VILLAGE OF FLORIDA ARCHITECTURAL REVIEW BOARD 33 S. MAIN STREET FLORIDA, NY 10921

APPLICATION

| A.R.B.FILE NO | Date: | |
|--|---------------------|---|
| Location of Property: | | |
| Tax Map Designation: Section: | Block: | Lot: |
| Applicant's Name: | | |
| Applicant's Address: | | |
| Zone: | Phone No.: | |
| Description of work proposed: | | |
| | | |
| | | |
| | | |
| | | |
| Please attach a colored architectural rerelation to the neighboring properties. include structures to the left and right | A photo of neighbor | ring properties should |
| | | nge of Florida nitectural Review rd |
| | Ko | Sout B Scott " |
| Applicant | | Chairman |

If the applicant is other than the owner of the property, the attached form must be submitted.

| AUTHORIZATION: | | | |
|--|------------------|--|--|
| State of New York, County of, being duly sworn deposes and says he is the owner and is duly authorized to perform or have performed said work and to make and file this application; that all statements are true and to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith. | | | |
| Sworn to before me | Owner Signature: | | |
| thisday of20 | Print Signature: | | |
| Notary Public: | | | |