

Zoning Board of Appeals

Town of Milford, NY

WHEN TO USE THIS FORM: This form is to be used by an aggrieved party who appeals to the board seeking a variance from the strict application of the requirements of the zoning ordinance. Such appeal can be filed only when the zoning enforcement officer has made an order, requirement, decision or determination which causes the applicant to seek relief in the form of a variance. This form should not be used for appeals where an interpretation is sought (see form ZBA-1). The applicant is responsible for complying with established ZBA rules and procedures which are available for inspection from the ZBA secretary. Appeals must be filed within 60 days of receipt of notice of Zoning Enforcement Officer's decision.

Instructions: Fully complete this application. Write "NA" when "non-applicable". Applications, complete with fees, shall be filed with the Zoning Enforcement Officer who will file a copy with the ZBA secretary.

OFFICE USE ONLY

Application No. V-	
Date of Appeal (Postmark or hand-delivered)	____/____/____
Official Date of Receipt	____/____/____
Date of Public Hearing	____/____/____
Date of Final Action	____/____/____
Date of Filing Decision with Town Clerk	____/____/____

To the Zoning Board of Appeals:

A. Statement of Ownership and Party of Interest:

1. The applicant(s) _____

(is) (are) the owner(s) of property situated at the following address:

_____ Tax Map Parcel No. _____

2. The above described property was acquired by the applicant on: ____/____/____

B. Basis for Request:

I, the applicant, hereby appeal to the Zoning Board of Appeals from the decision of the Zoning Enforcement Officer relative to my application for (choose one) Zoning Permit No. _____ Certificate of Occupancy No. _____ whereby the Zoning Enforcement Officer did deny my application for said (choose one) zoning permit/certificate of occupancy for the following proposed activity: _____

This denial was made because of a violation(s) of requirements of the zoning ordinance section number(s) _____. This appeal is made for (circle as appropriate) a use variance and/or area variance.

All applicants complete the following:

- Zoning district classification _____
- Proposed use _____

- C. Variance Application:

- a) State what type and size of an area variance you are requesting, i.e., 3 foot side yard variance, 10 foot rear yard variance etc.

b) Area variances may be granted only upon your showing that the literal application of the zoning regulations will result in "practical difficulty" which is shown only if each of the following three tests are passed:

1) Show that unless an area variance is granted, that you will suffer "a significant economic injury". _____

2) The town ZBA, not the applicant, must show at this point, that the zoning restriction involved is reasonably related to a legitimate exercise of the zoning power. THE TOWN, NOT THE APPLICANT, IS RESPONSIBLE FOR MAKING THIS FINDING.

c) Show that the particular restriction is not related to the public health, welfare and safety and that the area variance, if granted, will not adversely affect the surrounding community. _____

Signature(s) _____

Mailing Address _____

Date ____/____/____

Telephone No. _____

- Note: 1. When applicable, Parts II and III of the EAF and the entire SEQR (State Environmental Quality Review) process must be completed by the Zoning Board of Appeals before the application can be considered complete.
2. The Zoning Board of Appeals will notify you of their action in writing (form ZBA-4) within 62 days of the date of the public hearing held on this application.