

Application # _____

**ZONING BOARD OF APPEALS (ZBA) APPLICATION FOR
TOWN OF WARWICK, NEW YORK**

Date: _____

APPLICANT IS: OWNER _____ TENANT _____ OTHER _____

Owner Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Applicant Name (if different from owner): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Attorney Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

PARCEL INFORMATION:

ADDRESS: _____

S-B-L: _____ - _____ - _____

ACREAGE: _____

ZONING DISTRICT _____

CHECK LIST OF APPLICATION REQUIREMENTS:

- _____ 1. Two copies of this application form completed in full, AND
- _____ 2. Fee of \$150 residential and \$250 commercial (if check, please make payable to Z.B.A., Town of Warwick), AND
- _____ 3. Ten copies of a plot plan with a scaled drawing showing improvements on property and the proposed new construction with distances from the lot lines that maybe applicable, AND
- _____ 4. One or more recent photographs of front and back of structure, AND
- _____ 5. Copy of Notice of Disapproval from Building Inspector and/or Planning Board, or Other, AND
- _____ 6. Two copies of deed to property or executed contract of sale

**APPLICATION WILL NOT BE ACCEPTED UNLESS ACCOMPANIED BY
ALL OF THE ABOVE REQUIRED SUPPORTING MATERIALS**

PLEASE ANSWER ALL QUESTIONS 1 THRU 9

1. Are existing premises presently occupied? _____ Seasonally? _____ Year-Round? _____
Owner occupied? _____
2. Has improvement addition or construction been started? _____
3. Is a STOP WORK ORDER in effect as of this date? _____
4. A previous appeal has _____, has not _____ been made with respect to this decision of the
Building Inspector or with respect to the property. Such appeal(s) was (were) in the form of
_____ A requested interpretation. _____ a requested variance. _____ Date of Hearing.
5. Are the lands or buildings within five hundred (500) feet of? (Yes or No)
_____ A. Boundary of any City, Town or Village.
_____ B. Boundary of any existing or proposed State or County park or other recreation
Area.
_____ C. Right-of-way of any existing or proposed State or County parkway, thruway,
Expressway, road, or highway.
_____ D. Right of way of an existing or proposed stream or drainage channel owned by
The County or for which the County has established channel lines.
_____ E. Boundary of any existing or proposed State or County owned land in which a
Public building or institution is or is proposed to be situated
6. State reason for Appeal, due to undue hardship and/or practical difficulties:

7. Type of Appeal. Appeal is made herewith for:
_____ An interpretation of the Zoning Ordinance of Zoning Map.
_____ A variance to the Zoning Ordinance.

*Any additional information requested by the Zoning Board of Appeals must be submitted by the applicant not later than **120** days after the first hearing date. This application will be voided, if the applicant does not comply with the Zoning Board of Appeals' request by the 120 day after the first hearing date.

STATE OF NEW YORK)
COUNTY OF)s s

Sworn before me on this day of

Month _____ Date _____ 20____

Notary Public

Applicant's Signature

AGRICULTURE DATA STATEMENT
AGRICULTURAL & MARKETS LAW SECTION 305-a

Name and address of applicant

Is a use variance requested for lands within 500 feet of a farm operation located in an agricultural district?

Yes _____ No _____

If answer is yes, affix tax map or other map showing site of proposed project relative to the location of farm operation(s) identified and complete the following:

Location of project:

Street: _____ Sec _____ Block _____ Lot _____

Name and address of owners of land within agricultural district, which land contains farm operation(s) and is located within 500 feet of the applicant's boundary:

Description of project:

Dated: _____

Applicant

* Defined as the land used in agricultural production, farm buildings, equipment and farm residential buildings.

AREA VARIANCE

The following information is submitted in support of the application (the law does not require that all of the questions be answered in the negative to obtain a variance):

1. Will an undesirable change be produced in the character of the neighborhood or a detriment to nearby properties be created by the granting of the variance(s) you request? ____ Yes ____ No

State the reason(s) for your answer.

2. Can the benefit you seek be achieved by some feasible method, other than the variance(s)? ____ Yes ____ No

State the reason(s) for your answers.

3. Is the requested variance(s) substantial? ____ Yes ____ No.

State the reason(s) for your answer.

4. Will the proposed variance(s) have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district? ____ Yes ____ No.

State the reason(s) for your answer.

5. Is the alleged difficulty self-created? ____ Yes ____ No.

State the reason(s) for your answer.

USE VARIANCE

You must prove necessary hardship to obtain a use variance. In order to prove unnecessary hardship, you must prove **all** of the following:

1. You cannot realize a reasonable return on property. The lack of return must be substantial and demonstrated by competent financial evidence. Can you show a lack of a substantial return? ____ Yes ____ No.

What financial evidence are you presenting?

2. The alleged hardship relating to the property in question must be unique, and not applicable to a substantial portion of the district or neighborhood. Is your hardship unique and not applicable to a substantial portion of the District or neighborhood? ____ Yes ____ No.

