

Town of Patterson Zoning Board of Appeals



Instructions to Applicants for Variance Application

IMPORTANT: An application for a variance or interpretation CANNOT be accepted by the Planning & Zoning Department without a final determination from the Building Department (unless an exception has been granted). It is the responsibility of the applicant to obtain this determination prior to submitting an application to the Zoning Board of Appeals.

How to Apply...

1. The Applicant must receive a denial from the Building Department for a building permit, a determination from the Code Enforcement Officer or other administrative officer or agency that the Applicant is appealing (unless an exception has been granted). Please, attach the denial or determination to the ZBA Application.
2. Submit seven (7) copies of the following information:
 - A. ZBA Application form with **all** questions answered and all necessary signatures obtained.
 - B. Sketch, drawing, or plan, prepared by a NYS licensed surveyor, architect, or engineer showing dimensions and locations of all existing and proposed buildings, structures, and permanent improvements, and any other information as may be necessary for determination. The Planning Department may permit a hand-drawn sketch if warranted by the simplicity of the Application.
 - C. Survey prepared by a NYS licensed surveyor showing the property boundaries, the location of all existing structures and improvements, and the side, front, and rear yard setbacks.
 - D. Deed to property showing all easements and restrictions on the property, if any.
 - E. If applying for a Special Permit for an Accessory Apartment, the completed Compliance Checklist and Accessory Apartment Application.
 - F. One (1) signed copy of the Address List Waiver, authorizing the Planning & Zoning Dept. to generate a list of adjacent property owners within 500 ft.
3. Cash or check made payable to the Town of Patterson (Total Fee: Application Fee + Postage Cost).

When to Apply...

The application and materials must be submitted to the Zoning Board of Appeals no less than **two (2) weeks prior** to the scheduled meeting date (a schedule of submission deadlines is available online or may be obtained through the Planning & Zoning Department). The Zoning Board of Appeals meetings are typically held on the third (3rd) Wednesday of each month; however, these meeting dates are subject to change. Please, verify meeting schedule with the Planning and Zoning Department upon application submission.

Attendance at the Hearing...

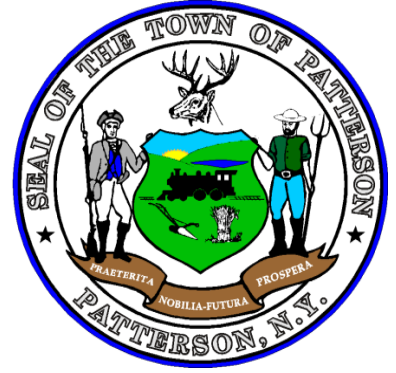
The Applicant, the Applicant's Attorney, Engineer or Architect or a duly authorized person must attend the public hearing. ***If anyone other than the applicant is representing the application at the public hearing, the authorization of the applicant is required to be submitted in writing prior to the public hearing date.***

Zoning Board of Appeals Application Fees

Area Variance	
• First Area Variance.....	\$175.00
• Each Additional Area Variance.....	\$50.00
Use Variance	\$350.00
Interpretation	\$150.00
Special Use Permits	
• Accessory Apartment (New)	\$250.00
• Accessory Apartment (Existing).....	\$500.00
• Livery/Taxi Cab Service (Single Vehicle)	\$150.00
• Use Accessory to Principal Use (Residential District)	\$500.00
• All Other Special Use Permits.....	\$500.00, plus \$0.10 per square foot of building floor area over 5,000 sq. ft.; total application fee shall not exceed \$3,000.00
General Appearance Fee (at time of application)	\$100.00
Postage	\$0.60 for each name on generated list of property owners within 500 ft.

NOTE: *Where an application has been submitted requesting approval of an activity that has already been commenced, or for a structure that has already been constructed, the application fee shall be two times the regular fee amount.*

Town of Patterson Zoning Board of Appeals



ZBA Office Use Only

Case #: _____

Date Received: _____

Fee Paid: _____

Check #: _____

Application For:

- Residential Commercial
- Interpretation of Zoning Code Section _____ Special Permit under § _____
- Appeal of Action of Zoning Code Enforcement Officer/Other Authorized Agency
- Accessory Apartment – Special Permit Use Variance
- Area variance
- Front yard Rear yard Side yard Lot size Frontage Other – Specify: _____

Property Information

Property Tax Map #: _____ Zoning District: _____ Lot Area: _____

Property Address: _____ City: _____ State: _____ Zip: _____

Applicant Information

Applicant's Last Name: _____ First Name: _____

Corporation/Partnership/Other: _____

Mailing Street Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Property Owner Information

Applicant's Last Name: _____ First Name: _____

Corporation/Partnership/Other: _____

Mailing Street Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

1. Proposed Project Description (Attach additional pages as needed): _____

2. Justification of Request (Attach additional pages as needed): _____

3. If applying for Front, Side, Rear, Lot Size, or frontage variances, answer below:

Property Line (F/S/R)	Code Requires	Currently Exists	Will Exist	Variance Required

4. Has an application with reference to this property been previously before the Zoning Board of Appeals, the Planning Board, or the Town Board, etc.: If yes, give dates and details: Yes No

Date: _____ Details: _____

Final Determination: _____

5. Does Applicant/Owner own any other properties within 500 feet of property under consideration:

Yes No If yes, give address: _____

6. Describe any easements or Deed restrictions: _____

7. Other Agency approvals required: Yes No If yes, give details: _____

8. Has any work been already started on this property: Yes No If yes give details: _____

9. Does the property meet the requirements of Municipal Law §239m such as:
is the property within 500 feet from any municipal boundary, or any existing or proposed County or State park or other recreation area, or the right of way of any existing or proposed County or State Road or highway, stream or drainage channel, or an existing or proposed boundary of any County or State owned land on which a public building or institution is located:

Yes No If yes, please submit one additional copy of application and related materials.

