

**SANDYSTON TOWNSHIP**  
**MINOR SITE PLAN APPLICATION**

Application #: \_\_\_\_\_ Date: \_\_\_\_\_

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

OWNERS NAME (If different from Applicant): \_\_\_\_\_

MAILING ADDRESS OF APPLICANT: \_\_\_\_\_

TELEPHONE NUMBER OF APPLICANT: \_\_\_\_\_

BLOCK #: \_\_\_\_\_ LOT #: \_\_\_\_\_ ZONE: \_\_\_\_\_

STREET ADDRESS OF PROPERTY: \_\_\_\_\_

SQUARE FOOTAGE OF ADDITION AND/OR  
ALTERATION: \_\_\_\_\_

PURPOSE FOR ADDITION OR ALTERATION: \_\_\_\_\_

Checklist of Items to be submitted:

SURVEY (original & 3 copies): \_\_\_\_\_

BUILDING PLANS (original & 3 copies): \_\_\_\_\_

TAXES PAID: \_\_\_\_\_

FILING FEE: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

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Application Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Review reported to Land Use Board: \_\_\_\_\_