

Town of Northumberland Use Variance Application

Office Use Only

SBL # _____
APPLICATION # _____
Date Rec'd. By Board: _____
Notice Published: _____
Date Sent to SCPB: _____
Date of Public Hearing: _____
Date of Final Action: _____
Date of Filing a Decision with the
Town Clerk's Office: _____
Fee's paid: _____ - _____
_____ - _____

Part 1: To be Completed by the Applicant

Applicant: _____
Owner (if not applicant): _____
Mailing Address: _____

Day Phone: _____ - Evening Phone: _____

Property Information

Appeal Concerns Property at the following Address:

Project Description (attach sketch):

Reasonable Return: Explain why this property cannot realize a reasonable return: _____

Unique Hardship: Explain [why or what] the alleged hardship relating to the property is unique, and does not apply to a substantial portion of the district or neighborhood: _____

General Character of the Neighborhood: Describe how the requested variance will not alter the essential character of the neighborhood: _____

Not Self-Created: Provide confirmation that the alleged hardship has not been self-created by the applicant: _____

Signature of Property Owner: _____ **Signature of Applicant:** _____

Date: _____

Date: _____

Disclaimer: I/We hereby dispose and swear that all the above statements and statement content in the application submitted are true.

Sworn before me, _____, on this date _____, month, _____, and year _____

Applicant

Notary

Property Owner

Part 2: To Be Completed by Zoning Administrator

Property Description:

Tax Map SBL#: _____ **Zoning District:** _____

Description of Current Use of the Property: (attach sketch): _____

Is Property in Hamlet Area? ___ Yes ___ No Is SEQRA Review required? ___ Yes ___ No

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

_____ Denial of an Application for a Building Permit concerns the following: _____

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

For the Proposed Activity: _____

Denial was made because of a violation of the Town Zoning Code (s): _____

Signature of Zoning Administrator

Date of Zoning Administrator's Decision

Part 3: To Be Completed by the Zoning Board of Appeals

After public hearing and reviewing the above criteria the ZBA finds:

- () The Applicant **has failed to prove hardship** through the application of the above tests as required by state statutes.
- () The Applicant **has proven hardship** through the application of the above tests. In finding for such hardship, the ZBA grants a variance to allow use of the property in the manner detailed below:

Signature of ZBA Chairperson

Date

Applicant: Unless otherwise specified by the Zoning Board of Appeals, an Approved Variance shall expire if you fail to obtain any necessary building permit or fail to comply with the conditions of said authorized permit within six (6) months from the date of authorization thereof. The Zoning Board of Appeals may increase this period from six (6) months to one (1) year at its discretion.