

**TOWN OF LAGRANGE
PLANNING BOARD
PRE-APPLICATION**

Planning Board use:

Application fee: _____

Date received: _____

By: _____

1. Name of project: _____

2. Grid No. of parcel: _____

3. Location: _____

4. Total acreage: _____ Zoning District: _____

5. Applicant's name: _____ Phone No.: _____

Address: _____ e-mail: _____

6. Description of project:

Licensed Professional: _____

Signature

Date _____