

Tax Map No: \_\_\_\_\_ Application No: \_\_\_\_\_ Fee \$50.00

Name of Applicant: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_

Location of project: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Describe your project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Denial of Permit Application by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

|                         |       |
|-------------------------|-------|
| <u>For Office Use:</u>  |       |
| Date of Appeal:         | _____ |
| Date Rec'd. by ZBA:     | _____ |
| Date of Public Hearing: | _____ |
| Date of ZBA Action:     | _____ |
| Date of APA Action:     | _____ |

Your application wishes to seek relief from what section(s) of the Ordinance? Section(s): \_\_\_\_\_

Page(s): \_\_\_\_\_

Specifically: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the property in the Hamlet? \_\_\_ yes \_\_\_ no.  
(If no, Adirondack Park Agency review is required.)

Have there been any other variances granted on the property? \_\_\_\_\_ Date(s): \_\_\_\_\_

If yes, please summarize: \_\_\_\_\_

**1) How is it not possible to realize a substantial reasonable return, as shown by competent financial evidence?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ZBA Findings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**2) How is the alleged hardship unique and does not apply to a substantial portion of the neighborhood?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ZBA Findings: \_\_\_\_\_

**3) How will this request not alter the essential character of the neighborhood?** \_\_\_\_\_

ZBA Findings: \_\_\_\_\_

**4) How is this hardship not self-created?** \_\_\_\_\_

ZBA Findings: \_\_\_\_\_

To allow a use not otherwise permitted in the Ordinance, an applicant must demonstrate to the Zoning Board of Appeals **unnecessary hardship**. Such demonstration includes all of the afore-mentioned criteria. If this application is approved, the ZBA may grant the **minimum variance necessary** and may impose **reasonable conditions**.

**Authorization for site visits:** By signing this page and submitting the application materials attached herein, the Owner, Applicant and his/her/their agent(s) hereby authorize the Zoning Board of Appeals members and/or Code Enforcement Office staff to enter the subject properties for the purpose of reviewing the application submitted.

***I am in receipt of the Variance Procedure - Informational Brochure and aware of the requirements of the application. Also, I certify that the application, plans and supporting materials submitted are a true and complete statement/description of the existing conditions and the work proposed. Also, I have been informed that any supporting materials submitted after 5 pm on the Wednesday preceding my scheduled ZBA appearance may result in my project and hearing being rescheduled.***

Signature of Property Owner/  
Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_