



# Plattsburgh, New York

Building & Zoning Dept.  
41 City Hall Place  
Plattsburgh, NY 12901  
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## PROCEDURE IN APPEALING THE ZONING ORDINANCE SPECIAL USE PERMIT

DEADLINE FOR FILING APPLICATION \_\_\_\_\_

ZONING BOARD MEETING DATE \_\_\_\_\_

The Zoning Board of Appeals has been empowered to hear and decide all appeals to the Zoning Ordinance and to do so the Board holds public meetings once a month.

The attached appeal application must be completely filled out and returned to the office for action by the Zoning Board of Appeals at their monthly meeting. The filing fee for said application is as follows:

One and Two-family dwellings -	\$100.00
Multiple Dwellings	\$150.00
Commercial Properties	\$150.00

All checks should be made payable to the "City Clerk". In order for your appeal to be heard in the same month you apply, the appeal form and fee must be received by this office three weeks prior to the scheduled meeting of the Zoning Board of Appeals. All applicants or their representatives should attend the Zoning Board of Appeals Public Meeting of their appeal to answer any questions the Board may have regarding their request.

In filling out the form, please be specific and supply the Zoning Board of Appeals with all the necessary information requested on the form. If you are requesting a Variance from the Ordinance, you must detail why the literal enforcement of the ordinance will produce an undue hardship, while the variance requested will adhere to property is no proof of hardship within the purpose of zoning. In addition to the above, an applicant must submit adequate drawings and a site plan of all requests which will involve any construction, alterations, or physical change of their property. Twelve (12) copies of drawings and site plans are required (we recommend the plans be approved before the twelve (12) copies are made).

Before the Zoning Board of Appeals may hear and decide your appeal, this office must first:

1. Publish the request in three successive issues of the Press-Republican newspaper not less than five nor more than ten days before the hearings.
2. Notify, by letter, all property owners within 500 feet of the appeal property location of your request.

*This office is responsible for implementing the above requirements.*

If there are any questions, please feel free to contact this office.

Thank you for your cooperation.



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Zoning Board of Appeals  
City Hall  
Plattsburgh, New York 12901  
518-563-7707

USE  
CLASS A VARIANCE

AREA  
CLASS B VARIANCE

SUP  
SPECIAL USE PERMIT

Date: \_\_\_\_\_

Appeal No.: \_\_\_\_\_

An application is hereby made to the Zoning Board of Appeals pursuant to the City of Plattsburgh Zoning Ordinance for a variance to allow the property use as herein described.

Applicant: \_\_\_\_\_

Applicants Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Parcel Identification: \_\_\_\_\_

Location of request: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Request Description: \_\_\_\_\_  
\_\_\_\_\_

Zoning District: \_\_\_\_\_

Section Appealed: \_\_\_\_\_

Previous Appeal: No. \_\_\_\_\_ Date: \_\_\_\_\_

Identify applicants the right to apply for variance:

Ownership: \_\_\_\_\_ Long term lease: \_\_\_\_\_ Contract to purchase: \_\_\_\_\_

Other (Please explain): \_\_\_\_\_

Applications for zoning variances must be accompanied by:

11 copies of existing and proposed site plan.

11 copies of existing and proposed floor plan

The ZBA may impose reasonable conditions and restrictions on the grant of area and use variances provided they are directly related to and incidental to the proposed use of the property. Such conditions shall be consistent with the spirit and intent of the zoning law, and shall be imposed for the purpose of minimizing any adverse impact such variance may have on the neighborhood or community.

\_\_\_\_\_  
OWNER/APPLICANT

\_\_\_\_\_  
NOTARY PUBLIC

# ZONING BOARD OF APPEALS

CITY HALL

PLATTSBURGH, NEW YORK 12901

TO: All Applicants for Zoning Variance or Special Use Permit

SUBJECT: Required information for filing application

The Zoning Ordinance stipulates that the Building Inspector determine that all submittals for a Variance or Special Use Permit have adequate information (in form and content - Section 270-54A) for review by the Zoning Board of Appeals. In order to insure such information is consistently provided with each application the following information shall be required with each application:

