VILLAGE OF WAPPINGERS FALLS



BUILDING DEPARTMENT
OFFICE OF PLANNING AND ZONING
OFFICE OF CODE ENFORCEMENT
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590

PHONE: (845) 297-5277 FAX: (845)296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

APPLICATION FOR USE VARIANCE

SUBMISSION REQUIREMENTS

- 1. All sections of the application form must be complete and accurate.
- 2. Application fee (non-refundable):cash or checks payable to "Village of Wappingers Falls"
- 3. The application must be filed with ten (10) copies of your appeal, together with ten (10) copies of all supporting documentation including:
 - "Letter of Denial"
 - _ If applicant is different from owner, provide notarized owner's consent in writing with the original signature
 - _ Affidavit of ownership
 - _ Contract of Sale or Lease, if applicable
 - _ EAF short form (or long form if deemed necessary).
 - _ Copies of financial evidence to support zoning hardship. They may include but are not limited to: cash flow analysis of property, income, bill of sale, recent appraisal of property, lease, rental agreements, tax bill, Realtor's Statement of inability to rent/sell.
 - Photographs of existing structure(s).
 - _ Drawings and surveys which reflect what exists and what is proposed.

APPLICATION DEADLINE:

In order to be on the following month's agenda you should submit a properly completed application fourteen (14) business days before the Zoning Board of Appeals meeting date. For the complete list of deadlines, go to "ZBA MEETING DATES" on the village web site (www.wappingersfallsny.gov), and look under the Departments> Zoning link for meeting dates for the Zoning Board of Appeals.

ZBA meetings begin at 7:30 p.m. and are usually held on the second Tuesday of each month; however, holidays, weather could necessitate the cancellation or rescheduling of a meeting. You are encourage to call the Planning and Zoning office the day of the meeting to confirm the meeting.



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OFFICE OF PLANNING AND ZONING

(845) 297-5277 Fax: (845) 296- 0379

APPLICATION FOR A USE VARIANCE

	APPEAL NUM	ÍBER:	MEETING	6 DATE:		
APPLICANT: Name:						
Phone Numbers	s: (H)					
PROPERTY O'Name:	WNER:					
	(E-m	ail)	(C)			
PROPERTY IN						
		peal)-: <u>-</u> D				
		sq. ft. Width		_		
		ft. Rear 				
		Prop				
SECTION(S) O	F ORDINANO	CE FROM WHIC	H VARIANCE	IS REQUEST	ED:	
DESCRIPTION		S REQUESTED:				
		OF PRIOR APPE				
PLANNING BO	OARD REVIEW	V DATE(S):				



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APPLICATION FORA USE VARIANCE (Continued)

PLEASE ANSWER THE FOLLOWING QUESTIONS: (Use attachments if necessary)

1. What land use hardship exists on the property for which the appeal is made (consider all uses permitted by zoning when answering this question)?
2. What unique circumstance(s) or condition (s) peculiar to the land or structure (s) necessitate this variances?
3. Did the unique circumstance (s) or condition (s) exists prior to your purchase/ ownership/use ofland?
Explain:
4. How will the proposed use affect surrounding properties with respect to:
a. Noise and light disturbances?
b. Traffic floe?
c. Parking?
d. Sanitary problems?
e. Hazards?
f. Compatibility to permitted uses?
h. Visual aesthetics?
i. Public services like schools, police, fire, water, sewer, and roads?
j. The health, security, moral or general welfare of residents, visitors or workers in the area?