

ZONING

194 Attachment 3

Town of Nichols

Request for Special Permit or Variance

Please type or print (in ink).

Submit this form with the appropriate fee to:

Code Enforcement Officer
Town of Nichols
Nichols, New York 13812

Name of Applicant: _____

Applicant's address: _____

Applicant's telephone number: _____

Zoning district affected by this request: _____

In the space below, describe in detail the requested use or variance. Additional materials (photographs, drawings, etc.) may be requested by the Code Enforcement Officer before submitting the application to the Zoning Board of Appeals.

(Continue on other side if necessary)

Applicant's signature: _____

Date: _____