## TOWN OF ATHENS, NEW YORK ZONING BOARD OF APPEALS (ZBA)

### **APPLICATION PROCESS**

1) Provide a complete Application, clearly identify what Variance(s) are being applied for: Interpretation, Area Variance, and/ or Use Variance

Review the Application with the Code Enforcement Officer

- Obtain a Plot Map (from the Assessor's Office; or from the Greene County Image Mate Online site: https://greene.sdgnys.com/search.aspx) and provide a diagram of changes being requested with detailed measurements
- 3) Attach the plot map with diagram and measurements (of current and proposed structures) to the Application package
- 4) With the assistance of the Assessor identify ALL neighboring property Owner's within 500' of the property lines
- 5) If you are not the Owner of the Property that is subject of the Zoning Variance Request provide a completed Owner's Consent Form
- 6) Provide payment made payable to the: Town of Athens
- 7) Include any additional information, photogrpahs, topographical information, etc. that you feel may help in describing existing coditions, and your application.

For an Application to be placed on the Zoning Board of Appeals Agenda <u>ALL OF THE ABOVE</u> must be completed and provided to the Code Enforcement Office no later than the first Tuesday of the month in order to be included on the following ZBA agenda. **NO EXCEPTIONS SHALL BE PERMITTED.** 

NOTES:

ZBA Meetings are typically held the second Wednesday of the month

Reference Information:

https://dos.ny.gov/system/files/documents/2021/09/guidelines-for-applicants-to-the-zoning-board-of-appeals.pdf

# TOWN OF ATHENS ZONING BOARD OF APPEALS

## APPLICATION OWNER CONSENT

l,	
PRINT OWNER'S NAME(s)	
RESIDING AT:	
RESIDING AT.	PRINT OWNER'S ADDRESS
BEING THE OWNER OF:	
	PROPERTY ADDRESS OR TAX MAP ID#
HEREBY AUTHORIZE:	AGENT
WHOSE MAILING ADDRESS IS:	
	AGENT ADDRESS
TO APPEAR BEFORE THE ZONING	BOARD OF APPEALS TO THE TOWN OF ATHENS, NEW YORK, AND TO FILE ANY DOCUMENTS
REQUIRED WITH REFERENCE TO	MY APPLICATION FOR:
I HEREBY AGREE TO ALLOW MY A	GENT, WHOSE NAME APPEARS ABOVE, TO ACT ON MY BEHALF AND I FURTHER AGREE TO
ABIDE BY ANY REQUIREMENTS IN	/POSED BY THIS BOARD AS A CONDITION OF THEIR APPROVAL.
OWNER SIGNATURE	
DATE	
SWORN TO BEFORE ME THIS:	
DAY OF:	20
	NOTARY PUBLIC

## TOWN OF ATHENS ZONING BOARD OF APPEALS

## APPLICATION

## Zoning Interpretation; Use Variance, and Area Variance

Note: Applicant should consult Section 267 through 267-b of the Town Law of the State of New York for procedures and definitions

Date:										
Applicant's Name:										
Phone Number:										
Email Address:										
Applicant's Address:										
Property Address:										
Tax Map Parcel ID(s):										
Parcel Size (acres):										
Zoning Designation (Confirm with Co										
	Ag	MUC	L-1	L-2	OS	Н	Rr	Ru	Ru-1	RU-385
	Hollister	Lake Wate	ershed O	verlay		-				
	Green La	ke Waters	shed Ove	erlay						
	Black Lak	e Watersl	hed Over	lay		-				
Reference Zoning Map: h	ttps://ec	ode360.co	om/attac	hment/A	T1724/A1	1724-180	C%20Zon	ing%20M	ap.pdf	
Set back requirements (Confirm with	Code En	forcemen	t Officer)							
Front:			,							
Side:										
Rear:										
Is the Applicant the Owner of the Pro	operty:		YES	NO						
If not, provide the Owner's Name:	. ,	-			_					
If not has an Owner Consent been pr	ovided:	-	YES	NO	-					
Do you authorize members of the Zoning	Board of A	ppeals to vi	isit the pro	operty in fu	urtherance	of this App	olication?	-	YES	NO
Print Name:										
Signature:										
Date:										
Is the Application for the purpose of	f (Zoning)	Interpret	ation						YES	NO
Explain question(s):								-		

## **Previous Appeal**

			cation?			
YES	IF YES, THEN PROVIDE APPLICATION NUMBER	:				
NO	EXPLAIN TYPE OF PERMIT REQUESTED:					
	DATE OF APPLICATION BEING APPEALED:					
XPLAIN REASON FOR REJECTION & REASONING	G FOR APPEAL OF THE REJECTION; PROVIDE A COPY	OF THE DECISION BEING APPEAL	ED :			
AS THERE BEEN A PREVIOUS APPEAL?						
YES	IF YES, WHEN WAS THE APPEAL MADE?	DATE:				
NO						
S YES, WHAT WAS THE NATURE OF THE PRIOR	APPEAL(S)?					
REQUESTED INTERPREATATION	YES / NO	DATE:				

