



Town of Mount Hope
1706 Route 211 West, Otisville, NY 10963
845-386-1141

ZONING BOARD OF APPEALS

1. All appeals made to the Zoning Board of Appeals shall be in writing on forms supplied by the board and shall be accompanied by a fee of \$250.00
2. In addition, the applicant shall pay all expenses of the publication and mailing and be responsible for notifying all adjacent property owners within 500' of the property line (based on the Assessor's office records).
3. The applicant shall further furnish the board with the following:
 - a. Seven (7) copies of the application
 - b. Seven (7) copies of the maps
 - c. Seven (7) copies of denial from the building department, and/or planning department.

NOTE: Unless construction is commenced and diligently prosecuted within six months of the date of the granting of a variance, such variance shall become null and void.



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APPLICATION FOR PERMIT

Please identify if applicant or owner is a partnership or corporation and provide proper names and addresses of all partners or officers.

Name of Applicant: _____

Address & Phone #: _____

Property Owner: _____

Number of Owners: _____

CHECK APPLICABLE REQUEST:

_____ Review a decision

_____ Authorize a variance

_____ Grant special permit

_____ Interpretation of ordinance

_____ Determine boundary

WHERE APPLICABLE:

Set forth the relief requested, the present circumstances and facts, indicate the reasons relief should be granted, in applicant's opinion; set forth the any conditions and safeguard applicant is willing to impose.

Attach sketch of premises and identify physical conditions of the land area, size of land involved, size of any improvements an peculiar conditions, location of nearest roadways, adjoining buildings and waterways, location of waterways and sanitary facilities.

DATE: _____ SIGNATURE: _____