City of Lackawanna
Department of Development
2838 South Park Avenue – Room 113
Lackawanna, NY 14218
Tel: (716) 827-6421 Fax: (716) 827-1866



City of Lackawanna Zoning Board of Appeals Application

Date _____

Please complete the applicable items below, to include marking the style of request sought:

	Fee Schedule:
_____ Land Use Variance	$250.00
_____ Zoning Law Appeal	$250.00
Total:	$_____

Property Address: _____

Section, Block, Lot (S.B.L.) Number: _____

Description of Action to be Appealed: _____

_____

_____

_____

_____

Application is hereby made to the City of Lackawanna Zoning Board of Appeals for a Land Use Variance and/or Zoning Law Appeal as required by the Municipal Code of the City of Lackawanna. The applicant hereby agrees to comply with all applicable laws, rules, ordinances, and regulations.

Applicant Name | Applicant Signature

Applicant Address | Applicant Phone Number

Applicant Email | Applicant's Role (e.g. owner, lessee, agent/attorney, architect/engineer/contractor, etc.)

Property Owner Information:

Name: _____

Address: _____