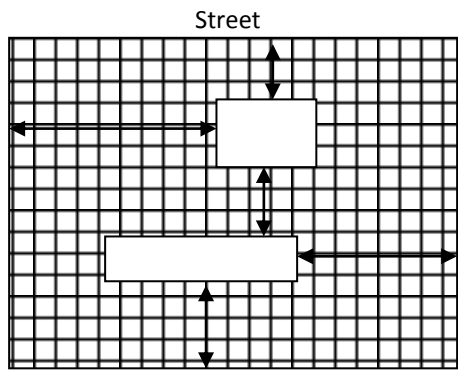


Town of Amalga Zoning Clearance Application

Applicant Information

- 1. Owner's Name: _____
- 2. Street Address: _____
City, State, Zip: _____
- 3. Home Phone: _____ Work Phone: _____ Cell Phone: _____
- 4. Type of Structure: _____
- 5. Lot Size: Acreage: _____ Road Frontage: _____
- 6. County Tax Number: _____
- 7. Property Address: _____
City, State, Zip: _____

- 8. Zone: _____
- 9. Subdivision Name: _____
Lot Number _____
- 10. Septic Tank: Yes _____ No _____
- 11. City Water: Yes _____ No _____
- 12. Remarks: _____



Sample Plot Plan. Fill in details on separate sheet.

Please use the graph on the back of this application form to sketch your plot plan. Indicate the setback distances from the street and from side and rear property lines to the structure.

Note: This property is being approved for zoning clearance as indicated above. Any change in type of structure or placement is not allowed. Construction must begin within one year of approval date. Applicant agrees to be in compliance with all zoning ordinances, regulations, and building codes. All applicants shall understand that the sights, sounds, smells and hours of common farming and agriculture practices are considered as acceptable and not subject to complaint or restriction within the Town of Amalga.

Applicant Approval _____ Date: _____
Signature of Applicant

Clearance Approval _____ Date: _____
Signature of Planning and Zoning Chairman

Fees Due: \$ 15.00 [] Zoning Clearance
\$4137.00 [] Water impact fee for residential 1 inch line.
\$ [] Water connection fee = actual cost plus 20% (see Utility Fee Schedule)

Fees Paid _____ Date: _____
Signature of Town Treasurer

Final Approval _____ Date: _____
Signature of Mayor/Town Board Member

Street

