SOUTHOLD TOWN ZONING BOARD OF APPEALS

Town Annex/First Floor
54375 Main Road, P.O. Box 1179, Southold, NY 11971
Phone (631) 765-1809
Email: elizabeths@southoldtownny.gov or donnaw@southoldtownny.gov

Instructions and Application for a Special Exception Permit for an Accessory Apartment in an Accessory Building

Subject to the provisions of Section 280-13B(13) of the Town Code
(revision May 13, 2025)

Required Submissions:

To be submitted to the Office of the Zoning Board of Appeals: one original and eight (8) copies of collated sets of the following with the Original Signed Set on top and your check for payment of fee of $1,000.00 attached:

1. **Completed Application:** Typed or neatly printed, filled out COMPLETELY, signed by the property owner, and notarized.
2. **Certificates of Occupancy and Deed:** Submit one copy of the Certificate of Occupancy for the principal dwelling and one copy for the subject accessory building (if existing), and the current recorded deed showing proof of ownership.
3. **Property Tax Card:** which you may obtain from the Southold Town Assessor's Office
4. **Documented Proof of Occupancy**: One of the dwelling units shall be for the sole exclusive use of the owner or family member as defined in chapter 280-4. The other dwelling unit shall be leased for year-round occupancy, evidenced by a written lease for a term of one or more years. Along with a recorded deed showing proof of ownership by the applicant, the following forms of proof are required showing the owner's street address, such utility bills and a notarized affidavit from the property owner. If rental is to a family member, documented proof of relationship must be provided such as a birth or marriage certificate or notarized affidavit from the property owner.
5. **Survey:** showing lot size, existing structures and the location of at least three parking spaces (minimum size 9 ft. x 18 ft. for each).
6. **Floor Plan(s) and Livable Floor Area Calculations.** Floor plans of the entire accessory building must be submitted and signed by the preparer, showing all spaces and uses within the building. A floor plan for the proposed accessory apartment, which must be located on one floor only and contain no more than one full bathroom, must include the dimensions of each space and the total square footage of the livable floor area as defined by Section 280-4 of the Town Code.
7. **Recent Photographs of the exterior and interior of the proposed Accessory Apartment:** Attach photos to a sheet of paper and add owner's name and date of photos taken.
8. **ZBA Questionnaire, Agricultural Data Statement, and Short EAF Form (see attached).**
9. **ZBA BOARD ACTIONS:** Attach any prior ZBA Board Action decisions on the property
10. **Authorization/Transactional Disclosure Form (if applicable):** If the applicant is not one of the owners, the applicant must furnish a written letter of authorization from the owner to act as the owner's agent, and complete a Transactional Disclosure Form stating their interest, if any, in the subject property (see attached).
11. **Filing Fee:** Attach a check in the amount **of $1,000.00** payable to the Southold Town Clerk. Your filing receipt will be mailed later to you, after review and acceptance by the ZBA Office. **For variances other than exceeding or below allowable floor area, a fee will be applied.**

Page 2 – Accessory Apartment Application – Instructions:

Application Process:

Verification of Livable Floor Area and Review by the Building Department

Once the above information is received, the ZBA office will forward your application to the Building Department for verification of the livable floor area of your proposed accessory apartment which by code must be no less than 220 square feet nor exceed 750 square feet in size. If the Building Department determines that the livable floor area is not conforming to the code, the Board of Appeals will consider the variance request as part of the Special Exception application and will not require the applicant to pay an additional fee **for exceeding or below the allowable livable floor area.** The Building Department will also review your application to determine if your project requires site plan approval from the Planning Board, variance relief from the ZBA, and/or permits from any other agency per Town code. Once the Building Department has verified the livable floor area and made its determination, your application will be deemed complete and will be calendared for a public hearing.

