

CITY OF ONEIDA
DEPARTMENT OF PLANNING AND DEVELOPMENT
109 North Main Street
Oneida, New York 13421

Project Location:		
Tax Map #:		
Applicant Name:		
Applicant Address (If Different):		
Zone:	Ward:	File #:

Zoning Amendment Application Submission Receipt

Received	Item
<input type="checkbox"/>	Cover Sheet
<input type="checkbox"/>	Zoning Amendment Application
<input type="checkbox"/>	Codes Office Denied Permit
<input type="checkbox"/>	Location Map from Assessor
<input type="checkbox"/>	Associated Fee
<input type="checkbox"/>	Site Plans (Per Section 143 of City Code)
<input type="checkbox"/>	SEQR Forms
<input type="checkbox"/>	Photos/Renderings (Optional)
<input type="checkbox"/>	Elevation Drawings (Optional)
<input type="checkbox"/>	Letter to the Mayor Requesting an Amendment
<input type="checkbox"/>	Legal Description
<input type="checkbox"/>	Up to Date Taxes Proof from Chamberlain
<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Other _____

Date Submitted: _____

Received By (Print): _____

Signature: _____

This receipt acknowledges that the City of Oneida Department of Planning and Development has received the items indicated above. This does not indicate completeness or approval of the application.