

OFFICE USE ONLY

Site Plan # _____
SEQR # _____

Date _____
Name _____

SPECIAL USE PERMIT INFORMATION SHEET
Town of Hamburg Planning Department

Applicants Name: _____

Project Name: _____

Location: _____ SBL#: _____

Township: _____ Range: _____ Farm Lot: _____

Property Owner: _____

Zoning of Site: _____

Use Requested: _____

Support Information Submitted: _____

Zoning and Usages of all properties within 500 feet (also depict on site plan): _____

SEQRA: Unlisted: _____ Type I: _____

Reasons for requesting a Special Use Permit: _____

****Special Use Permit applications must be accompanied by a Site Plan application.**