

**Town of Long Island Planning Board
Conditional Use Permit Application**



1. Applicant

Name: _____

Mailing Address: _____

Interest in subject property: _____

2. Owner (if different from applicant)

Name: _____

Mailing Address: _____

Interest in subject property: _____

3. Subject Property:

Island Address:

Lot # (as shown in Town tax records) _____ Zoning Classification: _____

Present Use:

4. Conditional Use

Particular provision(s) of ordinance authorizing this use:

General description of proposed conditional use:

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5. Attachments

- Copy of subject property deed.
- Eight (8) Copies of application and all supporting documents.
- Where site plan approval is required, a copy of the complete site plan application.
- A \$100.00 filing fee – check made payable to: Town of Long Island.

I certify that the information contained in this application is true to the best of my knowledge and belief.

Date: _____

Signature of Applicant

NOTE: This application must be reviewed by the Planning Board to determine completeness.

Date application determined to be complete: _____

Planning Board Chairperson Signature: _____

cc: Long Island Code Enforcement
Officer Long Island Board of
Selectmen