1. **Existing Site Plan** - showing to scale the property lines, principal buildings, accessory structures, rights-of-ways as may exist and other improvements (city street and facilities abutting the site, driveways, parking areas, drainage structures, fence, etc.). Where the application is a request for the reduction of any yard setback the existing site plan shall be a survey of the property as prepared by a Licensed Land Surveyor and shall show the location of buildings on the abutting property where the yard reduction is proposed.
2. **Proposed Site Plan** - showing clearly to scale what is proposed to be constructed (and removed) under this application. The proposed improvement (s) shall be shaded, colored or contrasted in an acceptable manner to make them easily discernible. Adequately dimension the proposed improvements and indicate the setbacks as applicable.
3. **Area and Bulk Calculations** - Calculations of the lot area, lot dimensions, building area (existing/proposed), lot coverage, open space, all yard setbacks, dwelling unit density, building(s) height, parking required shall be submitted in tabulated form to show existing, proposed and required.
4. **Building Plans** - Submit schematic building plans to scale showing the existing/proposed building layout and identify clearly the existing/proposed use of all building spaces. Include elevation view(s) of proposed construction as applicable.
5. **Area Location Map** - showing all properties on each side of the street and noting the existing occupancy for each such lot on all four sides of the site. A copy of the tax map of the area marked to show the occupancy shall be sufficient for this information.

No application will be accepted after this date unless it contains all of the above information (11 sets). No application will be accepted for the agenda until all such appropriate information has first been filed with this office for a review and determination of zoning compliance/noncompliance (and such a determination has been issued to the applicant in writing).

# ZONING BOARD OF APPEALS

CITY HALL

PLATTSBURGH, NEW YORK 12901

## STANDARDS OF PROOF- SPECIAL PERMIT

The burden of proof for a Special Permit is always on the applicant. In order for an applicant to be entitled to a Special Permit, he must satisfy the following criteria:

1. That the proposed use will not, in the circumstances of the particular case and under any conditions that the Board of Appeals considers to be necessary or desirable, be injurious to the neighborhood or otherwise detrimental to the public welfare. (Applicant should specify any conditions which he can satisfy in order to establish this criterion.) The Zoning Board of Appeals should be prepared to discuss at the hearing any pertinent conditions.

2. That the proposed site plan shows the location of all buildings, parking areas, traffic access and circulation drives, open spaces, landscaping. (Failure to adhere to the site plan precisely as presented or as otherwise modified by order of the Planning Board or ZBA will constitute a violation of the Zoning Ordinance.)

3. That there is no violation of the Zoning Ordinance on the subject premises at the present time.

4. That the:

- a. Location and size of the proposed use
- b. nature and intensity of the operation involved
- c. size of the site in relation to the proposed use
- d. location of the site with respect to existing streets
- e. location of the site with relation to future streets

are all in harmony with the orderly development of the district.

5. That the location, nature and height of

- a. buildings
- b. walls
- c. fences

will not discourage the appropriate development and use of the adjacent lands or buildings or impair the value thereof.

6. That the operations in connection with such proposed use will not be more objectionable to nearby properties by reason of

- a. noise
- b. fumes
- c. vibration
- d. flashing lights

than would be the operations of any specifically permitted use in that zoning district (except in case of S-1 District).

If the applicant proves his compliance with each standard, he is entitled to the Special Use Permit. Conversely, if the applicant fails to address or satisfy any one or part of these standards, he is not entitled to the Special Permit.

# PART 1—PROJECT INFORMATION

## Prepared by Project Sponsor

NOTICE: This document is designed to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form, Parts A through E. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Provide any additional information you believe will be needed to complete Parts 2 and 3.

It is expected that completion of the full EAF will be dependent on information currently available and will not involve new studies, research or investigation. If information requiring such additional work is unavailable, so indicate and specify each instance.

NAME OF ACTION		
LOCATION OF ACTION (Include Street Address, Municipality and County)		
NAME OF APPLICANT/SPONSOR		BUSINESS TELEPHONE (    )
ADDRESS		
CITY/PO		STATE    ZIP CODE
NAME OF OWNER (If different)		BUSINESS TELEPHONE (    )
ADDRESS		
CITY/PO		STATE    ZIP CODE
DESCRIPTION OF ACTION		

**Please Complete Each Question—Indicate N.A. if not applicable**

### A. Site Description

Physical setting of overall project, both developed and undeveloped areas.

1. Present land use:     Urban     Industrial     Commercial     Residential (suburban)     Rural (non-farm)  
                                   Forest     Agriculture     Other \_\_\_\_\_

2. Total acreage of project area: \_\_\_\_\_ acres.

APPROXIMATE ACREAGE	PRESENTLY	AFTER COMPLETION
Meadow or Brushland (Non-agricultural)	_____ acres	_____ acres
Forested	_____ acres	_____ acres
Agricultural (Includes orchards, cropland, pasture, etc.)	_____ acres	_____ acres
Wetland (Freshwater or tidal as per Articles 24, 25 of ECL)	_____ acres	_____ acres
Water Surface Area	_____ acres	_____ acres
Unvegetated (Rock, earth or fill)	_____ acres	_____ acres
Roads, buildings and other paved surfaces	_____ acres	_____ acres
Other (Indicate type) _____	_____ acres	_____ acres

3. What is predominant soil type(s) on project site? \_\_\_\_\_
- a. Soil drainage:     Well drained \_\_\_\_\_ % of site     Moderately well drained \_\_\_\_\_ % of site  
                                   Poorly drained \_\_\_\_\_ % of site
- b. If any agricultural land is involved, how many acres of soil are classified within soil group 1 through 4 of the NYS Land Classification System? \_\_\_\_\_ acres. (See 1 NYCRR 370).
4. Are there bedrock outcroppings on project site?     Yes     No
- a. What is depth to bedrock? \_\_\_\_\_ (in feet)

5. Approximate percentage of proposed project site with slopes:  0-10% \_\_\_\_\_ %  10-15% \_\_\_\_\_ %  
 15% or greater \_\_\_\_\_ %
6. Is project substantially contiguous to, or contain a building, site, or district, listed on the State or the National Registers of Historic Places?  Yes  No
7. Is project substantially contiguous to a site listed on the Register of National Natural Landmarks?  Yes  No
8. What is the depth of the water table? \_\_\_\_\_ (in feet)
9. Is site located over a primary, principal, or sole source aquifer?  Yes  No
10. Do hunting, fishing or shell fishing opportunities presently exist in the project area?  Yes  No
11. Does project site contain any species of plant or animal life that is identified as threatened or endangered?  
 Yes  No According to \_\_\_\_\_  
 Identify each species \_\_\_\_\_
12. Are there any unique or unusual land forms on the project site? (i.e., cliffs, dunes, other geological formations)  
 Yes  No Describe \_\_\_\_\_
13. Is the project site presently used by the community or neighborhood as an open space or recreation area?  
 Yes  No If yes, explain \_\_\_\_\_
14. Does the present site include scenic views known to be important to the community?  
 Yes  No
15. Streams within or contiguous to project area: \_\_\_\_\_  
 a. Name of Stream and name of River to which it is tributary \_\_\_\_\_
16. Lakes, ponds, wetland areas within or contiguous to project area:  
 a. Name \_\_\_\_\_ b. Size (In acres) \_\_\_\_\_
17. Is the site served by existing public utilities?  Yes  No  
 a) If Yes, does sufficient capacity exist to allow connection?  Yes  No  
 b) If Yes, will improvements be necessary to allow connection?  Yes  No
18. Is the site located in an agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304?  Yes  No
19. Is the site located in or substantially contiguous to a Critical Environmental Area designated pursuant to Article 8 of the ECL, and 6 NYCRR 617?  Yes  No
20. Has the site ever been used for the disposal of solid or hazardous wastes?  Yes  No

## B. Project Description

1. Physical dimensions and scale of project (fill in dimensions as appropriate)
- a. Total contiguous acreage owned or controlled by project sponsor \_\_\_\_\_ acres.
- b. Project acreage to be developed: \_\_\_\_\_ acres initially; \_\_\_\_\_ acres ultimately.
- c. Project acreage to remain undeveloped \_\_\_\_\_ acres.
- d. Length of project, in miles: \_\_\_\_\_ (If appropriate)
- e. If the project is an expansion, indicate percent of expansion proposed \_\_\_\_\_ %;
- f. Number of off-street parking spaces existing \_\_\_\_\_; proposed \_\_\_\_\_.
- g. Maximum vehicular trips generated per hour \_\_\_\_\_ (upon completion of project)?
- h. If residential: Number and type of housing units:
- |            | One Family | Two Family | Multiple Family | Condominium |
|------------|------------|------------|-----------------|-------------|
| Initially  | _____      | _____      | _____           | _____       |
| Ultimately | _____      | _____      | _____           | _____       |
- i. Dimensions (in feet) of largest proposed structure \_\_\_\_\_ height; \_\_\_\_\_ width; \_\_\_\_\_ length.
- j. Linear feet of frontage along a public thoroughfare project will occupy is? \_\_\_\_\_ ft.

