

TOWN OF FAYETTE
Application for a Special Use Permit
Application Fee _____

Application Date _____ Application Number _____

1. Owner's Name _____
Address _____
Phone _____ Tax Map Number _____

2. Purpose of this Request _____

3. Justification of Request _____

4. Previous Appeals (list of applications, dates and Purposes of requests)

Town of Fayette Planning Board

1439 Yellow Tavern Road

Waterloo, NY 13165

315-585-6282

AGRICULTURAL DATA STATEMENT

Per § 305-a of the New York State Agriculture and Markets Law, any application for a special use permit, site plan approval, use variance, or subdivision approval requiring municipal review and approval that would occur on property within a New York State Certified Agricultural District containing a farm operation or property with boundaries within 500 feet of a farm operation located in an Agricultural District shall include an Agricultural Data Statement.

1. Name of Applicant: _____

Address: _____

2. Project Name/Location: _____

3. Description of proposed project. _____

4. Tax Parcel Number(s): _____

5. Number of total acres involved with project: _____

6. Number of total acres presently in Tax Parcel: _____

7. How much of the site is currently farmed? _____ Acres

8. Please identify who is farming the site. _____

9. Please indicate what your intentions are for use of the remainder of the property, over:

Five years: _____

Ten years: _____

Twenty years: _____

10. Who will maintain the remainder of the property not being used for this development? _____

(PLEASE COMPLETE NEXT PAGE.)

11. Please indicate crop(s) or vegetational cover for the site. _____

12. Are there any drainage ways or underground tile systems located on the site? _____

Will this project alter existing drainage patterns? _____ If yes, please describe

13. Is the parcel included in a farm plan prepared by the Seneca County Soil and Water District of the USDA Soil Conservation Service? _____

Are federally funded cost sharing practices in place for the parcel? _____

Name of program(s). _____

14. Is the parcel currently granted an agricultural tax exemption? _____ Yes _____ No

Signature of Applicant: _____ Date: _____

FOR TOWN USE ONLY:

NOTE: This form and a map of the parcel(s) should be mailed to County Planning as part of the GML m and n referral. It should also be mailed to property owners within 500 feet of the property boundary along with the

Notice of Public Hearing (Attach list of Property Owners within 500 feet).

Name of Town Staff Person -

Date Referred to County Planning -