

# TOWN OF THERESA

Terry McKeever – Building & Zoning Officer  
215 Riverside Avenue  
Theresa, New York 13691  
(315)628-5046 Office/(315)778-5831 Cell

## ZONING PERMIT APPLICATION

The undersigned hereby makes application to the Town of Theresa for a “Zoning Permit” for the purposes listed below. Applicant agrees that such purposes shall be undertaken in accordance with all applicable laws, rules, ordinances and requirements of the Town of Theresa, County of Jefferson and the State of New York.

DATE: \_\_\_\_\_

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

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

PHONE # \_\_\_\_\_

DESCRIPTION OF PLANNED WORK OR PROJECT: \*(**CIRCLE ONE**)

To: USE ERECT ALTER EXTEND MOVE DEMOLISH

LOCATED AT: \_\_\_\_\_

All permits are the Home Owners Liability: \_\_\_\_\_  
Must be signed by Home Owner

**Please enclose the required fee of \$25.00  
check made payable to *Theresa Town Clerk***

**THIS IS NOT A BUILDING PERMIT**

(Office use only)

ZONING PERMIT # \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason for Denial \_\_\_\_\_

Forwarded to: Planning Board or Zoning Board      VARIANCE: Approved or Denied

DATE: \_\_\_\_\_

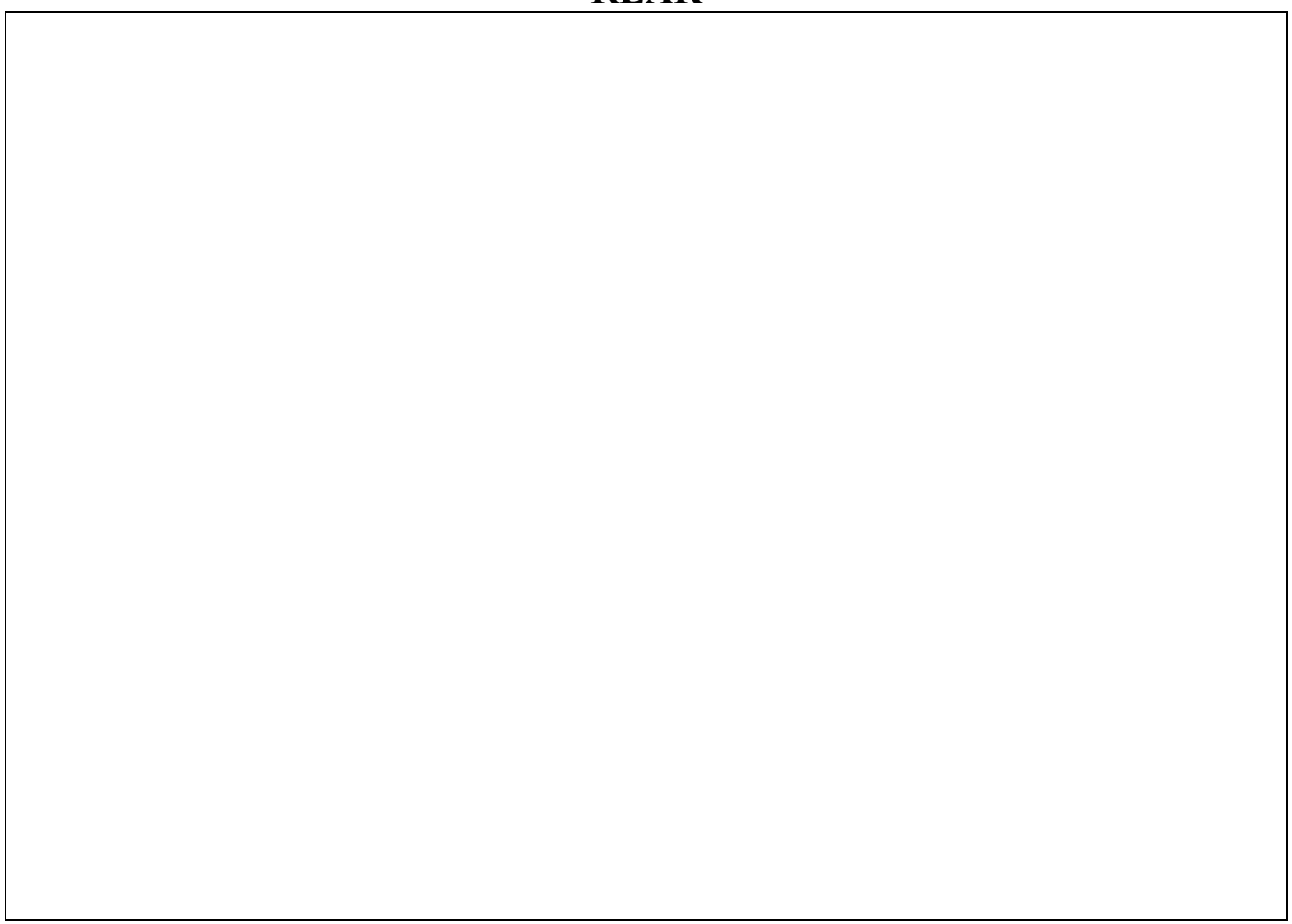
\_\_\_\_\_  
Terry McKeever, Building & Zoning Officer

Type of Structure: \_\_\_\_\_  
Height in Stories: \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_  
Lot Depth: \_\_\_\_\_ Lot Front: \_\_\_\_\_  
Lot Rear: \_\_\_\_\_

Locate clearly and distinctly all buildings, whether existing or proposed. Indicate all set back dimensions from property lines. Show septic tank, leach field and well.

SITE PLAN  
SHOW LOCATION OF ROAD

**REAR**



**ROAD CENTER LINE OR LAKE FRONT**