



Village of Mount Morris

117 Main Street, Mount Morris, NY 14510
Building Zoning Permits/Code Enforcement
Phone (585) 658-4160 chuck.cagle@mountmorrisny.us

SPECIAL USE PERMIT PLANNING BOARD APPLICATION

New Renewal Change To

Date: _____

Applicant: _____

Owner (If Different): _____

Address: _____

Address: _____

Phone #: _____

Phone #: _____

Email: _____

Email: _____

Tax Map Number: _____

Address: _____

Zoning District: _____

COMPLETE THIS SECTION FOR A NEW SPECIAL USE REQUEST

Request for special use permit for the following purpose: _____

Describe alterations to the existing property, if any and include drawing, if applicable: _____

Describe signage requested (if signage is requested a Zoning/Sign Permit will also need to be filled out): _____

Describe parking and/or lighting if permitted and applicable: _____

Hours of Operation (if applicable): _____

Is site plan review approval required in conjunction with this special use permit? Yes No

COMPLETE THIS SECTION FOR YEARLY SPECIAL USE RENEWAL

Describe all alterations from the original Special Use permit granted to this property location, if any and include drawing, if applicable

The undersigned applicant and owner, hereby request review by the Village/Town of Mount Morris Joint Planning Board for the identified special use permit:

By Signing this Application, you agree to charges for the Village of Mount Morris Engineering Firm to review your plans. There will/may be additional charges for the Village of Mount Morris Attorney and/or Code Enforcement Officer for reviewing the plans and specifications. These charges are in addition to the Application fee.

Applicant's Signature or Authorized Representative Date: _____

Owner's Signature or Authorized Representative Date: _____

Code Officer's yearly review for the special use renewal: _____

Is the property still in compliance with the Special Use requirements approved the Joint Planning Board?
 Check Yes _____ No _____

Reasons for failure: _____

This Application has been reviewed by:

(Signature of Building/Code Officer) Date: _____

Final Approval Granted by the Joint Planning Board: Date: _____
(Date Approved)

(Signature of Joint Planning Board Chair) Date: _____
(Date)

COMPLETE Application
 Received Date: _____
 By: _____

CODE ENFORCEMENT USE ONLY:
 (non-refundable) Fee Due: _____
 Check: _____ Cash: _____
 Receipt #: _____ Permit No: _____