

Incorporated Village of Lawrence

196 Central Ave Lawrence NY 11559

516-239-3987

Fax 516-239-9657

Building Department

AFFIDAVIT OF SERVING NOTICE

STATE OF NEW YORK)
) SS:
COUNTY OF NASSAU)

Attached is a radius map along with a complete and accurate list of property owners within a 300' radius of _____
(Address)

otherwise known as Section _____, Block _____, Lot _____.

_____, residing at _____,
(Name) (Address)

being duly sworn, deposes and says:

On the ____ day of _____, _____, I served a true copy of the notice required by the Rules and Regulations of the Board of Zoning Appeals of the Incorporated Village of Lawrence at least fourteen (14) days prior to the hearing date.

(Sign Name)

Sworn to before me this
____ day of _____, _____

Notary Public

Notary Stamp