

# APPLICATION TO THE ZONING BOARD OF APPEALS

## Incorporated Village of Shoreham

80 Woodville Rd. Box 389, Shoreham NY 11786

631-821-0680

[www.shorehamvillage.org](http://www.shorehamvillage.org)

**The Zoning Board of Appeals is granted authority pursuant to NY State Law and Local Law.**

Attached please find the Village of Shoreham's Zoning Board of Appeals (ZBA) Application. This application is available on the Village website. The application, along with this brief overview in summary, is self-explanatory. Please print the application, answer all relevant questions, sign, notarize and submit with the required documents and filing fee. Applications may be mailed or hand delivered.

**PLEASE NOTE: Incomplete applications will not be processed.**

### **Frequently Asked Questions:**

**Do I need an attorney?** A hearing before the Zoning Board of Appeals involves matters of fact and law. You may retain an attorney or an expeditor to act as your agent. (See page 6 of the application)

**What is a variance?** A variance is a form of relief, granted by a zoning board of appeals, to an applicant from a determination made by a village official or entity, that is consistent with the strict application of a regulation, pursuant to local law.

**What is the subject matter for a ZBA application?** Subject matter for application to the zoning board of appeals is listed on page 2 of the application. Please check the applicable box(s).

For the most part, when a building permit application is denied based upon a regulation in zoning law or other applicable law, or when the Building Department issues a Stop Work Order or a Notice of Violation and Order to Remove a structure that does not necessarily require a building permit, however it's presence violates a regulation in zoning law, or when a building permit application is denied based upon a decision of the Design Review Board; these are examples of how applications to the ZBA may originate.

**What is a "Use" variance?** A use variance is the authorization by the zoning board of appeals for the use of land for a purpose which is otherwise not allowed or is prohibited by the zoning regulations.

**What is an "Area" variance?** An area variance is the authorization by the zoning board of appeals for the use of land in a manner which is not allowed by the dimensional or physical requirements of the zoning regulations.

**What is Environmental Assessment Form (EAF)?** Pursuant to Federal and State law certain applications for a variance require that environmental considerations be assessed as part of the appeal process. **PLEASE NOTE: An "Area" variance does NOT require submission of an Environmental Assessment Form (EAF), nor does an appeal from a Design Review Board determination.**

**What documents are required to be submitted with the application?** At minimum, pages 1 thru 5 of the application must be submitted. The required documents (in the quantities listed) that must be submitted with the application are found on pages 4 & 5 of the application.

**What is the filing fee for my application?** The filing fee for a Zoning Board of Appeals application is determined by the Board of Trustees and is presently \$750.00 made payable to the Village of Shoreham.

**Zoning Board of Appeals Application  
Village of Shoreham,  
80 Woodville Road  
Shoreham, New York 11786**

*Phone: 631-821-0680 Fax: 631-821-4102 Email: Akessel@shorehamvillage.org*

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

**PART I: OWNER INFO** - Please type or Print below

Property Location: \_\_\_\_\_

Owner(s) of Record [Full Name]: \_\_\_\_\_

Home Phone: (    ) \_\_\_\_\_ Work: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address of Owner(s): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

**PART II: AGENT INFO** - if applicable

Agent Name: \_\_\_\_\_

Work: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address of Agent: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

**PART III: ATTORNEY INFO**

Attorney for Applicant: \_\_\_\_\_

Work: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address of Attorney: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

**PART IV: APPLICATION DETAILS**

Note: If this application is being made by someone other than the owner, the owner must sign the owner's authorization attached to this document.

