**CHAUTAUQUA COUNTY**

**2% OCCUPANCY TAX-LAKES & WATERWAYS GRANT PROGRAM**

**REQUEST FOR ASSISTANCE**

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| --- | --- |
| Landowner’s Name: | Email Address: |
| Mailing Address: | Home Phone: |
| Work Phone: |
| Cell Phone: |
| Property Physical Address: | Property Tax SBL (new) as shown on tax bill: |
| Brief description of the problem that you wish to resolve with this project: |
| Have you completed any work with a technical consultant on this project to date? If you have not, a list of technical service providers will be offered to you. * Yes
* No

If yes, which technical consultant have you worked with?* Private Licensed Professional Engineer (list firm):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Chautauqua County Soil & Water Conservation District
* Chautauqua County Watershed Coordinator
* Chautauqua Lake & Watershed Management Alliance
* Other (list firm):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| Landowner’s Signature: | Date: |