## Variance. Specific Permit and Controlled Site Application and Short Environmental Assessment Form INSTRUCTIONS

• FILING FEE: \$50.00

• File 2 weeks before the Meeting.

Zoning Board meets the second Tuesday of the month.

Planning Board meets the third Tuesday of the month.

• Make check payable to:

Mary Jo Kelly, Town Clerk P.O. Box 193 LaFayette, NY 13084

Telephone: 677-3674

## VARIANCE APPLICATION UNDER THE 1970 ZONING ORDINANCE (AS AMENDED) TOWN OF LAFAYETTE, NEW YORK

1. Name of applicant

| 2. | Postal address of applicant  |
|----|--|
| 3. | Telephone number of applicant (or applicant's attorney or agent.)  |
| 4. | Street address and location of the subject property in relation to the closest intersection (e.g., 2336 Tully Farms Rd., east side, 1/2 mile south of Route 20.) |
| 5. | Owner (s) of the subject property  |
| 6. | I the owner(s) of the subject property is not the applicant, state the interest of the applicant in the subject property   |
| 7. | Zoning classification in which the subject property is located   |
| 8. | Nature of relief requested (Please describe, in detail, the proposed use of structure for which approval is requested).  |

(a) Variance (e.g. "Variance of uses permitted in an Agricultural- Residential District to allow for two family dwelling" or "Variance of side yard width in Business District to allows 30' x 40' addition to existing retail store to within 15' of north side line".)

(b) Specific Permit (e.g., "Specific Permit for dog kennel in an Agricultural-Residential District. ")

(c) Controlled Site Approval (e.g., "Controlled Site approval for home occupation in an Agricultural-Residential District.")

- 9. Description of the subject property please attach to your application a survey, site plan, or accurate sketch drawn to scale showing all of the following information:
  - (a) All property boundaries, all streets, and north arrow;
  - (b) Names of all owners of neighboring property located within 300 feet of the subject property, and the uses made of all neighboring properties;
  - (c) Location and dimensions of all buildings and structures, both existing and proposed, on the subject property including distances from all property lines;
  - (d) Location of water supply and septic system, and any proposed changes;
  - (e) Access and parking, and any proposed changes;
  - (f) Landscaping and topography, and any proposed changes; and

(g) Signs and appurtenances, and any proposed changes.

10. If a use variance is sought, state what facts you believe constitute unnecessary hardship in the strict application of the Zoning Ordinance to the property. For GUIDANCE, SEE THE "USE VARIANCE" SECTION OF THE "GUIDE FOR APPLICANTS"

11. If an area variance is sought, state what facts you believe constitutes practical difficulties in the strict application of the Zoning Ordinance to the property. SEE THE "AREA VARIANCE" SECTION OF THE "GUIDE FOR APPLICANTS."

12. If a specific permit or controlled site approval is sought, state what facts you believe indicate that the proposed use or structure is reasonably consistent with the neighborhood. SEE THE "SPECIFIC PERMIT" AND "CONTROLLED SITE APPROVAL" SECTIONS OF THE "GUIDE FOR APPLICANTS.

## 617.21

Appendix C State EnvIronmenta1 Quality Review

## SHORT ENVIRONMENTAL ASSESSMENT FORM

For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project sponsor)

| 1. APPLICANT/SPONSOR:  |  |
|--|--|
| 2. PROJECT NAME:   |  |
| 3. PROJECT LOCATION: Municipality: County:   |  |
| 4. PRECISE LOCATION (Street address and road intersections, prominent lands            | marks, etc., or provide map)               |
| 5. IS PROPOSED ACTION:   |  |
| NewExpansionModification/alteration  |  |
| 6. DESCRIBE PROJECT BRIEFLY:   |  |
| 7. AMOUNT OF LAND AFFECTED:  |  |
| Initial acres  |  |
| 8. WIII PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER E                         | XISTING LAND USE RESTRICTIONS?             |
| YesNo If No, describe briefly:   |  |
| 9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT?                                    |  |
| ResidentialIndustrialCommercialAgriculturePark/f<br>Other Describe:                    | Forest/Open Space                          |
| 10. DOES ACTION INVOLVE A PERMIT APPROVAL OR FUNDING NOW OR (FEDERAL, STATE OR LOCAL)? | JLTIMATELY FROM ANOTHER GOVERNMENTAL AGENC |
| YesNo If yes, list agency(s) and permit/approvals:                                     |  |
| 11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERM                          | IIT OR APPROVAL?                           |
| YesNo If yes, list agency name and permit/approval:                                    |  |
| 12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPRO                          | /AL REQUIRE MODIFICATION?                  |
| YesNo  |  |
| I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE B                         | EST OF MY KNOWLEDGE                        |
| Applicant/sponsor name:  |  |
| Signature:   |  |
| Date:  |  |

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment