

VILLAGE OF SALTAIRE, NEW YORK
ZONING BOARD OF APPEALS APPLICATION

Date: _____

Applicant : _____ Phone #: _____ Email _____

Mailing Address: _____

Property Location: _____ email _____

Representative : _____ Phone #: _____

(If applicable, Name, Mailing Address, Email)

Date of Denial Letter: _____ Type of Variance: Use Area

Code Section(s) for which Variance Sought: _____

General Description of Variance(s) Sought: _____

Type of Construction: New _____ First Floor Expansion _____ Second Story Expansion _____
(Check all that apply)

Average Elevation of Property: _____ MSL(NAVD) Lot Size: _____ feet (Frontage) by _____ feet (Depth)

Setback of Structures from Property Line – Existing (Also Please Indicate North, South, East and West)

Front Yard: _____ Side Yard 1: _____ Side Yard 2: _____ Rear Yard: _____

Setback of Construction from Property Line - Proposed

Front Yard: _____ Side Yard 1: _____ Side Yard 2: _____ Rear Yard: _____

Lot Coverage- Existing

Enclosed Space: _____ % Total Coverage: _____ % (Excluding Bike Rack, Garbage & Access Walk)

Lot Coverage- Proposed

Enclosed Space: _____ % Total Coverage: _____ % (Excluding Bike Rack, Garbage & Access Walk)

Height of Finished 1st Floor above Mean Sea Level (NAVD)

Required FEMA BFE: _____ Existing: _____ Proposed: _____

Height of Peak of Roof above Average Grade

Existing: _____ Proposed: _____

Distance from Finished 1st Floor to Peak of Roof

Existing: _____ Proposed: _____

Required Submittals With Application

- \$1,000.00 Application Fee Made Out to the Village of Saltaire
 - \$2,000.00 Escrow Deposit Made Out to the Village of Saltaire to Cover any Zoning Board Professional Fees
- (This amount does not reflect an estimate of the amount of fees required to cover professional services. An accounting will be presented and any unused portion will be returned; any professional fees required in excess of Deposit must be paid by Applicant upon notice and prior to a decision being rendered.)
- PDF Copy of the Building Permit Application (Incl. Plans, Surveys, Renderings, Area & Aerial Photos).
 - Denial Letter of the Building Inspector along with Photos of Existing Conditions from Multiple Angles.
 - Narrative Statement of the Principal Facts and Circumstances Setting Forth the Grounds of the Appeal, Specifically Addressing Each of the Findings Required for a Variance.
 - Short Environmental Assessment Form (EAF) – Attached hereto.

Required Submittals 10 Days Prior To Hearing Date

- Affidavit of Publication of Public Notice
- List of Names/Addresses Emailed, Which Shall Include Property Owners within 200 Foot Radius Plus Other Registered Owners and Fire Island National Seashore Superintendent.

By signing this application, the Applicant and its Representative, if any, affirm that they have read, understood, and will abide by the regulations provided herein, the written instruction of the Chairman of the Zoning Board of Appeals, and those of Chapter 55 of the Code of the Village of Saltaire; and that they fully understand and agree that the Applicant will be responsible for any professional fees, including but not limited to legal, architectural and environmental, that, in the sole discretion of the Chairman of the Zoning Board of Appeals, are required to adequately consider the application, pursuant to Chapter 43 of the Code of the Village of Saltaire.

(Signature) _____
(Applicant)

(Signature) _____
(Representative)

TO BE FILLED OUT BY BUILDING INSPECTOR

Has a previous Variance been granted for this property: No Yes and Date(s) _____

Check All Variance Issues that Apply Setbacks Lot Coverage Height Alteration of Non-Conforming Structure FEMA Requirements CEHA Requirements Fences Pools Use Other

Does Building Contain a Non-Conforming Use: No Yes & Describe: _____

Variance Number: _____ Application Fee Amount: _____ Check Number: _____
Date: _____ ZBA Escrow Amount: _____ Check Number: _____

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 government 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, are adjoining or 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, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<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? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<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"/>	
	<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 project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO	YES	
	<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? 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: _____ _____ _____	NO	YES	
	<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 Agricultural/grasslands Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban 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 plan?	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? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
49. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		