I(We) \_\_\_\_\_

Being the (circle one) Owner(s), agent or attorney for the Owner of premises located at:

Property Location: \_\_\_\_\_

Suffolk County Tax Map Number: District 207, Section \_\_\_\_\_, Block \_\_\_\_\_, Lot \_\_\_\_\_

Apply for: (check one or more) Zoning District: \_\_\_\_\_

- Area variance
- Coastal Erosion Variance
- Variance of the Sign Ordinance
- Interpretation of the Zoning Ordinance
- Appeal from a Determination of the Design Review Board
- Use variance
- FEMA variance
- Special Use Permit

The applicable provisions of the Zoning Ordinance from which relief is sought are:

Article: \_\_\_\_\_, Section: \_\_\_\_\_, Subsection: \_\_\_\_\_

Article: \_\_\_\_\_, Section: \_\_\_\_\_, Subsection: \_\_\_\_\_

Article: \_\_\_\_\_, Section: \_\_\_\_\_, Subsection: \_\_\_\_\_

Has a prior variance, special use permit or interpretation ever been applied for on this property?

[Yes\_\_\_\_] [No\_\_\_\_]

If yes, give the date \_\_\_\_\_, and **ATTACH** a copy of the prior Zoning Board of Appeals decision.

State in factual terms the exact manner in which applicant seeks relief from the Zoning Board of Appeals:

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Describe any circumstances supporting this application:

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**GENERAL MUNICIPAL LAW SECTION 809 CERTIFICATION**

\_\_\_\_\_ states as follows:

(1) I am interested in an application now pending before the Shoreham Village Zoning Board of Appeals.

(2) I reside at: \_\_\_\_\_

(3) The nature of my interest in the aforesaid application is as follows:

\_\_\_\_\_

(4) If applicant or owner is a corporation, list officers:

President: \_\_\_\_\_

Vice President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Treasurer: \_\_\_\_\_

(5) Do any of the following individuals have an interest, as defined below, in the owner of applicant:

(A) Any New York State officer, or

(B) Any officer or employee of Shoreham, Brookhaven Town or Suffolk County.

For the purpose of this disclosure, an officer or employee shall be deemed to have an interest in the owner or applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:

(A) Is the applicant or owner, or

(B) Is an officer, director, partner, or employee of the applicant or owner, or

(C) Legally or beneficially owns or controls stock of a corporate applicant or owner, or

(D) Is a party to an agreement with such an applicant or owner, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered dependent or contingent upon the favorable approval of such application.

**A person who knowingly and intentionally fails to make such disclosure shall be guilty of a misdemeanor as provided for in General Municipal Law, Section 809.**

[Yes\_\_\_\_] [No\_\_\_\_]

If "yes" state the name, address, nature and extent of the interest of such individual.

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(Name) (Address)

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(Extent of interest)

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**APPLICATION CHECK LIST**

This application is submitted as follows: **(Initial each, as applicable):**

- (1) After denial of a Building Permit application, one (1) copy of the denial must be annexed): ( )
- (2) After denial of a Design Review Board approval, one (1) copy of the denial must be annexed): ( )
- (3) Ten (10) copies, inclusive of two originals of this application: ( )
- (4) This application and any other documents requiring notarization must be properly notarized: ( )
- (5) With ten (10) accurate original surveys prepared by a NY State Licensed Surveyor dated within the past twelve (12)months. Surveys must include calculation of lot coverage. Surveys must show, penciled in if proposed, or so noted if existing, the size and location of any structure for which a variance is sought: ( )
- (6) With one (1) original and nine (9) copies of a completed and executed Environmental Assessment form,(EAF) if required:\* ( )
- (7) With ten (10) copies of every certificate of occupancy and certificate of compliance issued for this property: ( )
- (8) With a certified abstract of single and separate ownership (for area dimensional variances on undersized lots): ( )
- (9) With NY State Dept. of Environmental Conservation determination or a non jurisdiction statement/letter (if within 300 feet of tidal waters): ( )
- (10) With a written owner authorization signed by the owner if applicant is an agent for the owner,(attached): ( )
- (11) The Applicant affirms that he/she will notify all property owners within a two hundred (200) foot radius

by Certified Mail, return-receipt-requested. Notice must be at least ten (10) days prior to the scheduled hearing date. Original receipts of the certified mailings must be submitted to the Zoning Board Secretary five(s) days prior to the hearing date and the signed return receipt cards must be submitted to the Zoning Board Secretary at or prior to the hearing date:

