

Zoning Board of Appeals

Rose Mary Hankins, Secretary
Tel: 845.439.4399 x 302
Fax: 845.439.3775

VARIANCE APPLICATION

Top section and second page are to be completed by applicant.
Submit to Code Enforcement Officer at above address with fee and documents.

Applicant\*

Property Identification

Name: \_\_\_\_\_

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

Tel: \_\_\_\_\_ (Day) \_\_\_\_\_ (Evening)

Zoning District: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Email: \_\_\_\_\_ (If Used)

Acquisition Date: \_\_\_\_\_ Mortgagor: \_\_\_\_\_

Property owner(s), if different from applicant(s), must provide signed/notarized permission for the Variance process. See signature line on second page. Supply address of mortgagor, if appropriate.

Code Enforcement Action

Examined: \_\_\_\_\_, 20\_\_\_\_. Approved: \_\_\_\_\_, 20\_\_\_\_. Permit #: \_\_\_\_\_

Disapproved: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Code Enforcement Officer. Tel: 845.439.4399 x 305

ZBA Referral

Fee: \_\_\_\_\_ Application #: \_\_\_\_\_ Received by ZBA: \_\_\_\_\_

Hearing Date(s): \_\_\_\_\_ Notification Costs: \_\_\_\_\_ Paid: \_\_\_\_\_

Action Date: \_\_\_\_\_ Action: \_\_\_\_\_

Report Filed with Town Clerk: \_\_\_\_\_ Report Sent to Applicant: \_\_\_\_\_

