

ALL APPLICATIONS NEED TO BE SUBMITTED ELECTRONICALLY TO townclerk@townofpompey.org
Checks need to be mailed to Town Clerk, 8354 U.S. Route 20, Manlius, NY 13104

APPLICATION
TOWN OF POMPEY - ZONING BOARD OF APPEALS
Town of Pompey, 8354 U.S. Route 20, Manlius, NY 13104

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

THE ZONING BOARD OF APPEALS meets on the 2nd Monday of the month, this schedule is subject to change. For your application to be placed on the agenda for the Zoning Board, please see the attached list of meeting dates and file deadlines. The placement of your application on the ZBA agenda is subject to caseload and/or the evaluation of your application under the New York State Environmental Quality Review Act and the requirements for referral to the Onondaga County Planning agency.

The ZBA Board reserves the right to limit the number of cases it hears at any one meeting to the first applications received. Additional applications may be delayed until a later meeting despite submissions prior to the File by Date.

An incomplete application will not be considered at all.

Once an application has been scheduled a public meeting notice will be published in the Eagle Bulletin and a meeting agenda will be mailed/emailed to each applicant. All scheduled applications will be open for inspection at the Town of Pompey, Town Clerk's Office.

Unless otherwise notified, all ZBA meetings will begin at 7:00PM at the Pompey Town Hall, Town of Pompey, 8354 U.S. Route 20, Manlius, NY 13104. The applicant or an authorized representative is encouraged attend the meeting to present their application to the Zoning Board of Appeals Board.

VARIANCE SUBMITTAL REQUIREMENTS

1. Application packet **which must include - Building Permit that has been denied by the Code Officer, ZBA application, survey, building plans, disclosure affidavit and the (*short environmental assessment form - only for commercial property*)** will be needed for the ZBA Board.
2. One **copy** of an accurate survey map of the property drawn by a licensed land surveyor. The survey must designate existing structures and proposed structures or additions. The survey must also show driveways and/or parking spaces as well as the distances from the rear, front and side property lines to the closest point on the primary structure. Distances from accessory or secondary structures to boundary lines should be shown as appropriate.
3. Environmental Assessment Form (*only for commercial property*): Page 1 must be completed by the applicant if short form is used.

1. A fee of \$_____.00 for a residential area variance, \$_____.00 for a Commercial area variance, \$_____ for a use variance, checks are to be made payable to the Town of Pompey.

Area Variances - 5 Criteria Questions

If the applicant requests an area variance from the Town of Pompey Municipal Code, the applicant must consider the 5 criteria questions and be prepared to respond to the ZBA Board if requested to. These questions must be answered on a separate sheet of paper and submitted with your application.

1. Whether the benefit sought by the Applicant can be achieved by some other feasible method?
2. Whether the Variance will result in an undesirable change in the character of the neighborhood?
3. Whether the requested variance is substantial?
4. Whether the Variance will have an adverse effect on physical or environmental conditions?
5. Whether the alleged difficulty was self-created?

Use Variances:

If the applicant requests to use the subject property for purposes which are not allowed or are prohibited by the Town of Pompey Municipal Code, the applicant must demonstrate unnecessary hardship. To prove unnecessary hardship, the applicant must submit evidence to demonstrate that:

1. The applicant is deprived of all economic use or benefit from the property in question, which deprivation must be established by competent financial evidence.
2. The alleged hardship relating to the property is unique and does not apply to a substantial portion of the district or neighborhood.
3. That the request use variance, if granted, will not alter the essential character of the neighborhood; and
4. That the alleged hardship has not been self-created.

Use the space below or submit a separate documentation to present the necessary proof. Opportunity will also be given to present proof at the public hearing.

This section is for office use only.

Received by: _____

Date: _____

Payment: _____

Receipt # _____

TOWN OF POMPEY - ZONING BOARD OF APPEALS

APPLICANT/ PROPERTY INFORMATION

Date: _____

2. Property Address: _____

Property Tax Map# _____

The Applicants Purpose (new construction, alteration, extension, restoration, modification or other action) with respect to the subject property; _____

3. Owner of Property: _____

Owner's Address: _____

Owner's E-Mail: _____

Owner's Phone#: _____ Does Owners reside at property: _____

Signature of Property Owner: _____

4. Applicant / Representative / Attorney:

Name: _____ Company: _____

Address: _____

E-Mail: _____

Below this line" For Office Use Only

Application Received by: _____ Date: _____

Payment Receipt#: _____

Date of Denial of Building Permit Application: _____ Current Property Zoning: _____

The subject property will be in conformity with all zoning use as outlined in Chapter 155 of the Town of Pompey Municipal Code, except as stated here by the Code Officer:

APPLICANT WILL PROVIDE ANSWERS TO THE FOLLOWING QUESTIONS SO THE ZONING BOARD OF APPEALS CAN DETERMINE IF THE BENEFIT TO THE APPLICANT OUTWEIGHS THE DETRIMENT TO THE COMMUNITY. (Applicant may supplement the below with additional pages)

1. Whether the benefit sought by the Applicant can be achieved by some other feasible method?

2. Whether the Variance will result in an undesirable change in the character of the neighborhood?

3. Whether the requested variance is substantial?

4. Whether the Variance will have an adverse effect on physical or environmental conditions?

5. Whether the alleged difficulty was self-created?

**TOWN OF POMPEY
DISCLOSURE AFFIDAVIT**

This affidavit is a part of and must be completed and attached to every application, petition, request submitted for a *site plan, variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit.*

STATE OF NEW YORK)
) SS:
COUNTY OF ONONDAGA)

I _____ being duly sworn, deposes and says that (s) he is:
 (Notary)

(applicant, petitioner, corporation officer, property owner, etc.)

