REQUEST FOR A PLANNING BOARD WORK SESSION

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

DATE: 3/12/2023 (KAL EISENBERG)

NAME OF APPLICANT: ~~Adar Bays~~ major consulting llc

ADDRESS: 2 shiner ct. monroe NY 10950

PHONE NUMBER: 845-325-8611 EMAIL kalmen180@yahoo.com

PROJECT LOCATION: 50 Elkay~~e~~ Dr

SECTION 6 BLOCK 1 LOT 69.2

CONSULTANT NAME:

ADDRESS:

PHONE #: EMAIL

DESCRIBE THE PROJECT: we want to build an ligt industrial building, for a food packaging company

SIGNED: K C. DATED: 3/12/2023