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#### Type of Variance Requested:

USE Variance:	YES / NO	IF NO SKIP TO NEXT SECTION
		e zoning regulations and restrictions have caused "Unnecessary
		the Applicant must demonstrate that four tests are met for each and
		ions for the particular district where the property is located.
		Variance unless it finds that each of the four tests is proved.
The four tests are described below		and the start function when any holison which for an the Zemine Decade
	•	you meet the test. Explain why you believe relief from the Zoning Board o
	. Attach additional pages as	necessary. Please be as specific and detailed as possible, use extra sheets
as needed.		
The Board of Appeals in the grap	ting of use variances shall g	rant the minimum variance that it shall deem necessary and adequate to
		at the same time preserve and protect the character of the
neighborhood and the health, saf		
Provide a brief explanation of the	Non-conforming Use reques	sted:
		ance(s) being sought. Tell us what it is you want to do and explain how the
Town of Athens Zoning Code prev	ents you from doing it.	
1. Test # 1: "Economic Use/ Rease		
The applicant cannot realize a rea	isonable return, provided that	at the lack of return is substantial as demonstrated by competent financia
evidence.		
2. Test # 2: Uniqueness		
-	he property is unique, and do	oes not apply to a substantial portion of the district or neighborhood.
	ie property is unique, and ut	
7 Tast # 7. Chausatau of the Nais		
<ol> <li>Test # 3: Character of the Neig The requested use variance, if gra</li> </ol>		ntial character of the neighborhood.
		-
4. Test # 4: Self-Created Hardship	)	
The alleged hardship has not beer		
lict any churches, public huildings	· playgrounds recreation for	cilities within 500' of the property lines of the above referenced property

List any wetlands, or protected lands within 500' of the above referenced property

# USE Variance (continued):

List any County/ State lands or Highways within 500' of the above referenced property

Proposed conditions, if granted approval (continue on a separate sheet if needed):

be filled out by the Town of At	ens Zoning Board of Appea	als:	
te of Vote			
te to APPROVE			
te to DENY			
tion (Approved / Denied)			
ning Board Statement of Evider	ce used for Conclusion:		
ning Board Condition(s) for App	oval (if any):		
			<u></u>
· · · · · · · · · · · · · · · · · · ·			

### Type of Variance Requested:

Describe the proposed project and the nature of the AREA variance(s) being sought. Tell us what it is you want to do and explain how the Town of Athens Zoning Code prevents you from doing it. Describe alternatives you have considered with respect to size, placement, etc., and explain why you believe relief from the Zoning Board of Appeals is necessary and justified. (Attach additional pages as necessary.)
Describe alternatives you have considered with respect to size, placement, etc., and explain why you believe relief from the Zoning Board of Appeals is necessary and justified. (Attach additional pages as necessary.)
Board of Appeals is necessary and justified. (Attach additional pages as necessary.)  1. Will there be any undesirable change in the character of the neighborhood, or a detriment to nearby properties if this variance is granted? If yes, please describe. If not, why not?  2. Can you achieve your goals via a reasonable alternative which does not involve the necessity of an area variance? If yes, please describe. If not, why not?  3. Is the variance substantial? Please explain the basis for your conclusion.  4. Will the variance have any adverse impact on physical or environmental conditions in the neighborhood or district? If yes, please
<ol> <li>Will there be any undesirable change in the character of the neighborhood, or a detriment to nearby properties if this variance is granted? If yes, please describe. If not, why not?</li> <li>Can you achieve your goals via a reasonable alternative which does not involve the necessity of an area variance? If yes, please describe. If not, why not?</li> <li>Can you achieve your goals via a reasonable alternative which does not involve the necessity of an area variance? If yes, please describe. If not, why not?</li> <li>Is the variance substantial? Please explain the basis for your conclusion.</li> <li>Will the variance have any adverse impact on physical or environmental conditions in the neighborhood or district? If yes, please</li> </ol>
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5. Is this a self-created difficulty? Please explain your answer.
List any churches, public buildings, playgrounds, recreation facilities within 500' of the property lines of the above referenced property
List any wetlands, or protected lands within 500' of the above referenced property
List any County/ State lands or Highways within 500' of the above referenced property

# AREA Variance (Continued):

To be filled out by the Town of Athens Zoning Board of Appeals:
Date of Vote
Vote to APPROVE
Vote to DENY
Action (Approved / Denied)
Zoning Board Statement of Evidence used for Conclusion:
Zoning Board Condition(s) for Approval (if any):