

WAIVER REQUEST

PURSUANT TO TOWN CODE §220-65 (L)

Applicant: Susan Courcy	
Telephone #: <u>\$85-202-8371</u>	Email: paya 20 44hoo, Com
Subject Address: 4941 Toland Be	
Tax Map #: 98.09-1-10.000	CPN #:
Waiver requested for: SitzPlan	
(i.e. a professionally prepared site plan, landscaping requirements, etc.)	
Reasons for Waiver:	
1. last	
2.	
3.	
5.	
Additional Information:	
Additional Information:	
I hereby request a waiver of requirement(s) as de	escribed above pursuant to Town Code § 220-
65(L).	
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Susans Cooking	1/11/19
Signature of Applicant	Date

Planning Board approval of waiver (date):