Public Hearing and Notice

After reviewing your application and documentation for completeness, the ZBA office will contact you to confirm the date and time of a public hearing on your application. One property owner-resident must attend this scheduled hearing which will take place in the Meeting Hall of Southold Town Hall located at 53095 Main Road in Southold. Once calendared, our Department will provide further instructions and a copy of the official legal notice which we will publish in the local newspaper, a yellow sign for you to post on your property notifying the public of the date and time of your hearing, and an area map showing the surrounding lots near your property that will require a certified mail notice from you with a cover letter. Later we will need completed affidavit forms confirming the mailings and posting.

Site Inspection

Also prior to your scheduled public hearing, the ZBA office will call you to set up an appointment for Members of the Board of Appeals to conduct an interior site inspection of your proposed accessory apartment. Members of the Board will inspect separately, since three or more members present would be considered a quorum, which is not permitted without public notice.

Obtaining a CO and Permit Renewal

Please be aware that an inspection and issuance of a Certificate of Occupancy from the Building Inspector is required by code before an accessory apartment may be lawfully occupied. Also, an accessory apartment permit is not transferable to a future owner, so any future owner must reapply to the ZBA. In addition, an annual renewal inspection is required by the Building Department

PLEASE NOTE: It is the applicant/agent's responsibility to review the contents of their ZBA office file for updates on any correspondence received from neighbors and/or agencies such as LWRP, County Planning, Trustees, Town Planning, etc. prior to the date of any scheduled public hearing. Applicants and/or Agents must also be prepared to present the merits of their application to the Board of Appeals at the public hearing, based upon the standards contained in the Southold Town Code which the Board will use to make a determination on your application. The relevant sections of the code, which may be found on the Town's website and which are referred to in the application form itself include: Section §280-4 (Definitions: Accessory Apartment, Family Member, Livable Floor Area, Rental Permit) Section §280-13(B)(13)(a)-(k) and Sections §280-142 and §280-143.

TOWN OF SOUTHOLD
ZONING BOARD OF APPEALS
Phone (631) 765-1809
APPLICATION FOR A SPECIAL EXCEPTION PERMIT FOR AN ACCESSORY APARTMENT IN AN ACCESSORY BUILDING

Applicant (s) Name(s) _____

Applicant(s) Address _____

Phone: _____ Email: _____

[ ] I/we are the owners of the subject property
[ ] I am the agent for the property owner and my Letter of Authorization and Transactional Disclosure Form is attached.

Representative (if other than applicant): _____

Address _____

Phone: _____ Email: _____

A. Statement of Ownership and Interest:

_____ is (are) the owner(s) of the property known and referred to as

_____

House No. Street Hamlet Zip Code

Identified on the Suffolk County Tax Maps as District 1000, Section _____ Block _____ Lot(s) _____ Lot Size _____ Zone District _____ as shown on the attached deed and survey

The above-described property was acquired by the owner(s) on _____

I/we hereby apply to the Zoning Board of Appeals for a Special Exception Permit pursuant to Section §280-13B(13) of the Zoning Ordinance to establish an accessory apartment in an accessory building as shown on the attached survey/site plan and floor plan(s)

B. Project Description:

_____

_____

_____

Application Page 2, Special Exception for Accessory Apartment

C. The applicant alleges that the approval of this special exception would be in harmony with the intent and purpose of said zoning ordinance, and that the proposed use conforms to the standards prescribed therein and would not be detrimental to property or persons in the neighborhood for the following reasons:

_____

_____

D. The applicant alleges that the following standards prescribed by Section §280-13(B)(13)(a)-(k) of the zoning ordinance will be met:

