

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

Name of Applicant _____ Date _____

Address (site) _____ Phone# _____

Property Owner (if not same) _____ Email _____

Address(if not site) _____

Application is hereby made for a: () **Permit** () Site Plan () Subdivision
To: () **Construct** () Remove () Alter () Replace () Repair () Create
() **Structure** () Special Use () Variance _____
Zoning District _____ Tax map # _____

Description of proposed improvements and/or use: _____

Size of Improvement: _____ sq. ft., **Estimated cost:** _____
Lot Size: _____ **Setbacks:** Front _____ Rear _____ Side(w) _____ Side(n) _____

Contractor: _____ **Phone#** _____

Address: _____

Insurance: () Received () CE200 **Other:** _____

***APPLICANT SIGNATURE** _____ **DATE:** _____

APPROVED () **NOT APPROVED** () **VARIANCE REQUESTED** ()
VARIANCE GRANTED: () YES, DATE _____ () NO

PLANS RECEIVED: () YES **STAMPED:** () YES **SITE PLAN:** () YES
SEPTIC: () YES

Other: _____

PERMIT# _____ **FEE \$** _____ **Paid** () **Cash** () **CHK#** _____
INT _____

CHECKS MADE OUT TO THE TOWN OF BENTON.

Code Enforcement

Officer: _____ **DATE** _____

QUESTIONS CONTACT JOHN GRIFFIN CELL # 315-730-4743 ANYTIME