

TOWN OF STILLWATER



ESTABLISHED 1788 – SITE OF THE TURNING POINT OF THE AMERICAN REVOLUTION

Box 700, STILLWATER, NY 12170 (518) 664-6148, FAX (518) 539-0002
 BUILDING, PLANNING & DEVELOPMENT DEPARTMENT

AREA VARIANCE APPLICATION

PROJECT #	FEE: \$200.00	<input type="checkbox"/> FEE PAID	DATE REC'D: / /	BY:
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Part I:

PROJECT INFORMATION			
Project Name:			
Address/Location:			
APPLICANT/REPRESENTATIVE INFORMATION			
Name:			
Email (req'd):	Cell:	Work phone:	
Current address:			
City:	State:	ZIP Code:	
OWNER INFORMATION			
Name:			
Email:	Cell:	Home phone:	
Current address:			
City:	State:	ZIP Code:	
SITE INFORMATION			
Parcel Identification (SBL) # of all lots included:			
Number of new lots proposed:			
Zone (Check applicable district): <input type="checkbox"/> RR <input type="checkbox"/> LDR <input type="checkbox"/> RRD <input type="checkbox"/> B1 <input type="checkbox"/> BP <input type="checkbox"/> I <input type="checkbox"/> PDD <input type="checkbox"/> Rt 67 West <input type="checkbox"/> T2 <input type="checkbox"/> T3N <input type="checkbox"/> T3G <input type="checkbox"/> T4 <input type="checkbox"/> T5			
Size of existing lot(s): _____ acres, _____ acres, _____ acres, _____ acres, _____ acres, _____ acres			
Size of proposed lots: _____ acres, _____ acres, _____ acres, _____ acres, _____ acres, _____ acres			
Proposed Use: <input type="checkbox"/> Residential Single Family <input type="checkbox"/> Residential Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Other _____			
REASON FOR DENIAL			
Request does not meet minimum requirement for:			
<input type="checkbox"/> Bulk Area <input type="checkbox"/> Front/Side/Rear(Circle One) Yard Setback <input type="checkbox"/> Lot Width <input type="checkbox"/> Frontage on a Public Street			
Section(s) of the Code that is non-conforming (http://ecode360.com/ST2761):			
a. Chapter _____, Section _____, Letter _____, Number _____			
b. Chapter _____, Section _____, Letter _____, Number _____			
c. Chapter _____, Section _____, Letter _____, Number _____			
Description:			

Part II:

AREA VARIANCE TESTS

In making its determination whether to grant an area variance, 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 the health, safety and welfare of the neighborhood or community by such grant. Accordingly, the Applicant for an Area variance must satisfactorily demonstrate the following (add additional pages as needed):

1. Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance. The applicant shall demonstrate why an undesirable change will not result or detriment to nearby properties will not be created:

2. Whether the benefit sought by the applicant can be achieved by some method, feasible for the applicant to pursue, other than an area variance. The applicant must demonstrate that other means practicable have been considered to achieve the benefit sought other than a variance:

3. Whether the requested area variance is substantial. The applicant shall demonstrate why the variance requested is not substantial in form:

4. Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district. The applicant must demonstrate that if granted, the variance will not have an adverse effect or impact:

5. Whether the alleged difficulty was self-created, which consideration shall be relevant to the decision of the board of appeals, but shall not necessarily preclude the granting of the area variance. The applicant shall state why the hardship is not self-created:

Part II:

All applications must be completed by the applicant or a duly authorized representative and submitted to the Planning Department in its entirety.

The Department will notify the applicant or the duly authorized representative when the project is placed on a Board Agenda and he or she **MUST be present at that Board meeting for presentation.**

SIGNATURES

To the best of my knowledge the information provided in this application and on the attached plans and accompanying documentation is true and accurate.

I, the undersigned, have thoroughly read and understand the application and the list of items to be shown on the plans and documents for review and I consent to all the requirements as set forth in the application.

APPLICANT/OWNER SIGNATURE*

PRINT OR TYPE NAME OF SIGNED

*** Applicant must either be the owner of the property to be developed or used, or be a party with a purchase agreement for the property. A copy of the purchase agreement must be attached.**

AUTHORIZATION TO ACT AS AGENT

In the event that the owner of the property desires to have another individual act as his/her authorized representative in support of this application the following statement must be completed and signed:

I, _____, owner of the premises located at _____
Number Street

TAX ID _____, hereby designate, _____
Section Lot Block Printed Name of Agent

as my agent regarding this application for review.