a. The accessory apartment will be located in the accessory building.
b. The owner of the premises shall occupy either the existing single-family dwelling or the accessory apartment in the detached accessory structure as the owners' principal residence. The other dwelling unit shall be occupied by a family member as defined in Section §280-4 of the code or a resident who is currently on Southold Town's Affordable Housing registry and is eligible for placement, evidenced by a written lease, for a term of one or more years.
c. The accessory apartment shall contain no less than 220 square feet and does not exceed 750 square feet of livable floor as defined in Section §280-4 of the code
d. The accessory apartment will be located on one floor of the accessory building and will contain No more than two bedrooms and No more than one bathroom.
e. A minimum of three on-site parking spaces shall be provided as shown on the attached survey.
f. Not more than one (1) accessory apartment shall be permitted on this parcel.
g. No Bed and Breakfast facilities, as authorized by Section §280-13(B)(14) hereof shall be permitted in or on the premises for which an accessory apartment is authorized or exists.
h. The accessory apartment will meet the requirements of a dwelling unit as defined in Section 280-4 of the Zoning Code.
i. This conversion shall be subject to a building permit, inspection by the Building Inspector and Renewal of Certificate of Occupancy annually.
j. The existing building, together with this accessory apartment, shall comply with all other requirements of Chapter §280 of the Town Code of the Town of Southold.
k. This conversion for the accessory apartment shall comply with all other rules and regulations of the New York State Construction Code and other applicable codes.

E. The property which is the subject of this application *(check all that apply)*:
[ ] has not changed since the issuance of the attached Certificates of Occupancy
[ ] has changed or received additional building permits. Certificates of Occupancy for these changes are attached or will be furnished
[ ] has been the subject of a prior ZBA decision(s), copies are attached

_____
Owner Signature

COUNTY OF SUFFOLK)
ss.:
STATE OF NEW YORK)

Sworn to before me this day of , 20

_____ (Notary Public)

QUESTIONNAIRE
FOR FILING WITH YOUR ZBA APPLICATION

A. Is the subject premises listed on the real estate market for sale?
_____Yes _____No

B. Are there any proposals to change or alter land contours?
_____No _____Yes, please explain on attached sheet.
_____

_____

C. 1.) Are there areas that contain sand or wetland grasses? _____
2.) Are those areas shown on the survey submitted with this application? _____
3.) Is the property bulk headed between the wetlands area and the upland building area? _____
4.) If your property contains wetlands or pond areas, have you contacted the Office of the Board of Trustees for its determination of jurisdiction? _____
Please confirm status of your inquiry or application with the Trustees:
_____and if issued, please attach copies of permit with conditions and approved survey.

D. Is there a depression or sloping elevation near the area of proposed construction at or below five feet above mean sea level? _____

E. Are there any patios, concrete barriers, bulkheads or fences that exist that are not shown on the survey that you are submitting? _____Please show area of the structures on a diagram if any exist or state none on the above line.

F. Do you have any construction taking place at this time concerning your premises? _____
G. If yes, please submit a copy of your building permit and survey as approved by the Building Department and please describe: _____

H. Please attach all pre-certificates of occupancy and certificates of occupancy for the subject premises.

I. Do you or any co-owner also own other land adjoining or close to this parcel? _____
If yes, please label the proximity of your lands on your survey.

J. Please list present use or operations conducted at this parcel
_____ and the proposed use
_____
K. (example: existing single family, proposed: same with garage, pool or other)

_____
Authorized signature and Date

AGRICULTURAL DATA STATEMENT
ZONING BOARD OF APPEALS
TOWN OF SOUTHOLD

WHEN TO USE THIS FORM: ***This form must be completed by the applicant for any special use permit, site plan approval, use variance, area variance or subdivision approval on property within an agricultural district OR within 500 feet of a farm operation located in an agricultural district. All applications requiring an agricultural data statement must be referred to the Suffolk County Department of Planning in accordance with Section 239m and 239n of the General Municipal Law.***

1. Name of Applicant:_____
2. Address of Applicant:_____
3. Name of Land Owner (if other than Applicant):_____
4. Address of Land Owner:_____
5. Description of Proposed Project:
6. Location of Property: (Road and Tax map number)_____
7. Is the parcel within 500 feet of a farm operation? { } Yes { } No
8. Is this parcel actively farmed? { } Yes { } No
9. Name and addresses of any owner(s) of land within the agricultural district containing active farm operations. Suffolk County Tax Lot numbers will be provided to you by the Zoning Board Staff, it is your responsibility to obtain the current names and mailing addresses from the Town Assessor's Office (765-1937).