( )

(12) With the appropriate filing fee payable to the Village of Shoreham:

( )

(12) With a copy of recorded deed if it is a new purchase:

( )

**\*(EAF) IF YOUR APPLICATION REQUESTS AN "AREA" VARIANCE, SEQRA §§ 617.5(c)(12) and (13) states that "granting of individual setback and lot-line variances" and "granting of an area variance(s) for a single family, two-family or three-family residence" are Type II Actions. Accordingly, as a Type II Action no environmental review is necessary and therefore no Environmental Assessment Form (EAF) is necessary for area variances under 6 NYCRR 617.5(c)(12) and (13).**

**\*(EAF) If your application arises from a decision of the Design Review Board, as well, NO EAF is required to be filed with this application.**

**NOTE: Any application not filled in properly or submitted without the necessary documents will not be processed until completed. The Zoning Board of Appeals reserves the right to request additional documentation and drawings, and to condition relief upon the filing of covenants and restrictions with the Suffolk County Clerk.**

\_\_\_\_\_

Signature of owner, agent or attorney

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Notary Public



**ENVIRONMENTAL ASSESSMENT FORM (EAF)**

Part 1 (To be completed by the Applicant, when applicable)

**NOTE: IF YOUR APPLICATION INVOLVES AN AREA VARIANCE BE ADVISED THAT - SEQRA §§ 617.5(c)(12) and (13) states that "granting of individual setback and lot line variances" and "granting of an area variance(s) for a single family, two-family or three-family residence" are Type II Actions. Accordingly, as a Type II Action no environmental review is necessary and therefore no EAF is necessary for area variances under 6 NYCRR 617.5(c)(12) and (13).**

This application is to be accompanied by a survey showing location of project or action, including elevations if necessary).

The purpose of this Environmental Assessment Form is to provide information which will assist the Village in determining whether the action you propose may have a significant impact or effect on the environment. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Please complete the entire form leaving no blanks. If a question does not apply, please indicate so.

This is a standardized form widely used by agencies of government in an effort to comply with the State Environmental Quality Review Act and to protect the environment by a close review of a proposed action. Different parts, accordingly, will be of lesser or greater significance depending on actual facts as presented by applicant.

NOTE: If sufficient space does not exist to give appropriate answers to any question(s) on this form please attach sheet giving such answers properly referenced to question number and page number.

VILLAGE REVIEWING AGENCY

Project Name: \_\_\_\_\_ Site Plan: \_\_\_\_\_  
Street: \_\_\_\_\_ Subdivision Waiver: \_\_\_\_\_  
Zoning District: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
County Tax Map Parcel No.: \_\_\_\_\_ Special Permit: \_\_\_\_\_  
Map, Block, Lot: \_\_\_\_\_ Zoning Board: \_\_\_\_\_

OWNER

Name: \_\_\_\_\_  
Full Address: \_\_\_\_\_  
P.O. and Zip Code: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

ATTORNEY OR AGENT

Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

P.O. and Zip Code: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

SURVEYOR/ENGINEER

Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

P.O. and Zip Code: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

DESCRIPTION OF PROJECT: (Briefly describe type of project or action)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A. SITE DESCRIPTION (Physical setting of overall project, both developed and undeveloped areas)

1. General character of the land: \_\_\_\_\_ Generally uniform slope,  
\_\_\_\_\_ Generally uneven and rolling or irregular
2. Present land use: \_\_\_\_\_ Urban, \_\_\_\_\_ Industrial, \_\_\_\_\_ Commercial,  
\_\_\_\_\_ Rural, \_\_\_\_\_ Forest, \_\_\_\_\_ Agriculture, \_\_\_\_\_ Suburban,  
Other (describe): \_\_\_\_\_

