APPEAL TO THE ZONING BOARD OF APPEALS OF THE VILLAGE OF CALEDONIA

Having been denied a Permit to: at _____ Caledonia, New York as shown on the accompanying Application, plans and/or other supporting documents, for the stated reason that the issuance of such Permit would be in violation of Section (s) of the Caledonia Zoning Ordinance. The Undersigned respectfully submits this Appeal from such denial and, in support of the Appeal, affirms that strict observance of the Ordinance would impose PRACTICAL DIFFICULTIES and/or UNNECESSARY HARDSHIPS as follows: The undersigned affirms that this appeal is subject to the regulations of the Zoning Board of Appeals annexed hereto: Signed: Date: _____ , Received by: Filing Fee: \$

Date: _____

APPLICATION TO THE ZONING BOARD OF APPEALS OF THE VILLAGE OF CALEDONIA FOR A VARIANCE

Please submit the following information along with your completed appeals form to the Board of Appeals Clerk. This information should be submitted two calendar weeks prior to the scheduled hearing.

1) Name of the owner of the property and official address

2) What is the intended use and occupancy of the property?

3) A plot plan which is a drawing to scale of the property that clearly shows its size and location of the proposed buildings from all property lines, locations of adjacent buildings if any and the location of septic and parking areas.

4) Detailed drawings with scaled dimensions of proposed buildings which would include measurements (front, side and rear profiles)
Height (ground level to peak of roof)
front yard - set back
rear yard - set back
side yard - set back
side yard - set back
If on corner, set back from side street.

5) Completed short environment assessment form which is attached

Please be advised that the person making the appeal will be responsible for the cost of postage sent to everyone who lives or owns property within 500 feet along with the cost of advertising the public hearing.

APPEAL TO THE ZONING BOARD OF APPEALS OF THE VILLAGE OF CALEDONIA TO SEEK AN INTERPRETATION OF THE ZONING LAW

Please submit the following information along with your completed appeals form to the Board of Appeals Clerk. This information should be submitted two calendar weeks prior to the scheduled hearing.

1) Name of the owner of the property and official address

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2) Reason for the appeal

If the property is within 500 feet of the following, please fill out the attached form.

- The boundary of any city, village or town; or
- The boundary of any existing or proposed county or state park or any other recreation area; or
- The right-of-way of any existing or proposed county or state parkway, thruway, expressway, road or highway; or
- The existing or proposed right-of-way of any stream or drainage channel owned by the county for which the county has established channel lines; or
- The existing or proposed boundary of any county or state owned land on which a public building or institution is situated; or
- The boundary of a farm operation located in an agricultural district, as defined by article twenty five AA of the agriculture and markets law, except this subparagraph shall not apply to the granting of area variances.

617.20 Appendix C State Environmental Quality Review SHORT ENVIRONMENTAL ASSESSMENT FORM For UNLISTED ACTIONS Only

×.

APPLICANT/SPONSOR	2. PROJECT NAME
PROJECT LOCATION:	
Municipality	County
PRECISE LOCATION (Street address and road intersections, prominen	
PROPOSED ACTION IS:	ion
DESCRIBE PROJECT BRIEFLY:	
AMOUNT OF LAND AFFECTED: Initially acres Ultimately	acres
WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR O	THER EXISTING LAND USE RESTRICTIONS?
WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT?	Agriculture Park/Forest/Open Space Other
DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, N (FEDERAL, STATE OR LOCAL)?	OW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY
DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALI	
AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/	APPROVAL REQUIRE MODIFICATION?
I CERTIFY THAT THE INFORMATION PROVIDED / Applicant/sponsor name:	ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Date:
Signature:	



PART II - IMPACT ASSESSMENT (To be comp	eted by Lead Agency)		
A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6	NYCRR, PART 617.4? If yes,	coordinate the review process and use the FULL EAF.	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. Yes No			
C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS C1. Existing air quality, surface or groundwater quality or potential for erosion, drainage or flooding problems?	quantity, noise levels, existing traf		
C2. Aesthetic, agricultural, archaeological, historic, or oth	er natural or cultural resources; or	community or neighborhood character? Explain briefly:	
C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:			
C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:			
C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:			
C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:			
C7. Other impacts (including changes in use of either qua	ntity or type of energy)? Explain b	iefly:	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRO ENVIRONMENTAL AREA (CEA)?	DNMENTAL CHARACTERISTICS	HAT CAUSED THE ESTABLISHMENT OF A CRITICAL	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?			
PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency) INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA			
EAF and/or prepare a positive declaration.		pacts which MAY occur. Then proceed directly to the FULL	
Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action WIL NOT result in any significant adverse environmental impacts AND provide, on attachments as necessary, the reasons supporting this determination NOT result in any significant adverse environmental impacts AND provide, on attachments as necessary, the reasons supporting this determination			
Name of Lead Agency	<u></u>	Date	
Print or Type Name of Responsible Officer in Lead Ac	ency	Title of Responsible Officer	
Signature of Responsible Officer in Lead Agency	Signature o	Preparer (If different from responsible officer)	

