

Site Plan Number _____
(To be assigned)
Date _____

SITE PLAN REVIEW APPLICATION
TOWN OF TIOGA PLANNING BOARD

I (WE) _____ OF _____
NAME OF APPLICANT STREET AND NUMBER

TOWN OR VILLAGE STATE ZIP CODE PHONE NUMBER

EMAIL ADDRESS _____ TAX MAP NUMBER _____

LOCATION OF PROPERTY:

HEREBY REQUEST THE PLANNING BOARD FOR SITE APPROVAL FOR:

PURSUANT TO "SITE PLAN REVIEW LAW" OF THE TOWN OF TIOGA NY.

PREVIOUS SITE PLAN APPROVAL _____
CASE NUMBER DATE

ADJACENT PROPERTY OWNERS:

SIGNATURE(S) OF APPLICANT(S)

DATED: _____