

TOWN OF GREAT VALLEY  
ZONING PERMIT APPLICATION

Office of the  
Zoning Enforcement Officer

Application  
Number \_\_\_\_\_  
Application  
Date \_\_\_\_\_

Cattaraugus Co., New York

Application is hereby made to:

- use A structure or land located at \_\_\_\_\_  
 erect \_\_\_\_\_, New York  
 repair at a cost of \$\_\_\_\_\_ for:  
 alter  residence  
 extend  commercial business  
 remove  industry  
 demolish  other use (describe) \_\_\_\_\_  
 occupy  with accessory building.

The Main Structure will be as follows:

Construction _____	Front yard set back (in feet) _____
Height (stories and feet) _____	Side yard set back (in feet) _____
Number of family units _____	Total of both side yard set backs _____
Dimensions of lot _____	Rear yard set back (in feet) _____
Corner or interior lot _____	Other _____

The Accessory Building will be as follows:

Description _____	Percentage of rear yard occupied _____
_____	Set back from rear lot line _____
Height _____	Set back from side yard line _____

A Plot Plan  is attached  is approved by Cattaraugus  
 is not attached County Health Department

Zoning Requirements:

Front Yard _____	Use (s) Permitted _____
Rear Yard _____	_____
Side Yard _____	Lot Area _____

Floodplain Determination:

Firm Zone _____	BFE _____
Floodplain Development Permit required? Yes _____ No _____	

Sworn to this \_\_\_\_\_ day of \_\_\_\_\_ \_\_\_\_\_

Signature

Name: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Zoning Permit  Approved

Denied – Not in conformance with the following provision (s)

Of the Zoning Ordinance:

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Dated: \_\_\_\_\_, by \_\_\_\_\_, \_\_\_\_\_

Zoning Permit Application Fee \$X: pd. \_\_\_\_\_

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