State the reason(s) for your answer.

3. The requested use variance, if granted, will not alter the essential character of the neighborhood. Will the use variance requested alter the essential character of the neighborhood? ____ Yes ____ No.

State the reason(s) for your answer.

4. The alleged hardship cannot be self-created. Is your hardship self-created? ____ Yes ____ No.

State the reason(s) for your answer.

Directions

1. **Time to file Appeal.** An appeal to the Board of Appeals must be taken within sixty(60) days after the filing of the order, requirement, decision, interpretation or determination of the administrative officer charged with the enforcement of the ordinance or local law by filing with such administrative official and with the Board of Appeals a Notice of Appeal specifying the grounds thereof and the relief sought.
2. **Relief Sought.** An appeal can request an interpretation and/or a variance.
3. **Definition.** (a) "Use variance means the use of land in a manner or for a purpose which is otherwise is not allowed or prohibited by the applicable zoning regulations. (b) "Area variance" means the use of land in a manner which is not allowed by the dimensional or Topographical requirements of the applicable zoning regulations.
4. **Proof Necessary to obtain a Use Variance.** You must show that the applicable zoning Regulations and restrictions have caused unnecessary hardship. You must show that for each and every permitted use under the zoning regulations for the particular district where the property is located (1) you cannot realize a reasonable return, provided that the Lack of evidence; (2) that the alleged hardship relating to the property in question is unique, and does not apply to a substantial portion of the district or neighborhood; (3) that the requested use variance, if granted will not alter the essential character of the neighborhood, and (4) that the alleged hardship has not been self-created
5. **Proof necessary to Obtain an Area Variance .** The Zoning Board must take into consideration the benefit to you if the. variance is granted, as weighed against the detriment to the health, safety, and welfare of the neighborhood or community by such grant. In making such determination, the Board must also consider the following:
(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; (2) Whether the benefit sought by you can be achieved by some method, feasible for you to pursue, other than an area variance; (3) Whether the requested area is substantial; (4) Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district, and (5) Whether the alleged difficulty was self-created. . . .
6. **Appeal from Decision of Zoning Board.** Any person aggrieved by the decision may apply to the Supreme Court for review by a proceeding under Article 78 of the Civil Practice Law and Rules. Such proceeding must be instituted within thirty (30) days after the filing of the Decision of the Board in the office of the Town Clerk.

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information

Name of Action or Project:

Project Location (describe, and attach a location map):

Brief Description of Proposed Action:

Name of Applicant or Sponsor:

Telephone:

E-Mail:

Address:

City/PO:

State:

Zip Code:

1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?

NO

YES

If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.

☐

☐

2. Does the proposed action require a permit, approval or funding from any other government Agency?

NO

YES

If Yes, list agency(s) name and permit or approval:

☐

☐

3. a. Total acreage of the site of the proposed action? _____ acres

b. Total acreage to be physically disturbed? _____ acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres

4. Check all land uses that occur on, are adjoining or near the proposed action:

☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)

☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Specify):

☐ Parkland

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		

TOWN OF WARWICK ZONING BOARD OF APPEALS

State Environmental Quality Review (SEQR)

Instructions for completing the Environmental Assessment Form (EAF) required for consideration of your application for an Area Variance or a Use Variance.

The [EAF Mapper](https://gisservices.dec.ny.gov/eafmapper/) can generate a partially completed EAF for applicants/ project sponsors -- once a project location is defined, this GIS application will auto-populate several questions on Part 1.

Here are the steps:

- 1- Go to: <https://gisservices.dec.ny.gov/eafmapper/>
- 2- Click "Enter"
- 3- In the panel on the rights side of the screen,
 - a. Step 1: Navigate to Area
 - i. Click "Locate Address"
 - ii. Type Street Address and click "Locate"
 - iii. Click "+" to zoom in until you can see the Tax Map property lines
 - b. Step 2: Define Project Site
 - i. Click "Select Tax Parcel"
 - ii. Click inside the boundaries of your Tax Lot
 - c. Step 3: Create Report
 - i. Click "Short Form, Part 1" or "Long Form, Part 1" (most residential applications can use the Short Form).
 - ii. Patiently wait for PDF to be generated and find it in your "Downloads" folder.
- 4- Open the Short Form EAF PDF from your downloads folder and edit the additional details.
- 5- Questions # 7, 12, 13-a, 15, 16, & 20 will be at least partially completed for you based on publicly available data about your particular parcel. **DO NOT ALTER THE PRE-CHECKED ANSWERS PROVIDED BY THE EAF MAPPER;** doing so would constitute making a false statement to a government agency.
- 6- Print out the completed Short Form EAF, including the EAF Mapper Summary Report, (with the location map included), sign and date it, make a copy for yourself and submit the original to the Planning Department Secretary to supplement your application. See the attached copy for reference.

