> <i>no</i>
<i>Referred to Town Planning Board</i> .....	<i>Recommendation Received</i> <input type="checkbox"/> <i>yes</i> <input type="checkbox"/> <i>no</i>
<i>Meeting Noticed Published</i> .....	<i>Public Meeting Held On</i> .....

RECEIPT NO. .... AMOUNT PAID .....