	CASE NUMBER:			
Tax Parcel Number:	Section:	Block:	Lot:	
TOWN OF HILLSDALE		(Columbia County New Y	'ork

SPECIAL PERMIT APPLICATION

Name of Property Owner:	Name of Applicant (if different):			
Address:	Address:			
Telephone Number:	Telephone Number:			
Property Address:	Brief Description of Proposed Use/Activity:			
Base District: Overlay Districts (if any): Current Use(s): Proposed Use(s):				
Parking Spaces: Lot Area: Total Impervious Surface: Building Footprint: Floor Area:	The undersigned hereby makes application in accordance with all applicable laws and other requirements of the Town of Hillsdale, Columbia County, New York.			
Number of Residential Units: Type of Activity (check all that apply): o New Use o Erection of Structure o Movement of Structure	Signature of Record Owner Date:			
 o Expansion of Use or Structure o Change of Use in Existing Structure o Resumption of Former Use o Sign o Other (specify)	Signature of Applicant (if different) Date:			
The proposed use is allowed O by right (permitted) O by Special Permit.	ZONING OFFICER TO COMPLETE ITEMS BELOW WHERE APPLICABLE			
Is there an existing Special Permit for the property? O yes, granted on Does the property contain a farm operation located within an agricultural district or is the property boundary within 500 feet of a farm operation located in an agricultural district? O yes O no O not applicable	Scale of Project (check all that apply): O Minor Project O Major Project SEQRA Category (check one): O Type 1 O Type 2 O Unlisted County Review: O yes O no			