

Fee \$100

**TOWN OF CLAVERACK
BUILDING DEPARTMENT**

PO Box V
Mellenville, NY 12544
PHONE (518-672-4471)
FAX (518-672-4821)

ZBA REQUEST FOR INTERPRETATION

Date of Request: _____

Address of subject activity:

Suspected owner or tenant: _____

Street Address: _____

Nature of complaint: _____

Additional Details (log of events by date, people involved, and state specific section of the Town Law, etc. attach additional information as necessary):

Requestor's Information:

Name (Printed): _____ Name (Signature): _____

Mailing Address: _____

Phone Number: _____

Zoning Board of Appeals:

Date Received: _____

ZBA Response to Request:

Tax Map # _____

Final Report Issued: _____