3. Approximate percentage of project area:	<u>Presently</u>	<u>After Completion</u>
Meadow or brushland	_____ %	_____ %
Forested	_____ %	_____ %
Agricultural	_____ %	_____ %
Water surface	_____ %	_____ %
Wetland	_____ %	_____ %
(Unvegetated (rock, earth or fill))	_____ %	_____ %
Roads, buildings and other paved surfaces	_____ %	_____ %
Other (indicate type) _____		

4. What is predominant soil type(s) on site? \_\_\_\_\_

5. Approximate percentage of presently undeveloped project area with slopes:

\_\_\_\_\_ 15% or greater; \_\_\_\_\_ 10-15%; \_\_\_\_\_ 0-15%

6. Is project located within quarter mile of or contain:
- a. A building or site listed on the National Register of Historic Places \_\_\_\_\_ Yes, \_\_\_\_\_ No
  - b. A building or site listed on the Statewide Inventory or Historic and Cultural Resources \_\_\_\_\_ Yes, \_\_\_\_\_ No
  - c. An archeological site or fossil bed \_\_\_\_\_ Yes, \_\_\_\_\_ No
7. What is the depth to the water table? \_\_\_\_\_ feet
8. Do hunting or fishing opportunities presently exist in the project area? \_\_\_\_\_ Yes, \_\_\_\_\_ No
9. Does project site contain any species of plant or animal life that is identified as Threatened or Endangered? \_\_\_\_\_ Yes, \_\_\_\_\_ No

If Yes, identify each species: \_\_\_\_\_  
\_\_\_\_\_

10. Are there any unique or unusual landforms on the project site? (i.e. cliffs, dunes, other geological formations) \_\_\_\_\_ Yes, \_\_\_\_\_ No

If Yes, describe: \_\_\_\_\_  
\_\_\_\_\_

11. Is the project site presently used by the community or neighborhood as an open space or recreation area? \_\_\_\_\_ Yes, \_\_\_\_\_ No
12. Does the present site offer or include Scenic views or Vistas known to the community? \_\_\_\_\_ Yes, \_\_\_\_\_ No
13. Are there any streams within or contiguous to project area? \_\_\_\_\_ Yes, \_\_\_\_\_ No
14. Are there lakes, ponds, or wetland areas within or contiguous to project area? \_\_\_\_\_ Yes, \_\_\_\_\_ No

If Yes, (a) Name: \_\_\_\_\_, (b) Size in acres: \_\_\_\_\_

15. What is the dominant Land Use and Zoning Classification within a 1/2 mile radius of the project (e.g. single family residential) and the scale of development (e.g. two story)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

B: PROJECT DESCRIPTION

1. Physical dimensions and scale of project (fill in dimensions as appropriate).
  - a. Total contiguous acreage owned by project sponsor \_\_\_\_\_ acres.
  - b. Project acreage developed: \_\_\_\_\_ acres initially: \_\_\_\_\_ acres ultimately.
  - c. Project acreage to remain undeveloped \_\_\_\_\_ acres.
  - d. Length in miles \_\_\_\_\_
  - e. if project is an expansion of existing structure(s), indicate percent of expansion proposed:  
Building square footage \_\_\_\_\_ developed acreage \_\_\_\_\_
  - 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:

	<u>One Family</u>	<u>Two Family</u>	<u>Multiple Family</u>	<u>Condominium</u>
Initial	_____	_____	_____	_____
Ultimate	_____	_____	_____	_____
  - i. If:           Orientation  

	<u>Neighborhood-Town-Regional</u>	<u>Estimated Employment</u>
Commercial	_____	_____
Industrial	_____	_____
  - j. Total height of tallest proposed structure \_\_\_\_\_ feet.
2. How many acres of land will be graded? \_\_\_\_\_ acres.
3. How much natural material (i.e. rock, earth, etc.) will be removed from the site? \_\_\_\_\_ tons; \_\_\_\_\_ cubic yards.
4. Approximate percentage of developed project area with slopes:  
\_\_\_\_\_ 15% or greater, \_\_\_\_\_ 10-15%, \_\_\_\_\_ 0-10%
5. How many acres of vegetation (trees, shrubs, ground covers) will be removed from the site? \_\_\_\_\_ acres.
6. Will any mature forest (over 100 years old) or other locally important vegetation be removed by this project?     \_\_\_ Yes, \_\_\_ No