NAME and ADDRESS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

(Please use the back of this page if there are additional property owners)

_____ _____/_____/_____
Signature of Applicant Date

The Suffolk County Tax Map numbers may be obtained in advance when requested from the office of the Zoning Board of Appeals at 631-765-1809.

Note:
1. The local Board will solicit comments from the owners of land identified above in order to consider the effect of the proposed action on their farm operation. Solicitations will be made by supplying a copy of this statement.
2. Comments returned to the local Board will be taken into consideration as part as the overall review of this application.
3. Copies of the completed Agricultural Data Statement shall be sent by applicant to the property owners identified above. The cost for mailing shall be paid by the Applicant at the time the application is submitted for review.

617.20
Appendix B
Short Environmental Assessment Form

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:	

	NO	YES
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? 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 governmental Agency? If Yes, list agency(s) name and permit or approval:	NO	YES

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, adjoining and near the proposed action.
□ Urban □ Rural (non-agriculture) □ Industrial □ Commercial □ Residential (suburban)
□ Forest □ Agriculture □ Aquatic □ Other (specify): _____
□ Parkland

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations?			
b. Consistent with the adopted comprehensive plan?			

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____		
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		
b. Are public transportation service(s) available at or near the site of the proposed action?		
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?		
9. Does the proposed action meet or exceed the state energy code requirements? 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? If No, describe method for providing potable water: _____		
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____		
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?		
b. Is the proposed action located in an archeological sensitive area?		
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?		
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: _____		

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:
☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional
☐ Wetland ☐ Urban ☐ Suburban

	NO	YES
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?		
16. Is the project site located in the 100 year flood plain?		
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? ☐ NO ☐ YES		
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☐ NO ☐ YES		

	NO	YES
18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: _____ Date: _____

Signature: _____

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing: a. public / private water supplies?		
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

Town of Southold

LWRP CONSISTENCY ASSESSMENT FORM

A. INSTRUCTIONS

1. All applicants for permits* including Town of Southold agencies, shall complete this CCAF for proposed actions that are subject to the Town of Southold Waterfront Consistency Review Law. This assessment is intended to supplement other information used by a Town of Southold agency in making a determination of consistency. **Except minor exempt actions including Building Permits and other ministerial permits not located within the Coastal Erosion Hazard Area.*

2. Before answering the questions in Section C, the preparer of this form should review the exempt minor action list, policies and explanations of each policy contained in the Town of Southold Local Waterfront Revitalization Program. A proposed action will be evaluated as to its significant beneficial and adverse effects upon the coastal area (which includes all of Southold Town).

3. If any question in Section C on this form is answered "yes", then the proposed action may affect the achievement of the LWRP policy standards and conditions contained in the consistency review law. Thus, the action should be analyzed in more detail and, if necessary, modified prior to making a determination that it is consistent to the maximum extent practicable with the LWRP policy standards and conditions. If an action cannot be certified as consistent with the LWRP policy standards and conditions, it shall not be undertaken.

   A copy of the LWRP is available in the following places: online at the Town of Southold's website (southoldtown.northfork.net), the Board of Trustees Office, the Planning Department, all local libraries and the Town Clerk's office.

B. DESCRIPTION OF SITE AND PROPOSED ACTION

SCTM# _____-_____-_____

The Application has been submitted to (check appropriate response)**:**

Town Board ☐ **Planning Dept.** ☐ **Building Dept.** ☐ **Board of Trustees** ☐

1. Category of Town of Southold agency action (check appropriate response):

   (a) Action undertaken directly by Town agency (e.g. capital construction, planning activity, agency regulation, land transaction) ☐

   (b) Financial assistance (e.g. grant, loan, subsidy) ☐

   (c) Permit, approval, license, certification: ☐

Nature and extent of action:

_____

_____

_____

Location of action: _____

Site acreage: _____

Present land use: _____

Present zoning classification: _____

2. If an application for the proposed action has been filed with the Town of Southold agency, the following information shall be provided:

(a) Name of applicant: _____

(b) Mailing address: _____

_____

(c) Telephone number: Area Code ( ) _____

(d) Application number, if any: _____

Will the action be directly undertaken, require funding, or approval by a state or federal agency?

