

APPLICATION FOR A VARIANCE

Village of Monticello
2 Pleasant Street
Monticello, Now York 12701
845-794-6130

Property Location: Section: _____ Block: _____ Lot: _____

Property Street Address: _____

Zoning District Property Located: _____

Owners

Name: _____

Address : _____
Street/PO Box City State Zip

Phone : (_____) _____

Who will appear before the Zoning Board of Appeals and receive all notices?:

Check One Only Owner, Agent, Attorney, Engineer, Surveyor Other

Name: _____

Address: _____
Street/PO Box City State Zip

Phone (_____) _____

NATURE OF VARIANCE AREA VARIANCE USE VARIANCE
 AREA VARIANCE and USE VARIANCE

Village Code Section/s (§) applicable to property from which variance is sought:

Attach a plan of the subject premises drawn to scale showing the

1. Name of record owner(s) of premises and of all adjoining properties
2. Location of existing structures
3. Location of proposed structures
4. Location of all existing and proposed streets or highways other information pertinent to application

Reason/s for request:

1. The strict application of the provisions of the Zoning Law set forth above would result in practical difficulties or unnecessary hardship inconsistent with the general purposes and intent of the Village of Monticello Zoning Law because

2. The exceptional and/or extraordinary circumstances or conditions applying to the property involved, or to the intended use or development of the property that do not apply generally to other properties or uses in the same Zoning District or neighborhood are:

3. The granting of such variance will not be a substantial detriment to the public interest or to the property or improvements in such district in which the variance is sought and will not materially impair the purpose of the Village of Monticello Zoning Law because:

In compliance with the Village of Monticello Zoning Ordinance, after publication in the S. C. Democrat of a legal notice regarding a public hearing to be held by the Zoning Board for the above Application, the following is required by the applicant:

All property owners within 300 ft. of the above-described property must be notified by certified mail, return receipt requested, giving notification of said hearing, stating purpose, date, time and place. Proof of mailing must be submitted to the Chairman at the time of the hearing.

APPLICATION FEE: \$200.00

The undersigned hereby requests approval by the Zoning Board of the above identified application.

THE SIGNING OF THIS APPLICATION INDICATES YOUR KNOWLEDGE OF AND RESPONSIBILITY FOR PAYMENT OF ANY APPLICATION FEES AND ESCROW ACCOUNT FOR PROFESSIONAL SERVICES INCURRED BY THE ZONING BOARD IN REVIEW OF THIS APPLICATION, SUCH AS PLANNER, CONSULTANT, ENGINEER, LEGAL, PUBLIC HEARING, AND/OR SITE INSPECTIONS.

Signature of Applicant _____

STATE OF NEW YORK
COUNTY OF SULLIVAN

On the _____ day of _____, _____ before me came _____
to me known to be the individual(s) described in and who executed the foregoing application for a variance and acknowledged that (they) (he) executed the same.

Notary Public

FOR OFFICE USE ONLY:

DATE PAID: _____

AMOUNT PAID:\$ _____

CASH CHECK# _____

CLERK: _____