Sullivan County Planning & Community Development GML – 239 Referral Form

Municipality:	Town of	Village of		
Referring Agency:	Town/Village Board Plan	ning Board 🗌 Zoning Board of A	Appeals	
Jurisdictional Dete	rminant: Project is located with	in Type of Action:		
	wing (existing or proposed):	Site Plan Review		
Municipal Boundary		Area Variance		
		Use Variance		
State or County Park		Special Use Permit		
		Subdivision Review	Subdivision Review	
			t of Zoning Ordinance/Map or Local Law	
			Adoption/Amendment of Comprehensive Plan	
Other		Other		
Project Name:				
Applicant:				
Project Location: _				
County Tax Parcel N	Number(s):			
Parcel Size:	Current Zoning:			
Project Description	n: (attach additional pages if nece	essary)		
State Environment Determination of S	al Quality Review (SEQR) Stat Significance:		Unlisted Action Type II	
Public Hearing:	Yes No Hearing Date	2:		
Date Response Requ	uested (if less than 30 days)			
Supporting Docum	entation Included With This R	eferral:		
Location Map		Subdivision Plat		
Municipal Appli	option Form		m or Environmental Impact Statement	
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Project Narrative	2	Agricultural Data Statement		
Site Plan		Other		
description of the pr	this application & supporting do oposed local action and constitut cipal Law, Article 12-B, Section	es a 'full statement' pursuant to	Received Stamp (Internal Use Only)	
Signature:		Date:		
SUBMIT 'FULL STATEMENT' TO: planning@sullivanny.us Sullivan County Division of Planning & Community Development 100 North Street, Monticello, New York 12701				