



**TOWN OF SCHUYLER FALLS
PLANNING BOARD**

P.O. BOX 99
MORRISONVILLE, NEW YORK 12962
(518) 563-1129 (518) 563-2503
Fax # 561-7845

DATE _____ TAX MAP PARCEL # _____

NAME OF APPLICANT _____

ADDRESS _____

PHONE NUMBER _____

REQUESTED ACTION _____

DESCRIPTION _____

****IF PROPERTY OWNER IS UNABLE TO ATTEND THE MEETING AT WHICH THIS APPLICATION IS REVIEW~ED, A NOTARIZED LETTER NAMING SOMEONE TO ACT AS YOUR AGENT WILL BE REQUIRED. IF A NOTARIZED LETTER IS NOT RECEIVED, THE PLANNING BOARD WILL NOT ADDRESS THIS APPLICATION.**

PLANNING BOARD MEMBERS

VIC MCCASLAND (CHAIRMAN)
PETER HAGER
LARRY CHRISTON
SANDRA MADDOX
MATTHEW RUSSELL

SIGNATURE OF APPLICANT _____

SIGN OFF SIGNATURE OF CODES ENFORCEMENT OFFICER _____