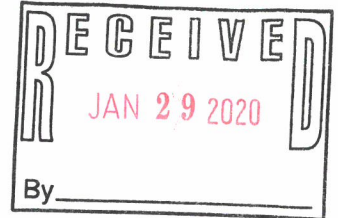




Conditional Use Permit Application
City of Rochester, New Hampshire



Date: 1/28/2020

Property information

Tax map #: 106; Lot #(s): 28; Zoning district: Mixed Use

Property address/location: 117 Highland St Unit, Rochester, NY 07868

Name of project (if applicable): Training wheels Driving School

Property owner

Name (include name of individual): George Asprogiannis

Mailing address: 165 Highland St, Rochester, NY 07868

Telephone #: (978) 459 4527 Fax: _____

Applicant/developer (if different from property owner)

Name (include name of individual): Tyler Biscan

Mailing address: P.O. Box 427, Crossfield, NH 03814

Telephone #: (603) 566-4270 Fax #: _____

Engineer/designer

Name (include name of individual): _____

Mailing address: _____

Telephone #: _____ Fax #: _____

Email address: _____ Professional license #: _____

Proposed Project

Please describe the proposed project: _____

open a Driven Ed school. will be inspected and licensed by
the Dept of safety

Please describe the existing conditions: Existing Strip mall. No construction
needed.

Submission of application

This application must be signed by the property owner, applicant/developer (if different from property owner), and/or the agent.

I (we) hereby submit this Conditional Use application to the City of Rochester Planning Board pursuant to the City of Rochester Zoning Ordinance and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As applicant/developer (if different from property owner)/as agent, I attest that I am duly authorized to act in this capacity.

Signature of property owner: _____

Date: _____

Signature of applicant/developer: _____

Date: 1/28/20

Signature of agent: _____

Date: _____