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
q			
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		<input type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?		NO	YES
If Yes, list agency(s) name and permit or approval:		<input type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		_____ acres	
b. Total acreage to be physically disturbed?		_____ acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO <input checked="" type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input checked="" type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	

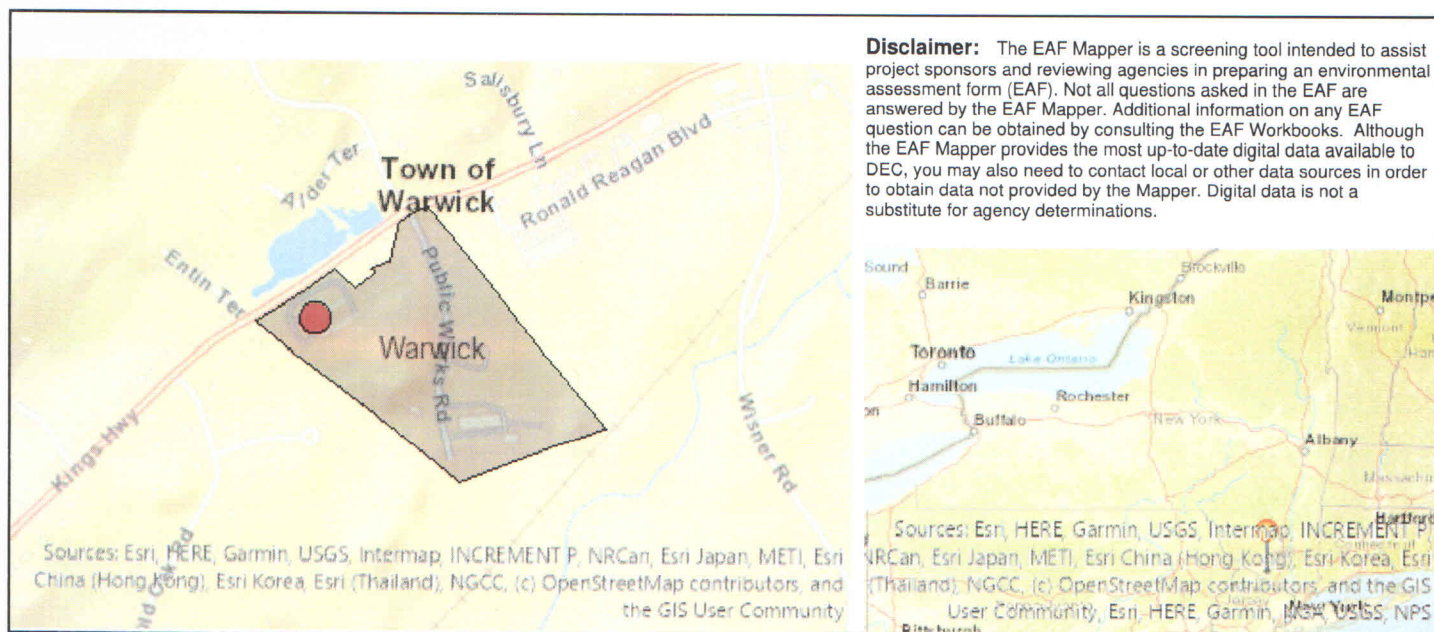
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
Bog Turtle, Indiana Bat	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES
If Yes,	<input type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe:		

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____	<input type="checkbox"/>	<input type="checkbox"/>

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe: _____	<input type="checkbox"/>	<input type="checkbox"/>

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?	NO	YES
If Yes, describe: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Bog Turtle, Indiana Bat
Part 1 / Question 16 [100 Year Flood Plain]	Yes
Part 1 / Question 20 [Remediation Site]	No

ZONING BOARD OF APPEALS (ZBA) FOR
TOWN OF WARWICK, NEW YORK
APPLICATION CERTIFICATION & PROXY STATEMENT

IN THE EVENT OF CORPORATE OWNERSHIP: A list of all members, directors, officers and/or stockholders of each corporation or LLC owning more than five percent (5%) of any class of stock must be attached.

COUNTY OF _____
STATE OF _____ SS:

I, _____, being duly sworn, hereby depose and say that all the above statements and the statements contained in the Zoning Board of Appeal application submitted herewith are true to the best of my knowledge.

Sworn before me this _____
_____ Day of _____ 20__

Signature of Owner (or Applicant if different from Owner)
Title _____

Notary Public

PROXY STATEMENT (Completion required ONLY if applicable)

COUNTY OF _____
STATE OF _____ SS:

_____, being duly sworn, deposes and says that s/he resides
at _____ in the County of _____ and
(Owners Address)

State of _____, and that s/he is the Owner in fee of the premises
(or the _____ of _____) described in the
(Official Title) (corporation which is the Owner in fee)

foregoing application and that s/he has authorized the above identified Applicant to make the foregoing application for Zoning Board of Appeals approval as described herein and to represent the Owner on all Zoning Board of Appeals matters.

Sworn before me this _____
_____ Day of _____ 20__

Owner's or Official's Signature

Notary Public