Yes ☐ No ☐ If yes, which state or federal agency? _____

DEVELOPED COAST POLICY

Policy 1. Foster a pattern of development in the Town of Southold that enhances community character, preserves open space, makes efficient use of infrastructure, makes beneficial use of a coastal location, and minimizes adverse effects of development. See LWRP Section III – Policies; Page 2 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **(Not Applicable - please explain)**

_____

_____

_____

_____

_____

_____

Attach additional sheets if necessary

Policy 2. Protect and preserve historic and archaeological resources of the Town of Southold. See LWRP Section III – Policies Pages 3 through 6 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

_____

_____

_____

Attach additional sheets if necessary

Policy 3. Enhance visual quality and protect scenic resources throughout the Town of Southold. See LWRP Section III – Policies Pages 6 through 7 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

NATURAL COAST POLICIES

Policy 4. Minimize loss of life, structures, and natural resources from flooding and erosion. See LWRP Section III – Policies Pages 8 through 16 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

Policy 5. Protect and improve water quality and supply in the Town of Southold. See LWRP Section III – Policies Pages 16 through 21 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

Policy 6. Protect and restore the quality and function of the Town of Southold ecosystems including Significant Coastal Fish and Wildlife Habitats and wetlands. See LWRP Section III – Policies; Pages 22 through 32 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

Policy 7. Protect and improve air quality in the Town of Southold. See LWRP Section III – Policies Pages 32 through 34 for evaluation criteria. See Section III – Policies Pages; 34 through 38 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

Policy 8. Minimize environmental degradation in Town of Southold from solid waste and hazardous substances and wastes. See LWRP Section III – Policies; Pages 34 through 38 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

PUBLIC COAST POLICIES

Policy 9. Provide for public access to, and recreational use of, coastal waters, public lands, and public resources of the Town of Southold. See LWRP Section III – Policies; Pages 38 through 46 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **(Not Applicable – please explain)**

Attach additional sheets if necessary

WORKING COAST POLICIES

Policy 10. Protect Southold's water-dependent uses and promote siting of new water-dependent uses in suitable locations. See LWRP Section III – Policies; Pages 47 through 56 for evaluation criteria.

☒ Yes ☐ No ☒ (Not Applicable – please explain)

Attach additional sheets if necessary

Policy 11. Promote sustainable use of living marine resources in Long Island Sound, the Peconic Estuary and Town waters. See LWRP Section III – Policies; Pages 57 through 62 for evaluation criteria.

☒ Yes ☐ No ☒ Not Applicable – please explain

Attach additional sheets if necessary

Policy 12. Protect agricultural lands in the Town of Southold. See LWRP Section III – Policies; Pages 62 through 65 for evaluation criteria.

☒ Yes ☐ No ☒ Not Applicable – please explain

Attach additional sheets if necessary

Policy 13. Promote appropriate use and development of energy and mineral resources. See LWRP Section III – Policies; Pages 65 through 68 for evaluation criteria.

☒ Yes ☐ No ☒ Not Applicable – please explain

Board of Zoning Appeals Application

OWNER'S AUTHORIZATION

(Where the Applicant is not the Owner)

I, _____ residing at _____
(Print property owner's name) (Mailing Address)

_____ do hereby authorize _____
(Agent)

_____ to apply for variance(s) on my behalf from the

Southold Zoning Board of Appeals.

By signing this document, the Property Owner understands that pursuant to Chapter 280-146(B) of the Code of the Town of Southold any variance granted by the Board of Appeals shall become null and void where a Certificate of Occupancy has not been procured, and/or a subdivision map has not been filed with the Suffolk County Clerk, within three (3) years from the date such variance was granted. The Board of Appeals may, upon written request prior to the date of expiration, grant an extension not to exceed three (3) consecutive one (1) year terms. IT IS THE PROPERTY OWNER'S RESPONSIBILITY TO ENSURE COMPLIANCE WITH THE CODE REQUIRED TIME FRAME DESCRIBED HEREIN.

