



BUILDING DEPARTMENT
VILLAGE OF GREENPORT
236 Third Street, Greenport, NY 11944

ZONING BOARD OF APPEALS APPLICATION

INSTRUCTIONS FOR AREA VARIANCE APPLICATIONS

PLEASE SUBMIT THE FOLLOWING IN 8 SETS COLLATED INTO SEPARATE PACKETS, WITH ORIGINAL SIGNED SET AND CHECK FOR FILING FEE CLIPPED ON TOP.

1. CURRENT NOTICE OF DISAPPROVAL FROM THE BUILDING DEPARTMENT DATED WITHIN THE LAST 60 DAYS, TOGETHER WITH SURVEY/SITE PLAN AND BUILDING PLANS.
2. APPLICATION: TYPED OR NEATLY WRITTEN, SIGN BY THE PROPERTY OWNER AND NOTARIZED. IF YOU HAVE A REPRESENTATIVE SIGNING FOR YOU, PLEASE FURNISH AN AUTHORIZATION FORM SIGNED BY THE OWNER.
3. PROJECT DESCRIPTION: FORM LOCATED ON PAGE 3 OF APPLICATION.
4. SURVEY/SITE PLAN: SURVEYOR MUST SHOW PROPOSED AND EXISTING SETBACKS, PATIOS/DRIVEWAYS, WETLAND BUFFERS, PARCEL SIZE AND LOT DIMENSIONS. SURVEYS SUBMITTED MUST SHOW ALL EXISTING STRUCTURES, DIMENSIONS OF EXISTING AND PROPOSED STRUCTURES, FENCES, TANKS AND CHIMNEYS AS CERTIFIED BY A LICENSED SURVEYOR, ENGINEER OR ARCHITECT.
5. COVENANTS AND RESTRICTIONS: IF ANY, PROVIDE ALL COPIES OR NOTE ON APPLICATION IF THERE ARE NONE.
6. ENVIRONMENTAL ASSESSMENT FORM: REQUIRED FOR ALL APPLICATIONS.
7. CHECK: PAYABLE TO VILLAGE OF GREENPORT: FEE SCHEDULE ATTACHED.



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VILLAGE OF GREENPORT
 236 Third Street, Greenport, NY 11944

FEE:	APPEAL NO.:
DATE ASSIGNED:	
DATE SUBMITTED:	

ZONING BOARD OF APPEALS APPLICATION

AREA VARIANCE APPLICATION

IS THIS PROPERTY IN THE HISTORIC DISTRICT? YES NO

IF YOU ANSWERED **YES**, COMPLETE FORM-HPC1

HOUSE NO. _____ STREET _____, GREENPORT, NY 11944

SCTM 1001 SECTION _____ BLOCK _____ LOT _____ ZONE _____ LOT
 SIZE _____

I (WE) APPEAL THE WRITTEN DETERMINATION OF THE BUILDING INSPECTOR
DATED _____ BASED ON MAP DATED _____

APPLICANT(S)/OWNER(S): _____

MAILING ADDRESS: _____

TELEPHONE: _____ FAX #: _____ EMAIL: _____

NOTE: IN ADDITION TO THE ABOVE, PLEASE COMPLETE BELOW IF APPLICATION IS SIGNED BY APPLICANT'S ATTORNEY, AGENT, ARCHITECT, BUILDER, CONTRACT VENDEE, ETC. AND NAME OF PERSON WHO AGENT REPRESENTS:

NAME OF REPRESENTATIVE: _____ FOR OWNER _____

AGENT'S ADDRESS: _____

TELEPHONE: _____ FAX: _____ EMAIL: _____

PLEASE CHECK BOX TO SPECIFY WHO YOU WISH CORRESPONDENCE TO BE MAIL TO, FROM THE NAMES ABOVE:

APPLICANT/OWNER, OR AUTHORIZED REPRESENTATIVE, OR OTHER NAME/ ADDRESS BELOW:

WHEREBY THE BUILDING INSPECTOR REVIEWED MAP DATED _____ AND DENIED AN APPLICATION DATED _____ FOR A BUILDING PERMIT.

PROVISION OF THE ZONING ORDINANCE APPEALED. (INDICATE ARTICLE, SECTION, AND SUBSECTION OF ZONING ORDINANCE BY NUMBERS. DO NOT QUOTE THE ORDINANCE.)

