

USE VARIANCE

PLEASE FULLY EXPLAIN YOUR ANSWERS:

(1) Under the applicable zoning regulations, the applicant cannot realize a reasonable return, provided that lack of return is substantial as demonstrated by competent financial evidence:

Yes **No**

(2) The alleged hardship relating to the property in question is unique, and does not apply to a substantial portion of the district or neighborhood:

Yes **No**

(3) The requested variance, if granted, will not alter the essential character of the neighborhood:

Yes **No**

(4) The alleged hardship has not been self-created:

Yes **No**

Town of Warrensburg

Application for Commercial Land Use & Development Permit

1. Contact Information:

Same as Applicant

Same as Applicant

	Applicant	Owner	Contractor
Name			
Company			
Address			
City/State/Zip			
Telephone			
Email			

2. Zoning District (s): _____

3. Estimated Project Cost: \$ _____

4. Description of Project: _____

5. Dimensions:

Type	Dimensions (ft)			Setbacks ¹ (ft)			
	Length	Width	Height	Front	Rear	Right ²	Left ²
Principal Building							
Accessory Structure							
Fence/Wall							
Porch							
Deck							
Addition/Alteration							
Demolition							
Sign #1							
	Type <input type="checkbox"/> Wall <input type="checkbox"/> Free-Standing <input type="checkbox"/> Projecting <input type="checkbox"/> Other: _____		Material <input type="checkbox"/> Plastic <input type="checkbox"/> Metal <input type="checkbox"/> Wood <input type="checkbox"/> Other: _____		Lighting <input type="checkbox"/> Internal <input type="checkbox"/> External <input type="checkbox"/> None		
Sign #2							
	Type <input type="checkbox"/> Wall <input type="checkbox"/> Free-Standing <input type="checkbox"/> Projecting <input type="checkbox"/> Other: _____		Material <input type="checkbox"/> Plastic <input type="checkbox"/> Metal <input type="checkbox"/> Wood <input type="checkbox"/> Other: _____		Lighting <input type="checkbox"/> Internal <input type="checkbox"/> External <input type="checkbox"/> None		

¹Setback is the distance measured from the property line to the closest edge of any structure

²Left/Right Side Setbacks are determined as viewed from the roadway

By signing below, the applicant agrees that the statements and plans submitted are true. Further, the applicant understands that permits and approvals may be required from other jurisdictions (see below).

Applicant Signature _____, **Date** ____/____/____

Applicant Print Name _____

-----Office Use-----

Important! The Town of Warrensburg is not responsible if the applicant fails to obtain permit, etc from any other governmental entity. **Based on this application you are encouraged to contact the following:**

- Adirondack Park Agency Warren County Building Codes NYSDOL Asbestos Control Bureau
- Warrensburg Water/Sewer District Warrensburg Highway Department NYSDOT NYSDEC NYSDOH
- Warren County DPW Dig Safely NY

Current Use (per Use Table): _____

Proposed Use (per Use Table): _____

Zoning Administrator Comments: _____

Signature of Zoning Administrator: _____

Tax Map ID#: _____

Application #: LUD 20__ - _____

Location: _____

Date Submitted: ____/____/____