REQUEST FOR A PLANNING BOARD WORK SESSION

REQUIREMENTS: 1 ORIGINAL COPY OF THIS FORM AND ALL OTHER INFORMATION OF SUPPORT

DATE: 9/19/23
NAME OF APPLICANT: Brian Scholzer
ADDRESS: 441 Fost Main 5t
Middletown, NY 10940
PHONE NUMBER: 201-923-1230 EMAIL bying every thinge you bocom
PROJECT LOCATION:
SECTION 6 BLOCK 1 LOT 71
CONSULTANT NAME:
ADDRESS:
PHONE #: EMAIL
Collectifics Dealer. I deally, 20,000 sq At. Isteel Building for possible sulfinsion of space for rental income.
SIGNED: DATED:
PLEASE ATTACH ANY PLANS, PICTURES AND DIAGRAMS WITH DIMENSIONS ETC. THAT ARE APPLICABLE TO YOUR CASE.
SEE FEES

* THIS NON REFUNDABLE FEE WILL BE APPLIED TOWARD YOUR APPLICATION FEE IF MOVING FORWARD.

PLEASE CALL 845-469-7000, EXT. 308 WITH ANY QUESTIONS.