

**TOWN OF ROCHESTER
Zoning Board of Appeals**

Area/Use Variance Appeal/Interpretation

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Please review the information in this packet and Chapter 140 of the Town of Rochester Code thoroughly.

Then complete the Area/Use Variance Application and the EAF as completely and accurately as is possible. Missing, incomplete, or incorrect information may delay the review of your application.

TOWN OF ROCHESTER
ZONING BOARD OF APPEALS

DIRECTIONS FOR APPEARING BEFORE THE ZBA

Please read carefully the following requirements and information set forth by the ZBA.

- 1.) Complete all blanks on the Application in this packet.
- 2.) Submit the completed Application along with a to-scale map of the property involved, showing buildings, structures (with dimensions) all setbacks to property lines.
- 3.) Any information you would like to tell the Board to help your case. The more information you supply the Board with the quicker the review process will be. This can include pictures.

The Applicant's first meeting with the Zoning Board of Appeals will be a Pre-App meeting. This means we will not take the fee from you beforehand. We want to give you a chance to speak to the Board and feel them out before you actually apply. This WILL NOT set you back another month, if you decide at the meeting you want to go forth with the application the Board can still set the application for Public Hearing or do any referrals as long as they deem the application as complete. This may save you time, energy and expense of filing an appeal.

During the Pre-App Meeting the Board will decide if you need to complete the SEQR Part 1 form that was included in your packet. You do not need to fill the form out before the first meeting.

Chapter 140 of the TOR Zoning Code: This book contains the land use regulations for the Town of Rochester, permitted and non-permitted uses, district density requirements, and setbacks; and the procedures for review and appeal. It is available for review at the Town Hall or the ZBA Office and can also be downloaded from the Town website: TownofRochester.NY.Gov

Any further questions please contact the Secretary via email or phone. 845-626-2434

TOWN OF ROCHESTER ZONING BOARD OF APPEALS
ULSTER COUNTY, NEW YORK

Application # _____
Date _____
Fee Paid \$ _____

VARIANCE APPLICATION

Type: Area _____ Use _____ Appeal _____ Interpretation _____

1. Property Owner: _____
Address: _____

Primary Phone () _____ Secondary Phone() _____
E-Mail Address _____

2. Applicant Name (if other than Owner): _____
Address: _____

Primary Phone () _____ Secondary Phone() _____
E-Mail Address _____

3. Site Location: Number and Name of Public/Private Road project is accessed
by _____
Tax Map Section: _____ Block _____ Lot _____
Town of Rochester Zoning District: _____ Acreage of Property +/- _____

4. Existing Use of Property: _____

5. Proposed Use of Property: _____

6. Reason(s) for Appeal (use separate sheet if necessary) (ONLY IF APPEALING CEO)

7. Explain informal Interpretation requested (ONLY IF REQUESTING INTERPRETATION)

8. **For Use Variance:** On a separate sheet of paper explain how the strict application of the Zoning Law would produce unnecessary hardship.
For Area Variance: On a separate sheet of paper explain how the strict application of the Zoning Law would produce practical difficulties to achieve a goal. (Must relate to property, not personal problems)

9. Explain how the hardship is unique to this property in this this district:

10. Explain how the Variance/Interpretation/Appeal would observe the spirit of the Town of Rochester Land Use and Control Law and would not change the character of the District.

11. Is the property located within or contiguous to a NY State Certified Agricultural District? _____

12. Does the property contain land located within a 100 year flood plain? _____

13. Does the property contain land within any Federal or NYS identified wetlands? _____

14. List any physical restrictions to the project such as waterways, flood plains, wetlands, steep slopes, rock outcroppings etc. *Locations of these must also be notated on the plan provided by the applicant.*

Applicant states that he/she is the owner or authorized agent of the owner for which the foregoing variance or appeal requested, and that he/she is duly authorized submit such application, and that all work will be performed in accordance with all applicable State, County, and Local Ordinances.

Sworn by me this _____ day of _____, 20__

Signature of Applicant/ Agent

If an agent is representing applicant, a signed letter by applicant authorizing named individual to act as his/her agent must accompany the application.

If the applicant is not the property owner, a signed letter by property owners authorizing the applicant to act as his/her agent must accompany the application.

NOTE: You must submit a to scale map of this site with the application. Map should show buildings, structures, setbacks from property lines, any proposed changes pertaining to this application and adjoining neighbors.

TOWN VILLAGE CITY OF _____
(circle one)

Application # _____

Agricultural Data Statement

Date _____

Instructions: This form must be completed for any application for a special use permit, site plan approval, use variance or a subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant

Owner if Different from Applicant

Name: _____ Address: _____ _____	Name: _____ Address: _____ _____
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1. Type of Application: Special Use Permit; Site Plan Approval; Use Variance;
(circle one or more) Subdivision Approval

2. Description of proposed project: _____

3. Location of project: Address: _____
Tax Map Number (TMP) _____

4. Is this parcel within an Agricultural District? NO YES (Check with your local assessor if
5. If YES, Agricultural District Number _____ you do not know)
6. Is this parcel actively farmed? NO YES
7. List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary.

Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES	Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES
Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES	Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES

Signature of Applicant

Signature of Owner (if other than applicant)

Reviewed by:

Signature of Municipal Official

Date

NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Department.

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? 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.			NO <input type="checkbox"/>	YES <input type="checkbox"/>
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:			NO <input type="checkbox"/>	YES <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, adjoining and near the proposed action.				
<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	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? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) 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 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	YES	
	<input type="checkbox"/>	<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	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
b. Is the proposed action located in an archeological sensitive area?	<input type="checkbox"/>	<input type="checkbox"/>	
	<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? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input type="checkbox"/>	<input type="checkbox"/>	
	<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	
	<input type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	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, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

<p>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)?</p> <p>If Yes, explain purpose and size:</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe:</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe:</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____</p>		