

Township Use Only

The property has an existing: CUP IUP Nonconforming registration

Applicant is requesting a 60 day extension until: _____

Deputy Clerk: _____ **Date:** _____

Complete **Date:** _____ Incomplete **Notification sent:** _____

Application Fee \$ _____ Paid on _____ Receipt # _____ Check # _____

Escrow Fee \$ _____ Paid on _____ Receipt # _____ Check # _____

Refunded \$ _____ Paid on _____ Receipt # _____ Check # _____

Notes:

Zoning Administrator: _____ **Date:** _____

Planning Commission: _____ **Date:** _____

Recommendation to Town Board: Approve Deny

Notes:

Town Board: _____ **Date:** _____

Approved Denied

Notes:

CONDITIONS OF ISSUANCE