

APPLICATION TO BOARD OF APPEALS

TO THE ZONING BOARD OF APPEALS,-----

I (we) _____ of _____
(Name of Appellant) (Street and Number)

_____, _____ HEREBY APPEAL TO
(Municipality) (State)

THE ZONING BOARD OF APPEALS FROM THE DECISION OF THE BUILDING INSPECTOR ON APPLICATION FOR BUILDING PERMIT NO. _____, DATED _____, 20_____, WHEREBY THE BUILDNG INSPECTOR DID

GRANT

DENY TO _____
(Name of applicant for permit)

OF _____
(Street and Number) (Municipality) (State)

- A PERMIT FOR USE
- A PERMIT FOR OCCUPANCY
- A CERTIFICATE FOR CONTINUATION OF NON-CONFORMING USE

1. LOCATION OF THE PROPERTY _____
(Street and Number) (Use District on Zoning map)

2. PROVISION(S) OF THE ZONING ORDINANCE APPEALED, (Indicate the article, section, subsection and paragraph of the Zoning Ordinance being appealed, by number. Do not quote the Ordinance.)

3. TYPE OF APPEAL. Appeal is made herewith for:

- An interpretation of the Zoning Ordinance or Zoning Map
- A variance to the Zoning Ordinance

4. PREVIOUS APPEAL. A previous appeal has has not

been made with respect to this decision of the Building Inspector or with respect to the property. Such appeal(s) was(were) in the form of

- () a requested interpretation
- () a request for a variance

and was (were) made in

Appeal No. _____, dated 20____.

Appeal No. _____, dated 20____.

Appeal No. _____, dated 20____.

5. REASON FOR APPEAL. (Complete relevant blank. Use extra sheet if necessary.)

A. INTERPRETATION OF ZONING ORDINANCE IS REQUESTED because:

B. A VARIANCE TO THE ZONING ORDINANCE IS REQUESTED for these reasons:

1. STRICT APPLICATION of the Ordinance would produce UNDUE HARDSHIP because: _____

2. The hardship created is UNIQUE and is not shared by all properties alike in the immediate vicinity of this property and in this use district because: _____

3. The variance would observe the spirit of the ordinance and would NOT CHANGE THE CHARACTER OF THE DISTRICT because:

STATE OF NEW YORK)
COUNTY OF _____) ss

Sworn to this _____ day of _____, 20____

(Signature)

(Notary Public)

Applicant Telephone Number _____

Dutchess County Tax Grid Map Number _____

Application Fee: \$150.00