

**Filing Fee: \$150.00**

**APPLICATION MUST BE FILED BY THE 10<sup>TH</sup> OF THE MONTH**

**TOWN OF LOCKPORT**

**6200 ROBINSON RD  
LOCKPORT NY 14094**

**BUILDING DEPT. – 439-9526**

**BOARD OF APPEALS REQUEST**

- 1. PREVIEW ( )
- 2. SPECIAL PERMIT ( )
- 3. VARIANCE:
  - AREA ( )
  - USE ( )

(PLEASE PRINT)  
PROPERTY LOCATION:

\_\_\_\_\_  
STREET #: \_\_\_\_\_

(PLEASE PRINT)  
PROPERTY OWNER: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_

Located on the N-S-E-W side. Between \_\_\_\_\_ Road/Drive and \_\_\_\_\_ Road/Drive.

Property is located in an area zoned \_\_\_\_\_.

(PLEASE PRINT)  
APPLICANT NAME: \_\_\_\_\_

DESCRIPTION OF PROPOSAL: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_

SBL #: \_\_\_\_\_

APPLICATION WAS DENIED FOR THE FOLLOWING REASON \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**APPLICANT SHALL PROVIDE ALL NECESSARY PLOT PLANS, DRAWINGS, ELEVATIONS  
AND DATA REQUIRED TO THE BUILDING DEPARTMENT**

**APPLICANT IS REQUIRED PRIOR TO ANY HEARING, TO NOTIFY ANY AND ALL  
ADJACENT PROPERTY OWNERS OF THE INTENTION OF THIS PROPOSAL**

\_\_\_\_\_  
(Signature of Applicant)  
I HEREBY DEPOSE AND SWEAR THAT ALL OF THE STATEMENTS ABOVE ARE TRUE.

DATE: \_\_\_\_\_ 20 \_\_\_\_\_

APPLICANTS SIGNATURE: \_\_\_\_\_