INCORPORATED VILLAGE OF NORTH HILLS

1 SHELTER ROCK ROAD, NORTH HILLS NY 11576 **APPLICATION TO BOARD OF**

OFFICE USE ONLY Date Received: _____ Date Accepted: _____

Fees Paid: \$

Deposit Paid: \$_____

4	ALLECATION TO BOARD OF
	APPEALS

1.	Owner's Name:			
	Address:	Phone #:		
2.	Representative's Name & Address (if applicable): Name:			
	Address:	Phone #:		
3.	Description of Property and Location: Section: Block:	Lot(s):		
	Address:			
	Zoning District:			
4.	How is property presently used:			
5. Relief requested in this application:				
	pursuant to Village Code Chapter & Sub-Section (if applicable):			
6.	Description of reason for the relief sought in this application (add additional sheets if required):			
7.	List all additional documents being submitted in support of this app	lication:		

- 8. Were there any previous determinations by any Village board of agency related to the relief being sought in this application? If so, provide copies of such determinations;
- 9. Are there any covenants and restrictions, or other restrictions or conditions of record, which affect the subject property? If so, provide copies.

APPLICATION #____

AFFIDAVIT OF PROPERTY OWNER STATE OF NEW YORK:	AFFIDAVIT OF OWNER I AGENT:	DESIGNATING	
COUNTY OF NASSAU: The undersigned, being duly sworn deposes and says that the	STATE OF NEW YORK COUNTY OF NASSAU The undersigned, being duly sworn, deposes and says: I am the (owner, authorized officer or member of the owner) of the property which is the subject of this application. On behalf of the owner of the property I hereby authorize		
undersigned is the owner or an officer or member of the owner of the subject property, and resides at: in the State of New York; that the owner in fee of the property which is the subject of this application is as stated in the application; that if			
the owner is an entity the undersigned is and as such is an officer or			
member of the owner authorized to execute this application on behalf of the owner; that all statements made in this Application and all supplementary documentation are true and complete to Deponent's own knowledge	at		
Sworn to before me this day of 20	Sworn to before me this20	day of	
Notary Public	Notary Public		
AFFIDAVIT OF APPLICANT STATE OF NEW YORK: COUNTY OF NASSAU:			
resides at			
the undersigned is authorized by the owner of the property which is the subject of this application to make the above application and that all the statements made in this and all supplementary documentation are true to Dependent's own knowledge			
Sworn to before me thisday of20			
Notary Public			