

Town of Skaneateles Zoning Board of Appeals (ZBA)

INSERT: USE Variance

(Pursuant to §148-10-10.D)

Contact Town Staff if you need assistance

Applicant Name: _____

Property Tax Map# _____

The applicant understands that: (please mark or check to acknowledge that you have read each)

____ The ZBA may only grant approval for a requested use variance that is the minimum relief necessary to address the criteria below.

____ No use variance shall be granted by the ZBA without a showing by the applicant that applicable zoning regulations and restrictions have caused unnecessary hardship. In order to prove such unnecessary hardship the applicant shall demonstrate to the board how the criteria below apply for each and every permitted use under the zoning regulations for the particular district where the property is located.

Summary of property conditions: _____ Existing land use: _____
Proposed land use: _____

Other land uses allowed by right, site plan or special permit: (see Use Table Zoning Chapter 148 Attachment 1)

The applicant **shall respond in writing** to the following required criteria. (use additional sheets if needed)

1. The applicant cannot realize a reasonable return, provided that lack of return is substantial as demonstrated by competent financial evidence.

Applicant response: _____

AND summarize the financial status of the property below (Attach supporting documentation)

- | | |
|---|----------|
| a. Year property purchased | _____ |
| b. Purchase price of property | \$ _____ |
| c. Investment since purchase | \$ _____ |
| d. Estimated annual return of property with existing land use | \$ _____ |
| e. Estimated property value with existing land use | \$ _____ |
| f. Estimated annual return of property with other permitted land uses | \$ _____ |
| g. Estimated property value with other permitted land uses | \$ _____ |

2. The alleged hardship relating to the property in question is unique and does not apply to a substantial portion of the district or neighborhood.

Applicant response: _____

3. The requested use variance, if granted, will not alter the essential character of the neighborhood.

Applicant response: _____

4. The alleged hardship has not been self-created.

Applicant response: _____

TURN OVER - for REQUIRED SUBMISSIONS

INSERT: USE Variance

(Pursuant to §148-10-10.D)

SUBMISSION REQUIREMENTS

FILING FEE

_____ \$225.⁰⁰

ONE (1) original:

- _____ 1. Common Application Form – completed and signed
- _____ 2. ZBA USE Variance insert - completed
- _____ 3. SEQR **Short** form – completed (Board may require completed Long Form or more information)
- _____ 4. Photocopy of CEO Denial of Permit
- _____ 5. Letter of authorization - if agent of property owner or applicant.
- _____ 6. Photocopy of permits or correspondence from other agencies (see Referral Section below)
- _____ 7. Documentation supporting financial hardship of property (e.g. from: realtor, appraiser, etc.)
- _____ 8. If within LWOD - Written statement or photocopy of transmittal letter that a copy of this application has been submitted to the City of Syracuse Water Department or the City of Auburn. (per §148-7-1.E & F).

NINE (9) copies of:

- _____ 9. Current survey (per §148-10-1-D.1), with location map, stamped and signed by licensed land surveyor
- _____ 10. Site plan showing all existing and proposed conditions, signed and stamped by licensed design professional.

PLEASE NOTE: You may simultaneously apply for a Use or Area Variance in anticipation that your requested interpretation is denied. If so – **include** the Interpretation Insert with this submission.

REFERRALS AND CONTACTS WITH OTHER AGENCIES

The following agencies may have separate permit authority or be required to provide advisory review of applications before the Town. **You may be required by the Town to contact these agencies directly.**

Please indicate if you have contacted any of these agencies, the date of contact and the type of response (informal letter, permit issued, N/A - Not Applicable)

		<u>Contact Date</u>	<u>Response</u>
Highway Access:	Town Highway Dept.	_____	_____
	Onondaga County DOT	_____	_____
	NYS DOT	_____	_____
Water Supply:	Town Water Dept.	_____	_____
Sanitary Waste:	Onondaga Co Health Dept.	_____	_____
Natural Resources:	City of Syracuse Water Dept.	_____	_____
	NYS DEC	_____	_____
	US Army Corp of Engineers	_____	_____

PROCEDURE SUMMARY

1. Pre-application meeting/CEO Denial of Permit
2. Submittal Deadline (Two [2] weeks prior to ZBA meeting date)
3. Preliminary Zoning Board of Appeals review of application
 - a. Determine completeness
 - b. Request additional information or submissions
 - c. Schedule Site visit and formal review meeting date
 - d. Refer application to other agencies
4. Formal Zoning Board of Appeals Review
 - a. Public hearing
 - b. Receipt of referral recommendations
 - c. Final action and adoption of resolution

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