## WETLANDS AND DRAINAGE APPLICATION TOWN OF NORTH CASTLE BUILDING DEPARTMENT

	DAT	E://	\$50 (min.) for Re \$250 (min.) for C	esidential Apps. $_{ m Commercial\ Apps.}$ $_{ m FE}$	E: \$
1.	NAME	E & ADDRESS OF	APPLICANT:	OWNER (IF DIE	FERENT):
	TELE	PHONE: ()		TELEPHONE: (_	
2.	STRE	ET ADDRESS OF ]			
			SECTION:	BLOCK:	Lot:
4.	IMPAG	CT STATEMENT (I	IF REQUIRED) P	REPARED BY:	
	DATE	D:/	Applican	t's Signature:	
NO	OTE:	THE PLANNING	BOARD, THE C		Y THE TOWN BOARD, ARD, OR THE TOWN NGINEER.
Do	you have	e any intention of teari	ng down a house to	build a new house with	nin the next SIX (6) months?
Do	you have	e any intention to expa	nd a house over 150	00 square feet within th	ne next SIX (6) months?
If tl	ne Plann	ing Board has granted	l you approval prev	iously, on what dates w	ere you approved? (List Below