

**TOWN OF LAGRANGE
PLOT PLAN**

**ZONING
RESIDENTIAL**

Instructions: Applicant Completes Sections A1-A4 of this form. Section B of this form will be completed by the Zoning Administrator.

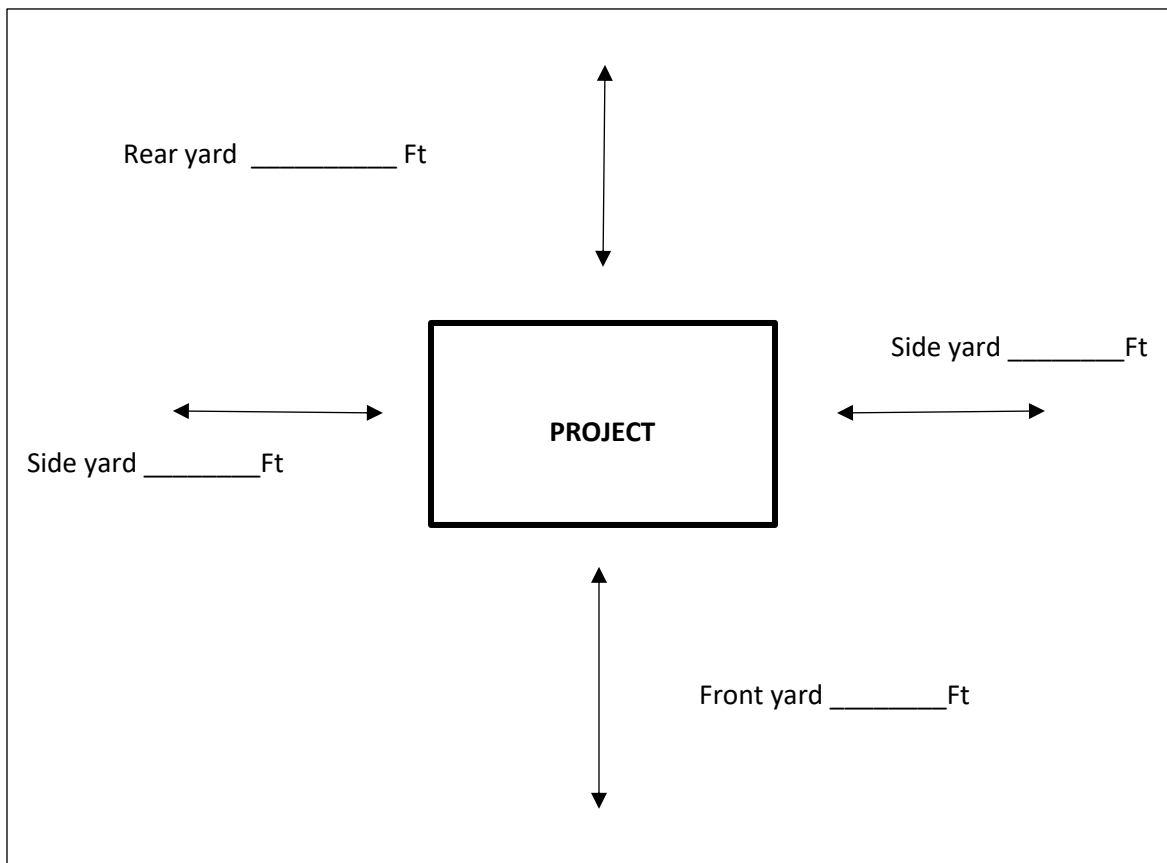
SECTION A1: APPLICANT & PROPERTY INFORMATION

NAME OF OWNER _____

LOCATION _____

DESCRIPTION OF WORK TO BE PERFORMED _____

SECTION A2: LOCATION OF PROPOSED IMPROVEMENT



SECTION B: OFFICE USE ONLY

DENIED (PURSUANT TO CHAPTER 240-28 SCHEDULE B OF THE ZONING CODE) _____ ZONING DISTRICT

COMMENTS _____

CLEAR FOR PERMIT

SIGNATURE OF ZONING ADMINISTRATOR _____ DATE _____