

Date:	
Application Number:	
Review Fee: \$	

VILLAGE OF BANCROFT SITE PLAN REVIEW APPLICATION

Applicant Information				
Name:				
Street Address: City:	7in:	Homo Dhi	Day Dh	
City.	Ζιρ	nome Ph	Day Pn	
Property Owner (if differe Name:				
Street Address:				
Street Address: City:	Zip:	Home Ph:	Day Ph: _	
Property for which site pl Street Address:	-			
Area of subject parcel (in act Tax Parcel ID#:				
Brief description of the pr	oposed use:			
Attach the following to the a	• •	posed site (see site plan c	shookligt)	
•		nal Requirements Checkli	•	
 A legal description of 		•	.	
I hereby affirm that the ab	ove informat	ion is correct to the bes	t of my knowledge.	
Signature of Applicant		Print/type name		 Date
Signature of Property Owner	 -	Print/type name		Date
(if different from applicant)				

FOR OFFICE USE ONLY

Copies of site plan sent for review (attach comments)

Fire Chief Police Chief DPW Director	Date Sent	Date of Response
County Environmental Health Director DPW Director		
Site Plan Approval ☐ Site plan approved ☐ S Date of Planning Commission meeting	•	☐ Site plan approved w/conditions
Remarks:		