TOWN OF WAPPINGER PLANNING BOARD SPECIAL USE PERMIT			Application No. Date Received: Fee Received: Escrow Received:		
IN ACCORDANCE WITH ZONING LAW, I HEREB' THE ISSUANCE OF A SP	Y MAKE APPLICA	TION TO THE PLA	0-53 OF THE TO ANNING BOAF	OWN OF WAPPINGER RD OR TOWN BOARD FOR	
PROJECT NAME	Old Myers Solar				
GRID NO.	135689-6258-03-376432		ZONIN	ZONING DISTRICT_R-80	
PROPERTY LOCATION	189 Myers Corners Rd				
NAME & ADDRESS OF A Old Myers NY LLC	APPLICANT (Corpo	ration or Individual)	l :		
501 Boylston Street	Boston	MA	0211	6	
Street Sam Bailly	Town	State +1 (617) 894-946	Zip 51	sam.bailly@lightstar.com	
Contact Person	The state of the s	Phone Number		Email	
Sean Thompson 22 Old Myers Corners Rd Street Sean Thompson	Wappingers Falls Town	NY State 845-518-24	137	12590 Zip seanthomp@aol.com	
Contact Person		Phone Number		Email	
PLAN APPROVAL OF PARCEL.	TH THE ABOVE AT	ORDINALNCE, I HE	EREBY MAKE	ANCE WITH THE APPLICATION FOR SITE SE ON THE AF ORESAID—	
PREPAREDBY: TRC DATED: 2/2/2 III. I HAVE, AS PART OF TOUSE" WHICH FULLY I	THESE CONCURRI DESCRIBES THE O	ENT APPLICATION PERATION AND I	MAINTENAN	ED A "STATEMENT OF CE OF SAID USE LISTED	
IN THE APPLICATION 3MWdc ground mounted celectricity and electricity be of solar panels, contributing	lual-use community ill savings to local cu	solar project. The parts	project will not	only provide clean ed farming between the rows	

Continued page 2 for Special Use Permit

Old Myers Solar				
Type Name (Corporation, LLC, Individual, etc.)				
2/3/23	Am Dalf			
Date 617-894-9461	Owner or representative's signature Sam Bailly, Director of Acquisitions			
Owner's Telephone No.	Type Nane and Tit 501Boylston St. Boston MA 02116			

***If this is a Corporation or LLC please provide documentation of authority to sign.

- THE REQUIRED FEES (NON-REFUNDABLE) AND PLANS MUST ACCOMPANY THE APPLICATION.
- APPLICANT IS RESPONSIBLE FOR THE COSTS INVOLVED IN PUBLISHING THE REQUIRED LEGAL NOTICE IN THE LOCAL NEWSPAPER.