_____ _____
(Owner's Signature) (Dated)

_____
(Print Owner's Name)

APPLICANT/OWNER
TRANSACTIONAL DISCLOSURE FORM

The Town of Southold's Code of Ethics prohibits conflicts of interest on the part of town officers and employees. The purpose of this form is to provide information which can alert the town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME : _____

(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person's or company's name.)

TYPE OF APPLICATION: (Check all that apply)

Tax grievance _____
Variance _____
Change of Zone _____
Approval of Plat _____
Other (activity) _____

Building Permit _____
Trustee Permit _____
Coastal Erosion _____
Mooring _____
Planning _____

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southold? "Relationship" includes by blood, marriage, or business interest. "Business interest" means a business, including a partnership, in which the town officer or employee has even a partial ownership of (or employment by) a corporation in which the town officer or employee owns more than 5% of the shares.

YES _____ **NO** _____

If you answered "YES", complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southold _____

Title or position of that person _____

Describe the relationship between yourself (the applicant/agent/representative) and the town officer or employee. Either check the appropriate line A) through D) and/or describe in the space provided.

The town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply) :

_____ **A) the owner of greater that 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation)**

_____ **B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation)**

_____ **C) an officer, director, partner, or employee of the applicant; or**

_____ **D) the actual applicant**

DESCRIPTION OF RELATIONSHIP

_____
_

_____
_

Submitted this _____ **day of** _____, **20**_____

Signature _____

Print Name _____

AGENT/REPRESENTATIVE
TRANSACTIONAL DISCLOSURE FORM

The Town of Southold's Code of Ethics prohibits conflicts of interest on the part of town officers and employees. The purpose of this form is to provide information which can alert the town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME : _____
(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person's or company's name.)

TYPE OF APPLICATION: (Check all that apply)

Tax grievance _____	Building Permit _____
Variance _____	Trustee Permit _____
Change of Zone _____	Coastal Erosion _____
Approval of Plat _____	Mooring _____
Other (activity) _____	Planning _____

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southold? "Relationship" includes by blood, marriage, or business interest. "Business interest" means a business, including a partnership, in which the town officer or employee has even a partial ownership of (or employment by) a corporation in which the town officer or employee owns more than 5% of the shares.

YES _____ **NO** _____

If you answered "YES", complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southold _____

Title or position of that person _____

Describe the relationship between yourself (the applicant/agent/representative) and the town officer or employee. Either check the appropriate line A) through D) and/or describe in the space provided.

The town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply) :

_____ **A) the owner of greater that 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation)**

_____ **B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation)**

_____ **C) an officer, director, partner, or employee of the applicant; or**

_____ **D) the actual applicant**

DESCRIPTION OF RELATIONSHIP

_____
_

_____
_

Submitted this _____ **day of** _____, **20**_____

Signature _____

Print Name _____

RESOLUTION 2025-390
ADOPTED

DOC ID: 21321

THIS IS TO CERTIFY THAT THE FOLLOWING RESOLUTION NO. 2025-390 WAS ADOPTED AT THE REGULAR MEETING OF THE SOUTHOLD TOWN BOARD ON MAY 13, 2025:

WHEREAS, there has been presented to the Town Board of the Town of Southold, Suffolk County, New York, on the 18th day of March, 2025, a Local Law entitled **"A Local Law in relation to an Amendment to Chapter 280, Zoning, Accessory Apartments"** and

WHEREAS that the Town Board of the Town of Southold held a public hearing on the aforesaid Local Law at which time all interested persons were given an opportunity to be heard, now therefor be it

RESOLVED that the Town Board of the Town of Southold hereby ENACTS the proposed Local Law entitled, **"A Local Law in relation to an Amendment to Chapter 280, Zoning, Accessory Apartments"** which reads as follows:

LOCAL LAW NO. 5 of 2025

A Local Law entitled, **"A Local Law in relation to an Amendment to Chapter 280, Zoning, Accessory Apartments"**

BE IT ENACTED by the Town Board of the Town of Southold as follows:

I. PURPOSE

The Purpose of the amendment is to update the Southold Town Code with regard to Accessory Apartments.

