(5/31/2016)

APPLICATION FOR AN AREA VARIANCE
ZONING BOARD OF APPEALS

TOWN OF GHENT, NEW YORK

WHEN TO USE THIS FORM: This form is to be used by an aggrieved party who appeals to the board **SEEKING AN AREA VARIANCE** from the requirements of the zoning code. Such an appeal can be filed only when the Zoning-Code Enforcement Officer has made an order, requirements, decision or determination which caused the applicant to seek relief in the form of a variance. This form should NOT be used for appeals where an interpretation is sought. The applicant is responsible for complying with the established ZBA rules and procedures which are available at the Town Hall or from the ZBA Secretary. Appeals must be filed within 62 days of the filing of the ZEO-Code Enforcement Officer's decision.

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

OFFICE USE ONLY
Application No. V-_____
Date of Appeal: _____
(Postmark or Hand Delivered)
Date of Receipt by Board: _____
Date of Public Hearing: _____
Date of Final Action: _____
Date of Filing of Decision with
The Town Clerk: _____

Area Variance concerns property at the following address:

_____

County Tax Map Section: _____ Block_____ Lot _____

Zoning District Classification:_____ Date applicant acquired property: _____
(If the property is not owned by the applicant, the applicant must submit a statement by the property owner authorizing the applicant to appeal on his/her behalf).

Area Variance is sought for the following proposed activity:

_____

_____

Area Variance is sought because of a violation of the Town Zoning Code. (Indicate the article, section, subsection and paragraph of applicable code(s)):

_____

_____

State what type and size of an area variance you are requesting, e.g. 3 foot side yard variance:

_____

_____

State the reason you are applying for the area variance: _____

_____

_____

Describe the character of the neighborhood:

_____

_____

Please supply the names and addresses of all neighbors within 300 feet of your property lines.

_____

_____

_____(use additional paper if necessary)

Applicant:_____Telephone_____

Mailing Address: _____

Email Address:_____

Signature: _____ Date: _____

Zoning Code Enforcement Officer Signature: _____

Date of Enforcement Officer's Decision: _____