

*Michael B. Specht*  
Supervisor



*Ian Smith*  
Building Inspector

# Town of Ramapo

237 Route 59  
Suffern, NY 10901

845-357-5100 x 280 PHONE      845-357-5140 FAX

## REQUEST FOR DENIAL LETTER

**THE FOLLOWING MUST BE TYPEWRITTEN OR PRINTED IN INK**  
**This application must be filled out in its entirety otherwise the Denial Letter will not be issued.**

I, \_\_\_\_\_, (owner/agent)

do hereby apply to The Town of Ramapo Building and Zoning Department for a Denial Letter as required by Chapter 376 - 144 of the Town of Ramapo Zoning Law.

**Legal Address:** \_\_\_\_\_

Section/Block/Lot: \_\_\_\_\_

Use Group: \_\_\_\_\_ Zone: \_\_\_\_\_

Present Use of Land: \_\_\_\_\_ (single family, two family, house of worship, etc.)

Proposed Scope of work: \_\_\_\_\_

**\*Print Full Name, Address and Telephone Number of Contact Person:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **e-mail address** \_\_\_\_\_

certifies that he/she is the owner or agent of all that certain lot, piece or parcel of land/or building described in the application and if not the owner that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application and agrees that the Town of Ramapo Zoning Ordinance will be complied with as well as other proper regulations relating to the construction or use of the proposed buildings and the land described on this application.

Signed \_\_\_\_\_