

ZONING BOARD OF APPEALS

439 Main Street, Catskill, New York 12414
TEL: (518) 943-2381 – FAX: (518) 943-5251

Area Variance Application Instructions

The Catskill Zoning Board of Appeals (ZBA) meets on the 4th Wednesday of each month. The meetings are held in Catskill Town Hall, 439 Main Street, Catskill, NY 12414 at 6:00 PM.

The following information is required to be submitted to the Code Enforcement Office before the ZBA can address the Area Variance application as complete:

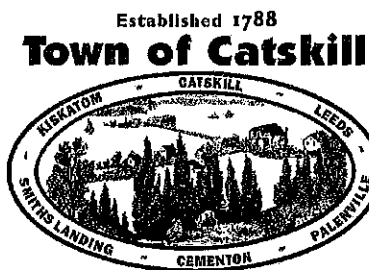
1. Building Permit application denial.
2. Completed Area Variance application.
3. Residential Area Variance Application fee of \$50.00 payable to Town of Catskill.
4. Plot plan of the parcel depicting well, sewage disposal system, existing buildings and proposed new construction.
5. Delineate the distance from existing and proposed building structures to all property lines.
The Plot Plan should be drawn to scale and accurately dimensioned.
6. Map of surrounding area.
7. If Name is not on title: Applicant must show proof of ownership (Deed, Trust, or Title Policy).
8. Site visit authorization.

This completed application must be submitted to the Code Enforcement Office or the Planning and Zoning Office by noon of the eighth day before the ZBA's scheduled monthly meeting in order to be placed on the ZBA's agenda. Once your application is on the agenda, the ZBA will review it at that meeting. It is not required for the Applicant to attend the review but it is advisable to be present to answer any questions the ZBA may have. The ZBA will schedule a Public Hearing on your application within 62 days of the filing of a complete and proper Area Variance Application.

All property owners within 300 feet of your property boundaries must be notified of the Public Hearing. You will be given the Public Hearing Notice and the names of the property owners that need to be notified. These **notices must be sent certified mail return receipt requested** with your return address. The receipts and any green cards returned to you must be brought to the Public Hearing as proof of mailing. **You are required to appear in person or by agent or attorney at the Public Hearing.** Notice of your hearing is also required by law to be published in the local newspaper. The ZBA Secretary will publish the Public Hearing Notice.

After the Public Hearing, the ZBA has 62 days to make a decision on your application. They try to render a decision as soon as possible. The Applicant will be notified by phone or e-mail of the ZBA's final decision within five business days after the decision is rendered.

Thank you for adhering to our Area Variance Application requirements. Should you have any questions, please contact the Code Enforcement Office or the Planning and Zoning Office.



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Area Variance Application

Office Use Only

Appeal concerns property at the following address:

Property Tax Map No.: _____

Date Owner acquired the property: _____

Zoning District: _____

RA, MR, HR, GC, HC, I, or C ⁽¹⁾

⁽¹⁾ (Can verify District with the GIS Map on the website above)

Application No.: V- _____

Date of Appeal: _____

(postmark or hand delivered)

Date of Receipt by ZBA _____

Date of Public Hearing: _____

Date of Final Action: _____

Date Filed with Town Clerk: _____

If property is not owned by the Applicant, the Applicant must submit a signed statement by the Property Owner authorizing the Applicant to appeal on his or her behalf.

The Applicant's appeal from a decision of the Zoning Enforcement Officer, or on direct appeal from the Planning Board as permitted by Town Law, concerns the following:

_____ Denial of an Application for a Building Permit or Certificate of Occupancy (Attach to Application)

_____ Denial of an Application for a Site Plan Approval or Special use Permit (Attach to Application)

For the Proposed Activity of: _____

Denial was made because of a violation of the Town Zoning Code Section(s): _____

Date of Zoning Enforcement Officer's or Planning Board's Decision: _____

State what type(s) and size(s) of Area Variance you are requesting (for example - a 3 foot Side Yard Area Variance):

State the reason you are applying for the Area Variance: _____

Describe the character of the neighborhood: _____

Applicant Name: _____ Telephone: _____

Mailing Address: _____

Email Address: _____

Applicant Signature: _____ Date: _____