II. AMENDMENT

The Southold Town Code is hereby amended by removing the struck through words and adding the underlined words as follows:

§ 280-13(B)(13)(e)

The entirety of the living floor area of the accessory apartment must be on one floor of the accessory structure. If established on the first floor, access to any storage area above shall be by pull-down ladder staircase only. ~~The structure must have been certificated a minimum of three years prior to the establishment of the accessory apartment.~~

§280-13(B)(13)(i)

Occupancy of resident structures on the premises shall be subject to the issuance of a~~n~~**bi-**annual rental permit in accordance with § 280-13D and the following requirements:

[1] One of the dwelling units shall be for the sole, exclusive occupancy of the owner or family member as defined in § 280-4. The other dwelling unit shall be leased for

year-round occupancy evidenced by a written lease for a term of ~~one~~ **no less than one year and no more than two** years to:

[a] A family member; or

[b] A resident who is currently on the Southold Town Affordable Housing Registry and eligible for placement.

[2] Rents charged to a resident on the Affordable Housing Registry shall not exceed the rent established by the Town Board annually pursuant to § 280-30F of this Code.

[3] No accessory apartment shall be occupied by more than the number of persons permitted to occupy the dwelling unit under Section 404 of the Property Maintenance Code of the New York State Uniform Fire Prevention and Building Code.

[4] An accessory apartment shall only be occupied or otherwise utilized in accordance with the certificate of occupancy issued for the dwelling unit.

[5] Upon approval of the special exception and prior to the issuance of a rental permit, the applicant shall file covenants and restrictions with the Suffolk County Clerk's office in a form approved by the Town Attorney. The covenants and restrictions shall include terms and conditions deemed necessary by the Zoning Board of Appeals to ensure that: 1) the accessory apartment shall only be rented to a family member or resident who qualifies to be on the Southold Town Affordable Housing Registry, and 2) the special exception approval and resulting rental permit are nontransferable and any future owner must reapply for the permit.

III. SEVERABILITY

If any clause, sentence, paragraph, section, or part of this Local Law shall be adjudged by any court of competent jurisdiction to be invalid, the judgment shall not affect the validity of this law as a whole or any part thereof other than the part so decided to be unconstitutional or invalid.

IV. EFFECTIVE DATE

This Local Law shall take effect immediately upon filing with the Secretary of State as provided by law.

Denis Noncarrow
Southold Town Clerk

RESULT: **ADOPTED [UNANIMOUS]**
MOVER: Jill Doherty, Councilperson
SECONDER: Greg Doroski, Councilperson
AYES: Mealy, Smith, Doherty, Evans, Doroski, Krupski Jr

ACCESSORY APARTMENT IN AN ACCESSORY STRUCTURE CHECKLIST

(1st application – all original signatures, others can be photocopies, require 2 sets of plans and surveys originals, others can be photocopies 11x17)

____Application-notarized

____All CO's

____Deed

____Property Card

____ZBA Questionnaire

____AG Data Statement-if within 500 ft of AG properties

____Short EAF

____LWRP

____Authorization Form (homeowner)

____Transactional – Homeowner and Agent

____Photos – interior and exterior

____ZBA priors – if any on property

____Survey (3 parking spaces 9'x18') – check to see if area variances may be needed

____Floor plans-show livable floor calculations-220sq ft – 750sq ft (2 bed, 1 bath)

____Rental agreement-lease
- ____Rental to Family member – need proof of relationship
- ____Rental to Town of Southold Affordable Housing Registry – documentation from Coordinator (at Town Hall)

____Utility Bills

____Filing fee ($1000) "Town of Southold" as of 10/4/22

Add'l paperwork:
____Birth Cert
____LLC (if applicable)
____Proof of residency (notarized)
____Driver's License
____Voter Registration
____STAR Exemption
____Tax Return (1st 2 pages)
____Utility Bill(s)

Updated 11/15/2023