2. How much natural material (i.e., rock, earth, etc.) will be removed from the site? \_\_\_\_\_ tons/cubic yards
3. Will disturbed areas be reclaimed?  Yes  No  N/A
  - a. If yes, for what intended purpose is the site being reclaimed? \_\_\_\_\_
  - b. Will topsoil be stockpiled for reclamation?  Yes  No
  - c. Will upper subsoil be stockpiled for reclamation?  Yes  No
4. How many acres of vegetation (trees, shrubs, ground covers) will be removed from site? \_\_\_\_\_ acres.
5. Will any mature forest (over 100 years old) or other locally-important vegetation be removed by this project?  Yes  No
6. If single phase project: Anticipated period of construction \_\_\_\_\_ months, (including demolition).
7. If multi-phased:
  - a. Total number of phases anticipated \_\_\_\_\_ (number).
  - b. Anticipated date of commencement phase 1 \_\_\_\_\_ month \_\_\_\_\_ year, (including demolition).
  - c. Approximate completion date of final phase \_\_\_\_\_ month \_\_\_\_\_ year.
  - d. Is phase 1 functionally dependent on subsequent phases?  Yes  No
8. Will blasting occur during construction?  Yes  No
9. Number of jobs generated: during construction \_\_\_\_\_; after project is complete \_\_\_\_\_.
10. Number of jobs eliminated by this project \_\_\_\_\_.
11. Will project require relocation of any projects or facilities?  Yes  No If yes, explain \_\_\_\_\_
12. Is surface liquid waste disposal involved?  Yes  No
  - a. If yes, indicate type of waste (sewage, industrial, etc.) and amount \_\_\_\_\_
  - b. Name of water body into which effluent will be discharged \_\_\_\_\_
13. Is subsurface liquid waste disposal involved?  Yes  No Type \_\_\_\_\_
14. Will surface area of an existing water body increase or decrease by proposal?  Yes  No  
Explain \_\_\_\_\_
15. Is project or any portion of project located in a 100 year flood plain?  Yes  No
16. Will the project generate solid waste?  Yes  No
  - a. If yes, what is the amount per month \_\_\_\_\_ tons
  - b. If yes, will an existing solid waste facility be used?  Yes  No
  - c. If yes, give name \_\_\_\_\_; location \_\_\_\_\_
  - d. Will any wastes **not** go into a sewage disposal system or into a sanitary landfill?  Yes  No
  - e. If Yes, explain \_\_\_\_\_
17. Will the project involve the disposal of solid waste?  Yes  No
  - a. If yes, what is the anticipated rate of disposal? \_\_\_\_\_ tons/month.
  - b. If yes, what is the anticipated site life? \_\_\_\_\_ years.
18. Will project use herbicides or pesticides?  Yes  No
19. Will project routinely produce odors (more than one hour per day)?  Yes  No
20. Will project produce operating noise exceeding the local ambient noise levels?  Yes  No
21. Will project result in an increase in energy use?  Yes  No  
If yes, indicate type(s) \_\_\_\_\_
22. If water supply is from wells, indicate pumping capacity \_\_\_\_\_ gallons/minute.
23. Total anticipated water usage per day \_\_\_\_\_ gallons/day.
24. Does project involve Local, State or Federal funding?  Yes  No  
If Yes, explain \_\_\_\_\_

**25. Approvals Required:**

		Type	Submittal Date
City, Town, Village Board	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
City, Town, Village Planning Board	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
City, Town Zoning Board	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
City, County Health Department	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other Local Agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other Regional Agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
State Agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Federal Agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

**C. Zoning and Planning Information**

- Does proposed action involve a planning or zoning decision? Yes No  
If Yes, indicate decision required:  
zoning amendment zoning variance special use permit subdivision site plan  
new/revision of master plan resource management plan other \_\_\_\_\_
- What is the zoning classification(s) of the site? \_\_\_\_\_
- What is the maximum potential development of the site if developed as permitted by the present zoning?  
\_\_\_\_\_
- What is the proposed zoning of the site? \_\_\_\_\_
- What is the maximum potential development of the site if developed as permitted by the proposed zoning?  
\_\_\_\_\_
- Is the proposed action consistent with the recommended uses in adopted local land use plans? Yes No
- What are the predominant land use(s) and zoning classifications within a ¼ mile radius of proposed action?  
\_\_\_\_\_
- Is the proposed action compatible with adjoining/surrounding land uses within a ¼ mile? Yes No
- If the proposed action is the subdivision of land, how many lots are proposed? \_\_\_\_\_
  - What is the minimum lot size proposed? \_\_\_\_\_
- Will proposed action require any authorization(s) for the formation of sewer or water districts? Yes No
- Will the proposed action create a demand for any community provided services (recreation, education, police, fire protection)? Yes No
  - If yes, is existing capacity sufficient to handle projected demand? Yes No
- Will the proposed action result in the generation of traffic significantly above present levels? Yes No
  - If yes, is the existing road network adequate to handle the additional traffic? Yes No

**D. Informational Details**

Attach any additional information as may be needed to clarify your project. If there are or may be any adverse impacts associated with your proposal, please discuss such impacts and the measures which you propose to mitigate or avoid them.

**E. Verification**

I certify that the information provided above is true to the best of my knowledge.

Applicant/Sponsor Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment.**