



**Planning Department**

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

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

DO NOT FILL IN SHADED SECTIONS

Date: 10-31-18 Tax Parcel #: 38-1-32 Zoning District: Mixed Use

(Complete) Project Address: 117-119 North St Dryden

Project Description: To apply for a special use certificate to operate a used car sales lot as permitted use with zoning.

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:**

[Shaded area for notes]

# Permit Application - Contact Information

Owner - Print name: Donn Sapp  
Owner Signature required & dated: [Signature] 10-31-18  
Address: PO Box 523 City: Cortland State: NY Zip Code: 13045  
E-mail: donnw26@gmail.com Telephone No: 607-749-3089  
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 \_\_\_\_\_