APPLICATION TO THE ZONING BOARD CHECK LIST

DATE: Application # 21 Applicant High Ridge Reel Es Location O Turn of River Contact # Lise Feinberg	CHECK LIST
Location OTOrnal River Contact # Lisa Feinberg	7-01
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(6) SETS FOR BOARD MEMBERS	
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Please check off who should receive a Refe	erral: (at least 35 days before board meeting)
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ENG	
HEALTHFIRE	WCCOG BOR
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Public Hearing Date	_ (35 + days after Referral date of letters) _ (10 to 15 days before hearing, excluding terminal dates)
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