



Planning Department

Director of Planning
Code Enforcement Officer
Code Enforcement Officer
Senior Planner

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Joy

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General Permit Application – Sheet 1 General Information

DO NOT FILL IN SHADED SECTIONS

9-12-16 Date: 64.-1-29 Tax Parcel #: Zoning District:

(Complete) Project

Address: 635 Midline Road, Dryden

Project Description: NYState Grant-Funded Tower to bring Internet to Town of Dryden residents who otherwise don't have high speed service. Town of Dryden agreed to waive all fees for the project as its contribution.

Estimated project cost: Proposed revision: zero cost

Principal Use: Residential Commercial: X Other:

Permit(s) Required: Building Zoning X Special Use Site Plan Review Subdivision Pool Heating Demolition Pre-built Shed

To be completed by Planning Department personnel:

Worksheets / sections required:

- Site Plan Sketch Fee : \$250
- Site Plan Review (See Fee Schedule)
- Special Use Permit (See Fee Schedule)
- Notice of Ground Disturbance
- Zoning Permit Fee : \$25
- Varna Compliance Worksheet
- Residential Design Guidelines Compliance
- Commercial Design Guidelines Compliance
- Sign Compliance Worksheet
- Driveway or Roadcut Compliance
- Notices and Disclaimer Acknowledgement
- Agricultural Data Statement
- County Review
- Minor Subdivision Fee : \$25
- Major Subdivision (See Fee Schedule)
- Demolition
- Lot line Adjustment

Notes:

Blank lines for notes.

Permit Application - Contact Information

Owner - Print name: _____ Chuck Bartosch, CEO Clarity Connect, Inc. _____

Owner Signature required & dated: C. Bartosch 9-12-16

Address: _____ 200 Pleasant Grove Road _____ City: Ithaca _____ State: NY _____ Zip Code: 14850

E-mail: chuck@clarityconnect.com _____ Telephone No.: (607) 227-5500 (cell) _____

Emergency Contact: Clarity Help Line _____ Telephone No.: (607) 257-8268 _____

Agent / Applicant - Print : _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

General Contractor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

Mason Contractor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

Electrical Contractor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

HVAC Contractor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

Plumbing Contractor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

Surveyor: _____ License # _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail: _____ Telephone No: _____

Note: The Town of Dryden will keep your contact information private.

* *CUT: _____ **

Application from _____ for _____
Project Site _____ received on _____

Payment received \$ _____ Cash _____ Check # _____ Credit Card (circle one) _____
Signature of receiver _____ Date _____