Part III:

APPLICATION PREPARATION CHECKLIST

To be considered for placement on an agenda, the application must be submitted and deemed complete and must include the Application Fee and the following. Incomplete applications will not be accepted and will be returned to the applicant. Exclusion of any required materials will result in the delay of project review.

DIGITAL COPIES OF ALL MATERIALS ARE MANDATORY. ANY APPLICATION SUBMITTED WITHOUT DIGITAL COPIES OF ALL MATERIALS WILL BE DEEMED INCOMPLETE.

Fifteen (15) printed (and 1 digital) copies of the following materials:

The following materials are required:	Applicant Initials	Internal
Application form		
Written Description of the proposal		
Short or Long Environmental Assessment Form Pursuant to the N.Y.S. State Environmental Quality Review Act (SEQRA). These forms are available at http://www.dec.ny.gov/permits/6191.html		
Maps ***Printed maps must be folded Size of 22x34 inch maximum should be used when practical See Map Preparation Instructions below		
Digital Copies ***Must be on CD, Jump Drive, or downloadable email format		
Public Notice Fee The cost of this fee will be determined by the Planning Board based on the number of notifications required and must be submitted no later than 14 days prior to the meeting		
The following additional items may be necessary following your initial submission:		
Engineering and legal escrow fees To be determined following initial review of the application. This fee must be paid prior to placement on an agenda		
Additional copies of any and all materials submitted for SEQRA or other purposes		

MAP PREPARATION INSTRUCTIONS

Please prepare a map consistent with Town Zoning depicting the following items consistent with the Town Subdivision Regulations, as well as items outlined in the Town Subdivision Design Standards. Copies of these standards are available at <http://www.ecode360.com/11864758>. The Department reserves the right to request any additional items it deems necessary for review. The Board may, at its discretion, require the submission of additional information not specified within these regulations or standards.

MAP MUST INCLUDE:	Applicant initials	Internal
Site plan drawn to scale at one inch equals 50 feet or larger		
All existing and proposed boundary lines		
All existing and proposed easements and Rights of Way		
Existing Zoning Districts and boundaries		
Names and owners of all adjacent properties		
Street names for any existing or proposed roadways		
Federal or State regulated Wetland delineations		
Location and design of all proposed site improvements including drainage, retaining walls, berms, fencing, etc.		
Location of existing or proposed septic systems		
Location of existing or proposed wells		
Contour intervals when appropriate		
North arrow and site location map		
Standard notes as detailed below		
Approval Block as shown below		

Standard Notes: The following notes are the minimum requirement on all plats. Additional notes may be necessary as defined in the Town Subdivision Design Standards, Section 1.12 or as requested by the Board.

1. This property may border a farm, as defined in the Town of Stillwater Local Law #1 of the year 1997. Residents should be aware that farmers have the right to undertake farm practices which may generate dust, odor, smoke, noise and vibration.
2. This proposal includes a total of **[insert parcel area]** ± acres and lies within the Town of Stillwater **[insert zoning district]** zoning district.
 Min lot size: _____ sf
 Min lot width @ bldg line: _____ ft
 Setbacks:
 Front: _____ ft
 Side: _____ ft
 Rear: _____ ft
3. Parcel is identified as tax parcel **[insert tax ID number]**, Town of Stillwater, Saratoga County, New York.
4. The average lot size is **[insert size]** sq. ft.
5. Describe any easements or other restrictions on this property

Town of Stillwater Approval Block:

TOWN OF STILLWATER ZONING BOARD APPROVAL
 APPROVED BY RESOLUTION OF THE ZONING BOARD OF THE TOWN OF STILLWATER, NEW YORK, ON THE _____ DAY OF _____, 20____ SUBJECT TO ALL REQUIREMENTS AND CONDITIONS OF SAID RESOLUTION. ANY CHANGES, ERASURES, MODIFICATIONS OR REVISIONS OF THIS PLAT, AS APPROVED, SHALL VOID THIS APPROVAL SIGNED THE _____ DAY OF _____, 20____
 BY _____
 ZONING BOARD CHAIRMAN