



Town of Clifton Park
 Town Hall Plaza
 Clifton Park, NY 12065
 Planning Department

Change of Use/Tenant Application

I. PROJECT INFORMATION:

Business/Project Name: _____

Business/Project Address: _____

Applicant Name: _____

Address: _____

Telephone #: _____ Fax #: _____ Email: _____

Property Owner (If different than Applicant AND the Owner does not sign below, please submit an **original, notarized "Owner Authorization" form - attached**):

Name: _____

If a corporation, please name a responsible party/designated officer: _____

Address: _____

Telephone #: _____ Fax #: _____ Email: _____

Business Representative Name/Company (if different from above): _____

Address: _____

Telephone #: _____ Fax #: _____ Email: _____

II. PROPOSED CHANGE: Change of Tenant (same use as existing): Change of Use:

Parcel identification # (SBL): _____

Lot Size (SF/acreage): _____

Present/Prior tenant/use: _____

Any additional tenants/uses on site: Yes No If Yes, please describe: _____

Proposed use/sales/service: _____

Total area of building/site to be occupied: _____ (SF) Total area of all buildings on-site: _____ (SF)

Parking: Existing # of spaces: _____ Proposed additional spaces (if any): _____

Hours of operation:

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours							

Expected peak hours of operation/business: _____

Number of employees: Full-time _____ Part-time _____ Seasonal _____

Applicant/Owner Signature: _____ Date: _____

(For Department Use Only)

Planning Board Action: Approved Disapproved Reason for Disapproval: _____

Signature: _____ Date: _____