

## TOWN OF HARTLAND ZONING OFFICE

8942 RIDGE RD.

GASPORT, N.Y. 14067-9705

PHONE 735-7778 FAX 735-3504

## **PETITION**

To the Zoning Board of Appeals of the Town of Hartland:

		, New York _		_	
Applicant's na	me and mailing address:				
				_	
				_	
Ownor's name	and mailting all the property			_	
Owner's name	and mailing address (if diffe	erent from above):			
				<del></del>	
The applicant	requests the following:				
The applicant a	and the property in question a	suffers the following	g hardship in com	parison with adjoining	g properties
Additional sup	oort material, as appropriate,	, is attached to this a	petition. I/We und	lerstand that any mis	statement of
Additional sup	port material, as appropriate, ds for revocation for any dec	, is attached to this pision made pursuan	petition. I/We und	lerstand that any mis	statement of



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NOTES			
Permit Fee	Date Paid		
Public Hearing Fee	Date Paid		
The <b>Zoning Board of Appeals</b> of the Town of Ha action in accordance with the attached decision reg	rtland hereby issues the following garding the petition:		
Approved			
(Zorina Day 1 Cl. 1)			
(Zoning Board Chair)	(Dated)		
Denied			
	· · · · · · · · · · · · · · · · · · ·		
(Zoning Board Chair)	(Dated)		