

APPLICATION TO THE SOUTHOLD TOWN BOARD OF APPEALS

For Office Use Only
Fee: \$ _____ Filed By: _____ Date Assigned/Assignment No. _____
Office Notes: _____

House No. _____ Street _____ Hamlet _____

SCTM 1000 Section _____ Block _____ Lot(s) _____ Lot Size _____ Zone _____

I (WE) APPEAL THE WRITTEN DETERMINATION OF THE BUILDING INSPECTOR DATED _____ BASED ON MAP DATED _____.

Applicant(s)/Owner(s): _____

Mailing Address: _____

Telephone: _____ Fax #: _____ Email: _____

NOTE: In addition to the above, please complete below if application is signed by applicant's attorney, agent, architect, builder, contract vendee, etc. and name of person who agent represents:

Name of Representative: _____ for () Owner, or () Other:

Agent's Address: _____

Telephone _____ Fax #: _____ Email: _____

Please check box to specify who you wish correspondence to be mailed to, from the above names:

- Applicant/Owner(s), or Authorized Representative, or Other Name/Address below:

WHEREBY THE BUILDING INSPECTOR REVIEWED MAP DATED _____ and DENIED AN APPLICATION DATED _____ FOR:

- Building Permit
Certificate of Occupancy Pre-Certificate of Occupancy
Change of Use
Permit for As-Built Construction

Other: _____

Provision of the Zoning Ordinance Appealed. (Indicate Article, Section, Subsection of Zoning Ordinance by numbers. Do not quote the code.)

Article _____ Section 280- _____ Subsection _____

Type of Appeal. An Appeal is made for:

- A Variance to the Zoning Code or Zoning Map.
A Variance due to lack of access required by New York Town Law-Section 280-A.
Interpretation of the Town Code, Article _____ Section _____
Reversal or Other _____

A prior appeal has, has not been made at any time with respect to this property, UNDER Appeal No. _____ Year _____. (Please be sure to research before completing this question or call our office for assistance.)

Name of Owner:

ZBA File # _____

REASONS FOR APPEAL *(additional sheets may be used with preparer's signature):*

AREA VARIANCE REASONS:

(1) An undesirable change will not be produced in the CHARACTER of the neighborhood or a detriment to nearby properties if granted, because:

(2) The benefit sought by the applicant CANNOT be achieved by some method feasible for the applicant to pursue, other than an area variance, because:

(3) The amount of relief requested is not substantial because:

(4) The variance will NOT have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district because:

(5) Has the alleged difficulty been self-created? ()Yes, or ()No.

Are there Covenants and Restrictions concerning this land: No. Yes *(please furnish copy).*

This is the MINIMUM that is necessary and adequate, and at the same time preserve and protect the character of the neighborhood and the health, safety, and welfare of the community.

Check this box () IF A USE VARIANCE IS BEING REQUESTED, AND PLEASE COMPLETE THE ATTACHED USE VARIANCE SHEET: (Please be sure to consult your attorney.)

Signature of Appellant or Authorized Agent
(Agent must submit written Authorization from Owner)

Sworn to before me this
day of _____, 20____.

Notary Public