

## PART 1 – PLANNING/ZONING COORDINATION REFERRAL CATTARAUGUS COUNTY PLANNING DEPARTMENT

Municipality must complete this page for each referral being made.

Send to: Cattaraugus County Economic Development, Planning & Tourism, 303 Court Street, Little Valley, New York 14755

FROM:	TELEPHONE:""aaa						
FROM:(Referral Officer, Title)							
(Department, Municipality, Firm, etc.)		city	Legislative Body				
(Address)		Town	Planning Board				
		Village	Board of Appeals				
TYPE OF REFERRAL: (Please check appropriate box)							
Zoning Map Amendment Special Use Permit	Site Plan Review	Com	prehensive Plan				
Zoning Text Amendment Variance (area/use)	Moratorium		er				
Zonnig Text Amendment variance (area use)	Woratorium	Othe					
REQUIRED INFORMATION ON ZONING REFERRALS ON	LY:						
1. This planning/zoning case is forwarded to your office for review the General Municipal Law, New York State. The proposed ch			39-m of Article 12-B of				
the General Municipal Law, New Tork State. The proposed ch	ange concerns. (brieji)	v describe)					
2. Affected property is located at:							
Tax Map Parcel Number: Zoning District:							
3. State Environmental Review (SEQR) Status: Type I Determination of Significance: Positive Declar	Unlisted Ac ration Negative D		Type II Not issued				
4. Public Hearing: Date: Time:							
Location:							
Location.							
7. This material is sent to you for review and recommendation be	ecause the property affe	ected is located with	hin 500 feet of the:				
☐ Municipal boundary ☐ City	☐ Village	☐ Town					
☐ County or state right-of-way of a parkway, thruway, ex	pressway or other high	way					
☐ County or state park or other recreation area							
☐ Boundary of state or county-owned land used for public building or institution							
☐ Right-of-way of stream or drainage channel							
☐ Boundary of a farm operation located in an Agricultural District							
8. Enclosures:   Legal Notice   Map   Text	] Minutes □ Ag Da	ata Statement $\square$	SEQR				
IDENTIFICATION NO:							
			D (				
Signature of Rej	ierring Officer		Date				



## PART 2 – ACTION TAKEN/OFFICE USE ONLY

Your referral has received the following disposition from the Cattaraugus County Planning Board:

DATE ON REFERRAL NOTIO	СЕ: ааааааааааааааааааааааааа	FATE RECE	IVED:		
REQUEST RECEIVED BY: _					
TO:					
Regarding proposed planning/zon	ing action identified as:				
Please be advised that the Cattara	ugus County Planning Board:				
☐ Finds the referred matte	r not subject to review under Section	s 239-1 and 239-m.			
☐ Finds that the referred matter is consistent inconsistent with the Planning & Design Guidebooks that were adopted by the Cattaraugus County Legislature on May 26, 2004. Comments:					
the Cattaraugus County	Legislature on May 20, 2004. Com	nents.			
☐ Took the following action	on at its	meeting.			
☐ Has reviewed the referre	ed matter and motioned:				
☐ Approval	☐ Modifications	☐ Disapproval			
☐ No significant co	ountywide or inter-community impac	t			
☐ Suggests:					
☐ Advisory:					
DI 1 100 11 00 1			red to the second relative		
Please send notification of final action of this case to the Cattaraugus County Planning Board. If there is disagreement with Planning Board recommendations, please include a copy of the Resolution adopted ( <i>if any</i> ).					
IDENTIFICATION NUMBER:					
	aa Planning Official or Di	rector Signature	 Date		
	- tunning Official of Di		Duit		



## PART 3 – LOCAL NOTICE OF FINAL ACTION ON ZONING REFERRAL ONLY

Municipality must complete this page for each zoning referral that has been acted on by the Cattaraugus County Planning Board.

Send to: Cattaraugus County Economic Development, Planning & Tourism, 303 Court Street, Little Valley, NY 14755

## LOCAL ACTION ON ZONING REFERRALS

Pursuant to Section 239 (m) (6) of General Municipal Law. As mandated by State Law, this form *must* be completed and filed within 30 days after Final Action has been taken by the local agency.

			Date:			
Municipal	lity:					
Regarding	g action identified as:					
Agı	reement with County Planning Board	l Recommendations				
Ove	erruled County Planning Board Reco	mmendations				
Сору о	f Resolution attached: yes	no				
If not, sub	ostance of resolution listed below:					
-	Date		Signature of Referring Officer			
FROM: _	(Referral Office)		TELEPHONE: aaaaaa			
			FAX: aaaaaa			
	(Department, Municipality,	Firm, etc.)				
_	(Address)					

Article 12B, Section 239 (1) and (m) of the General Municipal Law requires the County Planning Board to review all zoning matters as specified by that resolution. It also provides that a recommendation of the County Planning Board may be overruled by the local referring agency. The local referring agency must pass a resolution expressing the reason for such action by a majority plus one vote of its membership. Article 12B requires that the local municipal agency file a report of its final action informing the County Planning Board of which action the local agency took.