ARTICLE _____ SECTION 150- _____ SUBSECTION _____

TYPE OF APPEAL. AN APPEAL IS MADE FOR:

- A VARIANCE TO THE ZONING CODE OR ZONING MAP.
- INTERPRETATION OF THE VILLAGE CODE. ARTICLE _____ SECTION _____

A PRIOR APPEAL HAS, NOT BEEN MADE AT ANY TIME WITH RESPECT TO THIS PROPERTY, NO. _____ YEAR _____.

(PLEASE BE SURE TO RESEARCH BEFORE COMPLETING THIS QUESTION OR CALL OUR OFFICE FOR ASSISTANCE.)

NAME OF OWNER: _____

REASON FOR APPEAL (ADDITIONAL SHEETS MAY BE USED WITH PREPARER'S SIGNATURE):

AREA VARIANCE REASONS:

1. WHETHER AN UNDESIRABLE CHANGE WILL BE PRODUCED IN THE CHARACTER OF THE NEIGHBORHOOD OR A DETRIMENT TO NEARBY PROPERTIES WILL BE CREATED BY THE GRANTING OF THE AREA VARIANCE;

2. WHETHER THE BENEFIT SOUGHT BY THE APPLICANT CAN BE ACHIEVED BY SOME METHOD , FEASIBLE FOR THE APPLICANT TO PURSUE, OTHER THAN AN AREA VARIANCE;

3. WHETHER THE REQUESTED ARE VARIANCE IS SUBSTANTIAL;

4. WHETHER THE REQUESTED VARIANCE WILL HAVE AN ADVERSE EFFECT OR IMPACT ON THE PHYSICAL OR ENVIRONMENTAL CONDITIONS IN THE NEIGHBORHOOD OR DISTRICT;

5. WHETHER THE ALLEGED DIFFICULTY WAS SELF-CREATED , WHICH CONSIDERATION SHALL BE RELEVANT TO THE DECISION OF THE ZONING BOARD OF APPEALS, BUT SHALL NOT NECESSARILY PRECLUDE THE GRANTING OF THE AREA VARIANCE.

ARE THERE COVENANTS AND RESTRICTIONS CONCERNING THIS LAND: NO. YES. (PLEASE FURNISH COPY).

SIGNATURE OF APPELLANT OR AUTHORIZED AGENT

PRINT NAME
(AGENT MUST SUBMIT AUTHORIZATION FROM OWNER)

SWORN TO BEFORE ME THIS DAY OF ____ OF ____ . 20 ____

NOTARY PUBLIC

Applicant's Project Description

APPLICANT: _____ DATE: _____

I. FOR DEMOLITION OF EXISTING BUILDING AREAS

PLEASE DESCRIBE AREAS BEING REMOVED: _____

II. NEW CONSTRUCTION AREAS (NEW DWELLING OR NEW ADDITION/EXTENSIONS):

DIMENSIONS OF FIRST FLOOR (EXTENSION): _____

DIMENSION OF SECOND FLOOR: _____

HEIGHT (FROM FINISHED GROUND TO TOP OF RIDGE): _____

IS BASEMENT OR LOWEST FLOOR AREA BEING CONSTRUCTED? IF YES, PLEASE PROVIDE HEIGHT (ABOVE GROUND)

MEASURED FROM NATURAL EXISTING GRADE TO FIRST FLOOR: _____

III. PROPOSED CONSTRUCTION DESCRIPTION (ALTERATION OR STRUCTURAL CHANGES).

NUMBER OF FLOORS AND GENERAL CHARACTERISTICS BEFORE ALTERATIONS: _____

NUMBER OF FLOOR AND CHANGES WITH ALTERATIONS: _____

III. CALCULATIONS OF BUILDING AREAS AND LOT COVERAGE:

EXISTING SQUARE FOOTAGE OF BUILDINGS ON YOUR PROPERTY: _____

PROPOSED INCREASE OF BUILDING COVERAGE: _____

SQUARE FOOTAGE OF YOUR LOT: _____

PERCENTAGE OF COVERAGE OF YOUR LOT BY BUILDING AREA: _____

V. PURPOSE OF NEW CONSTRUCTION: _____

Zoning Board of Appeals Application 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 GREENPORT VILLAGE ZONING BOARD OF APPEALS.

THE PROPERTY IS LOCATED AT _____, GREENPORT, NY.

SCTM # 1001- _____.

(OWNER'S SIGNATURE)

(PRINT OWNERS NAME)