10. Has an Environmental Assessment Form (EAF) been provided for this application (Not required for residential area variances or lot line variances): Yes No

Signature of Applicant: _____

Date: _____

Signature of Owner (if other than Applicant): _____

Date: _____

Authorization for Filing Application

This section must be executed if anyone other than the owner is making this application and signature must be notarized.

_____ is hereby authorized to make the within application.

By: _____

Dated: _____

Sworn to and subscribed, before me,

This ____ day of _____, 20____

Notary Public

List of Property Owners within 500 Feet

To the best of my knowledge and to the extent of the records in the Town of Patterson Assessor's Office that the list attached to this application contains the names and addresses of each property owner on record of land within 500 feet of the property lines for which this variance/permit is sought.

Applicant's Signature: _____

Dated: _____

Site Inspection Authorization

I the under signed hereby give permission for the Town Of Patterson Municipal Agencies and their agents to come and inspect the premises with respect to this application to the Patterson Zoning Board of Appeals.

Site Address: _____

Property Owner's Signature: _____

Dated: _____

Affidavit of Ownership

STATE OF NEW YORK :
 SS :
COUNTY OF PUTNAM :

_____ of full age, being duly sworn according to law on oath
Property Owner Name

deposes and says, that the deponent resides at _____
Property Owner Street Address

in the municipality of _____ in the County of _____ and in the
Town/City *County*

State of _____; _____ is the owner in
State *Property Owner Name*

fee of all that certain lot, piece, or parcel of land situated, lying , and being in the Town of Patterson, which is
known and designated as _____
Property Address for Which Application is Being Made

Signature (Notarization required)

Sworn to and subscribed, before me,
This ____ day of _____, 20__

Notary Public

If you are submitting an application as a corporation, you must also complete the bottom portion of this page. A list of all principals and officers of the corporation MUST BE ATTACHED to this application.

_____ of full age, being duly sworn according to law on
Property Owner Name

oath deposes and says, that _____
Corporation Name

is a corporation duly organized and existing under the laws of the State of New York or is a _____
State

State Corporation duly authorized to conduct business in the State of New York including the submission of this Application; and further that the attached list of individuals are Principals and/or Officers of the aforementioned Corporation.

Signature (Notarization required)

Sworn to and subscribed, before me,
This ____ day of _____, 20__

Notary Public

Town of Patterson
Disclosure of Interests

Property Address: _____

Case #: _____

Part I: Owner Information

Property Tax Map #: _____ Owner's Name: _____

Street Address: _____

Nature of Application, Petition, or Request: _____

Part II: Nature & Extent of Interest

List the Name, residence or address, nature and extent of interest, as defined by General Municipal Law §809, of any State Officer or employee, Putnam County Officer or employee, or Town of Patterson Officer or employee, or of any municipality of which the Town of Patterson is a part has any interest in the property identified above, or is a part of has any interest in the person or firm/partnership or association making the above application, petition or request. If there is no conflict of interest, answer "None".

Part III: Certification

The Undersigned Applicant, Petitioner or Person (Firm), submitting an Application as identified above certifies by signature on this Disclosure Statement that, in accordance with the provisions of General Municipal Law §809, except as stated in Part II above, no State Officer or employee, County Officer or Town of Patterson Officer or employee, or of any municipality of which the Town of Patterson is a part has any interest, financial or otherwise, in the property identified above, or is a part of has any interest in the person or firm (partnership or association making the above application, petition or request.

Signed: _____
(Applicant, Petitioner or Person (Firm) Making Request)

By: _____
(Print Name and Title)

Dated: _____

PLANNING DEPARTMENT

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Shannon Jenkins
Town Planner

Telephone (845) 878-6500
FAX (845) 878-2019



**TOWN OF PATTERSON
PLANNING & ZONING OFFICE**

ZONING BOARD OF APPEALS

Lars Olenius, Chairman
Stephanie Fox, Vice Chair
Marianne Burdick
Robert Schmitt
Joseph Esposito

PLANNING BOARD

Thomas E. McNulty, Chairman
Ron Taylor, Vice Chair
Joseph Downey
Peter Muentener
Steven Tocidlowski

Address List Waiver

Property Tax Map #: _____ Zoning District: _____

Property Address: _____ City, State, Zip: _____

The Town of Patterson is providing the applicant with a computer-generated list of the neighboring property owners within 500 ft. of the subject property. The Town of Patterson makes no representation as to the accuracy of the list. It is the applicant’s responsibility to verify the accuracy of the list to make sure that all neighboring property owners within 500 ft. of the subject property are included in the list either on-line at <http://www.pattersonny.org/Assessor.php#online>, with the Assessor’s Department for the Town of Patterson or such other Department as may maintain an accurate and current address list, or with the United States Post Office.

Applicant’s Name

Applicant’s Signature

Street Address

City, State, Zip