All Paperwork must be received by application deadline to be on the ZBA Agenda. This includes, but is not limited to the following:

1. Completed and Signed Application by Property Owner or Letter of Authorization for Agent/Agency.
2. Type of Variance Form completed.
3. SEQR-Short Form Completed and Signed by Property Owner/Agent.
   (not attached to this application, download separately)
4. **Seven (9) Copies of Signed & Stamped survey map to scale** showing the Precise Setbacks (both current & with proposed variance request), Road Frontage, and/or Acreage of Area, so an Accurate Variance May be Granted.
5. Electronic copy of the files and drawings must be submitted to jdaley@pawling.org
6. Applicant must mail out Notice of Variance request to neighbors within 300’ of Property. (List of Names & Addresses will be supplied to you from the Zoning Department once you have submitted a complete application packet.)
   - Must be mailed out seven (7) days before hearing date.
   - Must contain name of applicant, location of the parcel of land, brief description or identification of the proposal.
   - Must specify date, time, and place of the public hearing.
   - Sent out via United States Postal Service Certified or Registered Mail
   - Must submit return receipt to the Town prior to meeting.

Prior to or at the time of the public hearing, the applicant shall provide to the Zoning Department or ZBA a copy of the required notice, a list of all the owners to whom such notice was mailed and either an affidavit that the mailing was completed as required herein or copies of all mailing receipts.
Zoning Board of Appeals Application

Appeal#________________

Fee Received: ________________

Applicant: _______________________________________________________________________________

Mailing Address: ____________________________________________

________________________________________________________________________________________

Phone Number(s): _________________________________________________________________________

Property Owner: _________________________________________________________________________

Property Street Address: __________________________________________________________________

Tax Map Grid/Parcel Number (SBL): 11-________________________________________________________________

Name & Addresses of Parcels within 300 feet: Attached (the Town will supply list after application
is submitted to the Zoning Department)

Zoning Ordinance (Local Law) Appealed: ___________________________________________________

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Type of Appeal: ( ) Area Variance ( ) Interpretation ( ) Use Variance
( ) Appeal decision of Code Enforcement Officer

A previous appeal (has) been made: Appeal: ______________ Date:____________
Appeal: ______________ Date:____________

Signature of Property Owner or Agent with Authorization Letter Date

AREA VARIANCE: APPEAL #____________

APPLICANT: __________________________________________

Please respond to the following 1-5: (use extra sheets if needed)

1) That the granting of the variance will not result in the undesirable change in character of the neighborhood or a detriment to nearby properties
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

2) The benefit sought cannot be achieved by some other feasible method.
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

3) Is the Variance substantial?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4) Will there be an adverse effect or impact on physical or environmental conditions in the neighborhood or district?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

5) Was this difficulty self-created?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
MINIMUM VARIANCE REQUIRED: ______________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

ZBA COMMENTS: _________________________________________________________________
_______________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________