

Village of Fleischmanns

Fleischmanns, NY 12430

Delaware County, NY

Mayor

Village Clerk

C.E.O./Z.E.O

Winifred Zubin

Karl von Hassel

(845) 254-5514

(845) 254-5514

(845) 254 4340

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APPLICATION FOR APPEAL

APPEAL # _____

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Name of Owner: _____ Date : _____

Address _____

Phone # _____ Tax Map # _____

Type of Variance Use _____

The below signed request the following variance from the Village of Fleischmanns Zoning Law

My reason for this request are:

I am the owner or if not, I have written approval of the Owner (copy attached) of (the property) to file this appeal. I enclose a site plan of the property showing lot size, dimensions of any proposed construction with its relationship to the adjoining buildings, streets and properties.

Sworn before me this _____ day of _____, 20____

Notary Public

Print Name of Applicant

Signature of Applicant

APPLICATION FOR VARIANCE SUBMITTAL REQUIREMENTS

The following is a list of minimum submittal requirements. Additional materials maybe required at the discretion of the Planning Board.

1. Completed application form including the signature of the applicant and current property owner.

2. Three (3) copies of a site plan based on a current survey showing the following:
 - a. North arrow and scale, clearly shown.
 (1) All existing and proposed structures.
 (2) Names of owners of, and any nearby improvements on, adjacent property.
 (3) Dimensions and square footage of subject property.
 (4) All adjoining public or private streets.

I acknowledge that I have read the instructions on applying for a variance, and have submitted at least the minimum submit al requirements to the Planning Board. I agree to submit more materials regarding my application, if requested to do so.

Applicant's Signature _____

Date _____