II. That deponent has read and is familiar with the provisions of the General Municipal Law, Section 809 which states:

- A. Every application, petition or request submitted for a site plan, variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit, pursuant to the provisions or any ordinance, local law, rule or regulation constituting the zoning and planning regulations of a municipality shall state the name, residence and the nature and extent of the interest of any state officer or any officer or employee of such municipality is a part, in the person, partnership or association making such application, petition or request (hereinafter called the applicant) to the extent known to such applicant.
- B. For the purpose of this action an officer or employee shall be deemed to have an interest in the applicant when (s)he, his/her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:
- 1) is the applicant, or
 - 2) is an officer, director, partner or employee of the applicant, or
 - 3) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or
 - 4) is a party to an agreement with such an applicant, express or implied, whereby (s) he may receive any payment or other benefit, whether or not for services rendered, or contingent upon the favorable approval of such application, petition or request.
- C. Ownership of less than five percent (5%) of the stock of a corporation whose stock is listed on the New York or American Stock Exchanges shall not constitute an interest for the purposes of this section.
- D. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

III. That no Town of Pompey officer, employee or a relative of either, as defined in Section 809 General Municipal Law has any interest in this application.

-OR-

If a Town of Pompey officer, employee or relative of either as defined in Section 809 General Municipal law has any interest in this application, the full particulars are provided on an attached sheet.

Date: _____, 20____

Date: _____, 20____

(Print Name of 1st Applicant)

(Print Name of 2nd Applicant)

(Signature of 1st Applicant)

(Signature of 2nd Applicant)

(Entity Name)

(Entity Name)

By (Officer) _____ (Title) _____

By (Officer) _____ (Title) _____

(Mailing Address of 1st Applicant)

(Mailing Address of 2nd Applicant)

(Telephone Number)

(Telephone Number)

ACKNOWLEDGEMENTS

STATE OF NEW YORK)
) SS:
COUNTY OF ONONDAGA)

On this ____ day of _____ in the year 20____, before me, the undersigned, a notary public in and for said state, personally appeared _____

(1st Applicants Name)

and _____ personally known to me or proved to me on the basis

(2nd Applicants Name)

of satisfactory evidence to be the individual whose name is subscribed to the within Petition and acknowledged to me the he/she/they executed the same in his/her/their capacity, and that by his/her/their signature(s) on the Petition, the individual or the persons upon behalf of which the individual acted executed the instrument.

Notary Public

SEAL

CORPORATE ACKNOWLEDGEMENT

STATE OF NEW YORK)
) SS:
COUNTY OF ONONDAGA)

_____-being duly sworn, deposes and says the
 (Applicant Name)

s(he) is the _____ of _____
 (Applicant Title) *(Company Name)*

corporation named in the within Application/Petition, that s(he) has read the foregoing affidavit and knows the contents thereof; that the same is true of s(he) own knowledge, except as to those matters therein stated to be alleged upon information and belief, and as to those matters s(he) believes it to be true.

 Applicant Signature

Subscribed to me before this _____ day
of _____, 20_____

 Notary Public

SEAL

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		☐	☐
2. Does the proposed action require a permit, approval or funding from any other government Agency?		NO	YES
If Yes, list agency(s) name and permit or approval:		☐	☐
3. a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)			
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Specify):			
☐ Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	☐	☐	☐
b. Consistent with the adopted comprehensive plan?	☐	☐	☐
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	☐	☐	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	☐	☐	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	☐	☐	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	☐	☐	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	☐	☐	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	☐	☐	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	☐	☐	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	☐	☐	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	☐	☐	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	☐	☐	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

AGRICULTURAL DATA STATEMENT

Per § 305-a of the New York State Agriculture and Markets Law, any application for a special use permit, site plan approval, use variance, or subdivision approval requiring municipal review and approval that would occur on property within a New York State Certified Agricultural District containing a farm operation or property with boundaries within 500 feet of a farm operation located in an Agricultural District shall include an Agricultural Data Statement.

A. Name of applicant: _____

Mailing address: _____

B. Description of the proposed project: _____

C. Project site address: _____ Town: _____

D. Project site tax map number: _____

E. The project is located on property:

☐ within an Agricultural District containing a farm operation, or

☐ with boundaries within 500 feet of a farm operation located in an Agricultural District.

F. Number of acres affected by project: _____

G. Is any portion of the project site currently being farmed?

☐ Yes. If yes, how many acres _____ or square feet _____ ?

☐ No.

H. Name and address of any owner of land containing farm operations within the Agricultural District and is located within 500 feet of the boundary of the property upon which the project is proposed.

I. Attach a copy of the current tax map showing the site of the proposed project relative to the location of farm operations identified in Item H above.

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### FARM NOTE

Prospective residents should be aware that farm operations may generate dust, odor, smoke, noise, vibration and other conditions that may be objectionable to nearby properties. Local governments shall not unreasonably restrict or regulate farm operations within State Certified Agricultural Districts unless it can be shown that the public health or safety is threatened.

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Name and Title of Person Completing Form

Date