Applicant's Name_____ **Date:** _____

ZONING BOARD OF APPEALS APPLICATION CHECKLIST:

	Attached	N/A
1. Filing Fee, payable to the Town of Milan Variance or Administrative Review Fee: $150.00 Special Use Permit: $175 Residential $250 Commercial	_____ _____	_____ _____
2. Completed Short Environmental Assessment Form (or if required, a long Environmental Assessment Form)	_____	_____
3. 7 copies of a plot plan drawn to scale showing: _____ Lot dimensions (all sides) and the street(s) _____ Existing buildings and distances to boundary lines _____ Existing well and waste facility locations _____ Significant features: (i.e. steep slopes, rock outcroppings, wetlands, etc. _____ Proposed structure(s) with distances to boundary lines, well, waste facilities _____ All accessory structures with their square footages _____ North arrow _____ If deemed necessary, the ZBA may require a current, valid survey	_____	_____
4. A detailed plan of proposed structure drawn to scale (No larger than 11" x 17")	_____	_____
5. A copy of the decision or order of administrative official on which the appeal is based.**	_____	_____
6. A copy of the tax map with subject property highlighted **	_____	_____
7. Consent of property owner(s) if applicant is not owner. Must be notarized.	_____	_____
8. Photographs of the site showing existing buildings, screening, proximity to neighbors and road, area of proposal, etc.	_____	_____
9. Affidavit of Appellant. Must be notarized.	_____	_____

**Town Provides

The Zoning Board of Appeals reserves the right to request additional information from the applicant at any time during the application process.

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TOWN OF MILAN

ZONING BOARD OF APPEALS APPLICATION

Date Received:_____
Review by ZEO:_____
Application Complete:_____
To County Planning:_____
Public Hearing:_____

To Be Completed by Applicant:

Request for (Circle One): Area Variance Use Variance Interpretation Special Permit

Other:_____

Name of Applicant:_____

Complete Address:_____

Telephone #_____ Cell Phone #_____

E-Mail _____

Is the subject property in your name? Yes No

If no, property owners name/telephone number_____

Property owners complete address:_____

Complete Address of Property:_____

Grid Number: _____ Zoning District: _____

What is the size of the property:_____ acres

Are there currently structures on the property? Yes No
If yes, are there valid Certificates of Occupancy for those structures? Yes No
If yes, as: Commercial Residential Other:_____

Has the property been before the Zoning Board of Appeals before? Yes No
If yes, please provide name of applicant and date:_____

Is the property within 500 feet of a state or county road, state parkway, boundary of the Town of Milan? Yes No If yes, which one?_____

Premises affected are situated on the_____side of_____road or street.

Applicant's Name_____ Date:_____

AREA/USE VARIANCE

To be completed by the Applicant:

Variance Request: Cite the section of the zoning ordinance you are requesting a variance from:

Section: (i.e. Table B	Pertaining to: Side Setback/Shed	From: 50 feet	To: 25 feet)

Briefly explain the nature of the variance request, what you wish to accomplish, and why you need the variance:_____

It will be necessary for the Zoning Board of Appeals and/or Planning Board members, Town consultants, Town officials to visit the site in order to properly evaluate your application. Please call the Zoning Office at 758-5133, extension 21, if you do not agree with this. Kindly make it easy to find your property by identifying any landmarks, etc._____

Applicant's Name_____ Date:_____

SPECIAL PERMIT

To be completed by applicant:

Special Permit For:_____

Section of the Zoning Law:_____

Please describe proposal:_____
_____
_____
_____

Existing Use(s) of Property:
Residential, No. of Units: _____
Commercial, Type _____
Industrial, Type _____
Other: _____

Existing Structures on the Property:

Structure:	_____	_____	_____
Ground Floor Area:	_____	_____	_____
Total Floor Area:	_____	_____	_____
Number of Floors:	_____	_____	_____
Structure Height:	_____	_____	_____

Proposed Structures:

Structure:	_____	_____	_____
Ground Floor Area:	_____	_____	_____
Total Floor Area:	_____	_____	_____
Number of Floors:	_____	_____	_____
Structure Height:	_____	_____	_____

Demonstrate (show on the site plan) an adequate parking area, ingress and egress, accessibility for emergency personnel, adequacy of existing services (water and sewage), appropriate screening, and that the project will be in harmony with the neighborhood_____
_____
_____
_____

Applicant's Name: _____ Date: _____

REQUEST FOR INTERPRETATION

To be completed by the Applicant:

Interpretation Request: Cite the section of the zoning ordinance you are requesting an interpretation from:

Section: _____

Pertaining to: _____

Briefly explain the nature of the request for an interpretation and what you wish to accomplish:

_____

_____

_____

_____

_____

_____

_____

It will be necessary for the Zoning Board of Appeals and/or Planning Board members, Town Consultants, Town officials to visit the site in order to properly evaluate your application. Please call the Zoning Office at 845-758-5133, extension 121, if you do not agree with this. Kindly make it easy to find your property by identifying any landmarks, etc._____

_____

_____

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:

	NO	YES
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? 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 governmental Agency? 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, adjoining and near the proposed action.

☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other (specify): _____
☐ Parkland

	NO	YES	N/A
5. Is the proposed action,			
a. A permitted use under the zoning regulations?	☐	☐	☐
b. Consistent with the adopted comprehensive plan?	☐	☐	☐

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☐	☐
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	☐	☐
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	☐	☐
b. Are public transportation service(s) available at or near the site of the proposed action?	☐	☐
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	☐	☐
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: _____	☐	☐
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	☐	☐
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	☐	☐
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	☐	☐
b. Is the proposed action located in an archeological sensitive area?	☐	☐
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?	☐	☐
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: _____	☐	☐

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:
☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional
☐ Wetland ☐ Urban ☐ Suburban

	NO	YES
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?	☐	☐
16. Is the project site located in the 100 year flood plain?	☐	☐
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? ☐ NO ☐ YES	☐	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? ☐ NO ☐ YES If Yes, briefly describe: _____		

	NO	YES
18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	☐	☐
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: _____	☐	☐
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: _____	☐	☐

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: _____ Date: _____

Signature: _____

PRINT FORM

AFFIDAVIT OF APPELLANT

State of New York :
County of Dutchess : ss
Town of Milan :

I hereby depose and say that all of the above statements contained in the papers submitted herewith are true.

Appellant_____

Sworn to before me this:

_____day of_____

_____
Notary Public

TOWN OF MILAN

DUTCHESS COUNTY, NEW YORK

Wilcox Memorial Town Hall
20 Wilcox Circle
Milan, NY 12571

Tel. (845) 758-5133
www.milan-ny.gov
Fax. (845) 758-0445

CONSENT OF AUTHORIZATION TO ACT

Date:_____ Property Grid Number_____

Complete Property Address: _____
_____

Owner's Name: _____

Owners Mail Address (if different from property location): _____
_____

Owner's Phone Number: ( )_____

Designee Name: _____
Designee Address: _____
_____

Designee Phone Number: ( )_____

PURPOSE OF AUTHORIZATION:

I hereby authorize_____ (designee) to act on my behalf with regard to the above referenced property for the purpose stated above.

Signed:_____ Date:_____
(Property Owner)

State of New York)
County of Dutchess) ss
Town of Milan)
On this____day of_____, 20___, before me personally came_____, to me known, whose signature appears below.

_____
Notary Public

Table B
Schedule of Area and Bulk Regulations
[Amended 4-22-1996 by L.L. No. 1-1996;
8-9-1999 by L.L. No. 5-1999; 6-11-2003 by L.L. No. 1-2003]

	District							
	A5A	A3A	R2A Dwellings	R2A Nondwellings	HA	HB	LC	LI[2]
Minimum lot area (acres)	5	3	2	2[1]	1[1]	1[1]	1[1]	
Minimum lot width (feet)	400	300[1]	200[1]	200[1]	100[1]	200/ 240[3]	20 0	
Area per group of establishments (acres)						5		
Minimum lot width per group of businesses (feet)						400		
Minimum front yard[4] (feet)	85	85	75[5]	100[5]	20	80[6]	80[7]	
Minimum side yard (both) (feet)	50	35	30[8]	60[8]	0/20	60[8]	50[7]	
Minimum rear yard (feet)	50	35	25	50	25	50	50[7]	
Maximum lot coverage (percent)	5	10	7	7	50	10	5	
Maximum height (feet)[10]	35	35	35	35	35	35		
Parking setback (feet)						20[9]		
Floor area ratio						0.10		

NOTES:
[1] Except as elsewhere specified.
[2] See § 200-12 for bulk requirements.
[3] Except as elsewhere specified, minimum width for interior lots shall be 200 and 240 feet for corner lots as measured at the front building line.
[4] All front yard setbacks are from the front lot line or from the boundary of the road in the event that the premises description extends into the road.
[5] Except in the case of through lots where the front yard requirements of this district shall be observed on both streets.
[6] There shall be no encroachment of structures within the front yard other than a fence or wall not in excess of six feet in height or a sign not larger than 20 square feet.
[7] There shall be no encroachment of any automobile parking areas.
[8] There shall be two yards with a total width no smaller than the minimum stated. The width of the narrower of the two side yard shall be not less than 1/3 of the total minimum required width.
[9] No automobile parking space shall extend nearer than 20 feet to any property line.
[10] Minimum roof pitch shall be 7 in 12 (7:12).