



**Planning Department**

Director of Planning  
Code Enforcement Officer  
Code Enforcement Officer  
Zoning Officer  
Stormwater Officer  
Administrative Coordinator

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David Sprout  
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**General Permit Application – Sheet 1 General Information**

DO NOT FILL IN SHADED SECTIONS

Date: 10/5/18 Tax Parcel #: 260-1-19.4 Zoning District: Rural Ag  
(Complete) Project  
Address: 450 Cortland Rd, FREDONIA, NY 13068  
Project Description: Contractor yard - add sign

Principal Use: Residential \_\_\_\_\_ Commercial:  Other: \_\_\_\_\_  
Permit(s) Required:  Building  Zoning  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
- Site Plan Review
- Special Use Permit
- Notice of Ground Disturbance
- Zoning Permit
- 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
- Major Subdivision
- Demolition
- Lot Line Adjustment

Notes:  
\_\_\_\_\_  
\_\_\_\_\_

# Permit Application - Contact Information

Owner - Print name: JACK LITZENBERGER

Owner Signature required & dated: 592 ENF, WORKSHEET

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

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 \_\_\_\_\_