

TOWN OF CHAZY
APPLICATION TO ZONING BOARD OF APPEALS

For Zoning Enforcement Officer's Use:

ZONING BOARD NO. _____ **DATE RECEIVED:** ____/____/____
Application for: **Map No.** _____ **Block No.** _____ **Parcel No.** _____

1. Applicant's Name: _____
 Address: _____
 City, State, Zip: _____
 Phone/Email: _____
2. Application is made for:
 () an Area Variance
 () a Use Variance
 () an interpretation of the Zoning Law or Map
 () an appeal from a decision of the Zoning Enforcement Officer
3. This request relates to the following section(s) of the Town of Chazy Zoning Law:

4. Describe the nature of the request in detail:

5. In the case of a variance, provide justification that the request meets the criteria that must be met in order for the Zoning Board of Appeals to approve the variance (See Sections 930 and 940 of the Town of Chazy Zoning Law):

6. Attach a copy of a completed Application for Building and Zoning Permit, including the site plan map if relevant.

Applicant Signature

____/____/____
Date

FOR USE OF THE ZONING BOARD OF APPEALS:

This application is: ☐ Approved
☐ Approved with modifications or conditions
☐ Disapproved

Modifications, conditions or reasons for disapproval:

Chairperson, Town of Chazy
Zoning Board of Appeals

____/____/____
Date

APPLICATION FOR AN AREA VARIANCE

Appeal Concerns Property at the following address:

County Tax Map Section: _____ Block _____ Lot: _____

Zoning District Classification: _____

Date Applicant Acquired Property: _____

(If 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.)

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 Municipal Clerk: _____

The applicant's appeal from a decision of the Zoning Enforcement Officer, or on direct appeal from the planning board as permitted by State Law, concerns the following:

_____ Denial of an Application for a Building Permit (Attach to Application)

_____ Denial of an Application for a Certificate of Occupancy (Attach to Application)

For the Proposed Activity: _____

Denial was made because of a violation or conflict with the Zoning Code(s): _____

Date of Zoning Enforcement Officer's Decision: _____

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

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

Describe the character of the neighborhood: _____

Applicant: _____ Telephone: _____

Mailing Address: _____

Signature: _____ Date: _____

TOWN OF CHAZY

CODE ENFORCEMENT OFFICER

P.O. Box 219
Chazy, New York 12921-0219
TEL: 518-846-7544, Ext. 4, FAX: 518-846-8981
EMAIL: chazycodes@westelcom.com

****APPLICANTS MUST SUBMIT THIS SIGNED FORM WITH APPLICATION TO THE
PLANNING BOARD OR THE ZONING BOARD OF APPEALS****

To APPLICANTS requesting Planning Board or Zoning Board applications, please note as follows relative to the Fees Schedule:

- A. Application to Planning Board for Conditional Use approval plus all legal fees:
Residential: \$50.00
Commercial: \$100.00
- B. Application to Zoning Board of Appeals for Area or Use Variance plus all legal fees:
Residential: \$50.00
Commercial: \$100.00
- C. Application to the Zoning Board of Appeals for an interpretation of Zoning Law or to appeal a decision of the Zoning Enforcement Officer plus all legal fees:
Residential: \$50.00
Commercial: \$100.00
- D. Application to the Town Board to amend the Zoning Law plus all legal fees:
Residential: \$100.00

APPLICANT SIGNATURE

_____/_____/_____
DATE