



**TOWN OF ROCKLAND**  
P.O. BOX 964, Liv. Manor, NY 12758

**SPECIAL USE PERMIT APPLICATION**

PERMIT # \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ TELE.#: \_\_\_\_\_

CORPORATE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_

SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ ZONING CLASS: \_\_\_\_\_

NATURE OF PROPOSED USE: \_\_\_\_\_

The following must be submitted with this application (where applicable):

- I. Plot Plan indicating:
  - a. Size of lot
  - b. Existing and/or proposed buildings
  - c. Sizes of buildings
  - d. Setback dimensions (front; rear; side)
  - e. Distance separating buildings and parking lots
  - f. Parking areas
  - g. Ingress & Egress
  - h. Landscape plans
  - i. Playground areas
  - j. Type of construction
- II. Number of units: \_\_\_\_\_ Size of units: \_\_\_\_\_
- III. Area of lot: \_\_\_\_\_ Total areas of buildings: \_\_\_\_\_  
Percentage of land covered by buildings: \_\_\_\_\_  
Distance between buildings: \_\_\_\_\_  
COMMENTS: \_\_\_\_\_

In compliance with the Town of Rockland Zoning Ordinance, after publication in the Sullivan County Democrat of a legal notice regarding a public hearing to be held by the Planning Board for the above Permit Application, the following is required by the applicant.

All property owners abutting and adjoining the above-described property must be notified by certified mail, return receipt requested, giving notification of said hearing, stating purpose, date, time and place. Proof of mailing must be submitted to the Chairman at the time of the hearing.

Permit Approved: \_\_\_\_\_ by the Town of Rockland Planning Board.  
Fee \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant  
\_\_\_\_\_  
Charles Irace, Code Enforcement Officer