



# TOWN OF POESTENKILL

38 Davis Drive / P.O. Box 210  
Poestenkill, NY 12150  
(518) 283-5100 Phone  
(518) 283-7550 Fax

## ZONING BOARD OF APPEALS

### AREA VARIANCE APPLICATION

**Applicant Name:** \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Property Owner:** (if not applicant):

**Name:** \_\_\_\_\_

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

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

### **Signatures:**

**Applicant:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Owner:** \_\_\_\_\_ **Date** \_\_\_\_\_  
(If different from applicant) MANDATORY

APPLICANT OR THEIR REPRESENTATIVE **MUST** APPEAR AT ALL BOARD MEETINGS

**Property Information:**

**Land Use District in which property is located:**

- |                                                                   |                                                            |
|-------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Residential (R)                          | <input type="checkbox"/> Hamlet                            |
| <input type="checkbox"/> Residential /Agriculture (RA)            | <input type="checkbox"/> Commercial/Light Industrial (CLI) |
| <input type="checkbox"/> Rural Residential 1 (RR1)                | <input type="checkbox"/> Natural Products (NP)             |
| <input type="checkbox"/> Rural Residential 2 (RR2)                | <input type="checkbox"/> Planned Development (PD)          |
| <input type="checkbox"/> Flood Fringe Overlay (Flood Hazard Area) |                                                            |

**Location of land parcel:**

\_\_\_\_\_

\_\_\_\_\_

**Tax Map Number:** \_\_\_\_\_  
 (This information is REQUIRED on the application)

**If in subdivision:** Subdivision Name \_\_\_\_\_ Lot Number: \_\_\_\_\_

**Any previous:**  
 Variances? \_\_\_\_\_ (Yes/No) If Yes, Date \_\_\_\_\_

**Details:** \_\_\_\_\_

\_\_\_\_\_

**Special Use Permits?** \_\_\_\_\_ (Yes/No) If Yes, Date \_\_\_\_\_

**Details:** \_\_\_\_\_

\_\_\_\_\_

**Was a building permit denied?** \_\_\_\_\_ (Yes/No) Date of denial \_\_\_\_\_

**If denied:** Verbal denial? \_\_\_\_\_ (Yes/No) Written denial? \_\_\_\_\_ (Yes/No)

**Indicate the Town of Poestenkill Code Section from which this variance application is being requested:**

Chapter \_\_\_\_ Article \_\_\_\_ Section \_\_\_\_\_ Paragraph \_\_\_\_

**Area, Density, Dimension, Height and Setback Information**

	<b>Required Per Code</b>	<b>Requested Dimensions</b>	<b>Difference</b>
<b>Front Setback</b>			
<b>Side Setback</b>			
<b>Rear Setback</b>			
<b>Height</b>			
<b>Projections</b>			
<b>Parking Spaces</b>			
<b>other</b>			

**Justification for Variance Requested**

**Please read this section carefully before completing the questions that follow:**

In making its determination on this variance application, The Zoning Board of Appeals shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to health, safety and welfare of the neighborhood or community by such grant.

In making such determination the board shall also consider:

- a) Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by granting the area variance;
- b) Whether the benefit sought by the applicant can be achieved by some method, feasible for the applicant to pursue, other than by an area variance;
- c) Whether the requested area variance is substantial;
- d) Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district; and
- e) 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.

The Zoning Board of Appeals in the granting of a variance shall grant the minimum variance that it shall deem necessary and adequate and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.

The Zoning Board of Appeals shall, in granting of both area variances and use variances, have the authority to impose such reasonable conditions and restrictions as are directly related to and incidental to the proposed use of the property, or the period of time such variance shall be in effect. Such conditions shall be consistent with the spirit and intent of the zoning local law, and shall be imposed for the purpose of minimizing any adverse impact such variance may have on the neighborhood or community.

**NOTE: If additional space is needed for any question below, attach additional pages indicating the question to which the pages pertain.**

**Explain why this would not cause an undesirable change to the neighborhood or detriment to the nearby properties if the variance is granted:**

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**Explain if it is possible to satisfy your needs through any means other than a variance:**

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**Do you believe the requested variance substantial? Explain your reasoning:**

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**Will the proposed variance have an adverse affect on the physical or environmental conditions in the neighborhood? Explain your reasoning:**

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**Was the alleged hardship self-created? Detail how and when the property was acquired.**

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**Describe the proposed new construction or use of the land for this parcel:**

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**Describe in detail all circumstances which prevent construction in strict accordance with the code:**

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**Describe any special conditions related to the property:**

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**State your opinion of how the proposed construction would fit that found in the immediate neighborhood. Please state the basis, with appropriate comparisons, for your stated opinion:**

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**Describe what, if any, economic loss would result from strict application of the existing code requirements:**

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**Please add here any additional information you think would be helpful to the Zoning Board of Appeals for a complete understanding of the facts of this case. Attach additional pages to the application.**

**Additional Contact Information:**

**Site Planner:**

Name: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Plot Engineer/Surveyor:**

Name: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Attorney:**

Name: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Other** (consultants, etc):

Name: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Checklist of Materials That Must Accompany this Application:**

- \_\_\_\_\_ **Area Variance Application Fee**
  - See Zoning Board of Appeals Fee Schedule for current fee
  - Make checks payable to Town of Poestenkill
  
- \_\_\_\_\_ **Copy of section of applicable Tax Map showing location of property**
  
- \_\_\_\_\_ **Copy of the Denial from Code Enforcement Officer (if applicable)**
  
- \_\_\_\_\_ **Drawings -- 8 copies-- containing:**
  - Dimensions to scale, showing buildings, yard (front, side and rear setbacks of building(s) (proposed and existing), lot size, area and streets.
  - If the request is for the development of a single or two family dwelling on an undersized residential lot, drawings showing floor plan layout and elevations are required.
  
- \_\_\_\_\_ **Owner's consent letter (if not applicant)**
  
- \_\_\_\_\_ **Property Owner's Signature, if owner is not the applicant, is MANDATORY**

**Additional Applicant Costs Associated with this Application:**

- Cost of Public Hearing Notice in Town's newspaper of record.
- Cost of certified letters to notify abutters/neighbors of the area variance filing.
- Consultant costs (if applicable)
- An invoice for these additional costs will be sent to the applicant as soon as possible prior to final action being taken. This invoice is due and payable immediately upon receipt.