7. Are there any plans for revegetation to replace that removed during construction? \_\_\_\_\_ Yes, \_\_\_\_\_ No
8. If single phase project:
- (a) Anticipated date of commencement: Month \_\_\_\_\_, Year \_\_\_\_\_
- (b) Approximate completion date: Month \_\_\_\_\_, Year \_\_\_\_\_
9. If multi-phased project:
- (a) Total # of phases anticipated? \_\_\_\_\_
- (b) Anticipated date of commencement Phase 1 (including demolition): Month \_\_\_\_\_, Year \_\_\_\_\_
- (c) Approximate completion date final phase: Month \_\_\_\_\_, Year \_\_\_\_\_
- (d) Is Phase 1 financially dependent on subsequent phases? \_\_\_\_\_ Yes, \_\_\_\_\_ No
10. Number of jobs generated:  
During construction \_\_\_\_\_ after project completed \_\_\_\_\_
11. Number of jobs eliminated by this project: \_\_\_\_\_
12. Will project require relocation of any projects or facilities? \_\_\_\_\_ Yes, \_\_\_\_\_ No
- If yes, explain: \_\_\_\_\_
- 
13. Acreage of freshwater or tidal wetlands affected by project: \_\_\_\_\_ acres.
14. (a) Is surface or subsurface liquid waste disposal involved? \_\_\_\_\_ Yes, \_\_\_\_\_ No
- (b) If Yes, indicate type of waste (sewage, industrial, etc.)  
\_\_\_\_\_
- (c) If surface disposal, name of stream into which effluent will be discharged. \_\_\_\_\_
15. Will surface area of existing lakes, ponds, streams, bays or other surface waterways be increased or decreased by proposal? \_\_\_\_\_ Yes, \_\_\_\_\_ No
16. Is project or any portion of project located in the 100 year flood plain? \_\_\_\_\_ Yes, \_\_\_\_\_ No
17. (a) Does project involve disposal of solid waste? \_\_\_\_\_ Yes, \_\_\_\_\_ No
- (b) If Yes, will an existing solid waste disposal 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

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 cause a continuing increase in noise levels on completion? \_\_\_\_\_ Yes, \_\_\_\_\_ No

21. Will project cause an increase in energy use? \_\_\_\_\_ Yes, \_\_\_\_\_ No

22. If water supply is from wells, indicate pumping capacity:  
 \_\_\_\_\_ gallons per minute.

23. Total anticipated water usage per day: \_\_\_\_\_ gallons per day.

24. Zoning:

(a) Current specific zoning classification of site: \_\_\_\_\_

(b) Is proposed use consistent with present zoning? \_\_\_\_\_ Yes, \_\_\_\_\_ No

(c) If No, indicate desired zoning: \_\_\_\_\_

25. Approvals:

(a) Is any Federal permit required? \_\_\_\_\_ Yes, \_\_\_\_\_ No

(b) Does project involve State or Federal funding or financing? \_\_\_\_\_ Yes, \_\_\_\_\_ No

(c) Local and Regional approvals:

	Approval	Type Approval Required	Submittal (Date)	Approval (Date)
Village Board of Trustees:	____ Yes, ____ No	_____	_____	_____
Village Planning Board:	____ Yes, ____ No	_____	_____	_____
Village Zoning Board:	____ Yes, ____ No	_____	_____	_____
County Health Department:	____ Yes, ____ No	_____	_____	_____
Other Suffolk County Agencies:	____ Yes, ____ No	_____	_____	_____
State DEC:	____ Yes, ____ No	_____	_____	_____

Federal Agencies: \_\_\_\_\_ Yes, \_\_\_\_\_ No \_\_\_\_\_

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

PREPARER'S SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

REPRESENTING: \_\_\_\_\_ DATE: \_\_\_\_\_