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Guide to Submitting a 239 Application Form

1. Start an application

To start a new application for referral to the County, select from one of the two links to load the Planning Application form.

Oneida County

https://lfweb.ocgov.net/Forms/Oneida239

Herkimer County

https://lfweb.ocgov.net/Forms/Herkimer239Form

Anchowy J. Picente Jr. Count/Decative		John R. Kent Jr. Commissioner
<i>i</i> a	ONEIDA COUNTY DE/ACTINENT OF PLANNIN Inshiret Canter at Umain Batian • 121 Main David • Uma Phone: 115-199-3/10	
Submission Date 1106/2018		
INSTRUCTIONS Perment Is Geslen 222-4 en and in a such non-moldered comp or subdivisi the following: Chinck al that apply (New Yolk Date Dennet Maxipal Lev, if a manipality ties a is action must be renered to the department for revew, if such	dopted coning and aucelowere regulations, any access protein real property long within 500 feet o
Dises your project meet any of the full	owing criteria? (check all that apply):	
Cousty*		
D Herioner County D Onesia County Referring Data		
Applicant		
Appleant Name		
Mancipality Cantact Water		
Mancpalty Carcast Hune Bandles	municipality Contact Orial Address:	
Project Information		
Project Li-celler.		

2. Criteria

A 239 application form is only needed if your project meets at least one of the criteria listed. Check all that apply if there is more than one.

3. County

The County is automatically filled in depending on the link selected in Step 1. A drop-down menu is used to select the Municipality where the action is taking place, the Legislator's name and the referring body (i.e. PB, ZBA).

A municipal boundary

The right of way of an existing county or state road

The boundary of a county or state park or other recreation area

The boundary of any county or state owned property on which a public building or institution is located
The boundary or a farm operation located within the Agricultural District, as defined by Article 25-AA of the Agricultural & Markets Law (excluding area variance)

County*

Herkimer County Oneida County

Herkimer County Municipality*

Herkimer County Legislat

Frederick J Shaw

City of LITTLE FALLS

Referring Body

Legislative Body

4. Applicant

The Applicant Name is the name of the person/business applying for a zoning permit. Add the primary Municipal Contact, Phone Number and Email Address as the point of contact for this application. The email entered will be the one where all digital responses will be sent such as the referral letter and notice of final action.



Applicant Name:			
Sandy Brennan			
Municipality Contact Name:			
Joe Smith			
Municipality Contact Phone Number:	Municipality Contact Email Address		
555-555-5555	jsmith@yahoo.com		





5. Project Information

Provide a street address in the project location box, if one is available. Fill in the tax map number(s) where the project is located and provide the existing zoning classification. In the proposed action box, please provide a brief description of the project.

Project Information	1	
Project Location		
781 Elmgrove Road		
Nearest Intersecting Road:		
Name	Direction	Distance
Hinchey Road	East	1 mi
Tax Map Parcel (Map, Block, Lot 100-55-55.6	t)	
Dimensions/Area of Property		
4.1 acres		
Existing Zoning District		
R1		
Brief written summary of propo	sed action	
Conditional use permit to expand a lawful existing gas station and convenience store located on NXS 28 in the Town of Webb.		

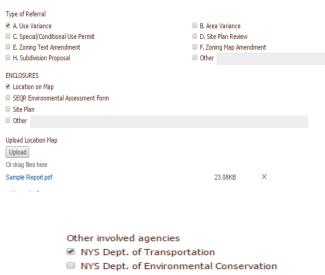
6. Type of Referral

Check the box(es) of the type of referral being applied. If you choose "Other", please describe the action in the box.

Based on the type of referral checked, you will be prompted for enclosures with an upload button. Files can be "uploaded" or "dragged & dropped" into the form window. These are the site plan, SEQR form, map, description, etc.

7. Other involved agencies

Check all agencies that will review the application. If you select the "Other" option, type the name of the agency in the box.



- Adirondack Park Agency
- Herkimer County Dept. of Public Works
- NY State Health Department
- Other

8. Additional Information

Use this box to provide any additional information about the project that would be helpful to the reviewers.

The contact listed for the municipality will receive an email within 30 days with a zip file with the recommendation letter and notice of final action letter.

Additional Information:

Additional information about the project.....