

ZONING BOARD OF APPEALS
Village of Skaneateles
26 Fennell Street
Skaneateles, NY 13152
315-685-2118 Fax 315-685-0730

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Instructions for Application for Appeal and/or Applications for Special Use Permit to the
Zoning Board of Appeals
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- A. Please prepare this 2 page Appeal or Application for a Special Use Permit by printing in ink or by computer. Submit the signed and dated original and 6 copies to the Secretary of the Zoning Board of Appeals.
- B. Please complete the “Short Environment Assessment Form, Appendix B” located on the Village of Skaneateles website. Submit the signed and dated original and 6 copies to the ZBA secretary.
- C. Please submit with your application and copies the appropriate fee per the schedule below:
1. Appeals and Application for Variances:
 - a. One and two family dwellings and supplemental apartments, accessory buildings.....(per parcel).....**\$200.00***
 - b. All other buildings and structures....(per parcel).....**\$250.00***
 2. Applications for Special Use Permits.....(per parcel).....**\$350.00***
 3. Other applications: If public hearing is required.....**\$100.00***
If no public hearing is required.....**\$50.00***
 4. Renew expired time limit condition or a variance.....**\$50.00***

***Plus expert assistance expenses, professional fees**

(Section 2, paragraph 5 of Local Law #2 of 1995, defines this as “Expert assistance expenses to be paid on behalf of the Zoning Board of Appeals: On any application or appeal the applicant or appellant shall be obligated to pay for all expert assistance, including but not limited to engineering services required by and as determined by the Zoning board of Appeals through and including the date of the application for a Certificate of Occupancy or a Certificate of Completion.”)

- D. Please attach to your appeal and/or application, all information required by the provisions of Zoning Law of the Village of Skaneateles, (Local Law #2-1975) relating to your appeal and/or application. A copy of the Zoning Law is available for viewing at the Village Office, or on the internet at www.generalcode.com.
- E. Upon receipt of the COMPLETE “Notice of Appeal or Application for Special Use Permit” and the required fee(if any), the Zoning Board Secretary shall forward all said information to the Planning Board for recommendation, and then to the Zoning Board of Appeals. A legal notice of the Zoning Board of Appeals will be published in the *Skaneateles Press* or other declared legal publications 10 days before the public hearing.

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.....
(1) NOTICE OF APPEAL

(2) APPLICATION FOR SPECIAL USE PERMIT
.....

Date of Application _____

To the Zoning Board of Appeals of the Village of Skaneateles, Onondaga County, New York

I/We _____
Printed or Typed Name of Appellant(s) and/or Applicant(s)

Address _____

(1) I hereby appeal the decision of the Village Code Enforcement Officer (Building Inspector)

_____ which was denial of a Zoning Permit

_____ which was denial of a Certificate of Occupancy

_____ to vary the strict application of the provisions of:

Article _____ Section 225 Subsection _____

Article _____ Section 225 Subsection _____

Article _____ Section 225 Subsection _____

(2) I hereby apply for: (check all applicable)

_____ A **SPECIAL USE PERMIT** required by the provisions of Article III, Section 225-10

B (1) & Section 225-11 B (2)

_____ A **FLOODWAY PERMIT** required by the provisions of Article III, Section 225-10

B (3) & Article VI, Section 225-18 B
.....

This appeal or application relates to:

_____ Street Number _____ Street Name

Tax Map Number _____

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The applicant shall use this sheet to state the Zoning Board of Appeals details of the variances requested.

Zoning District of the lot _____

Column

- #1 From the Density Control Schedule (Section 225-A5) fill in the minimum requirements for said lot in your Zoning District
- #2 Indicate the existing set-back dimensions, percentages, that are not-conforming with the figures in column #1, and that will not be changed by the proposed construction
- #3 Indicate the dimensions, area (in square feet) and percentages that will result from your proposed construction
- #4 Indicate the variance requested (subtract #3 from #1)

Columns →	#1	#2	#3	#4
Open Area (sq. ft.) as a % of lot area				
Front yard dimension (ft.)				
Left side yard dimension (ft.)				
Right side yard dimension (ft.)				
Both side yards combined (ft.)				
Rear yard dimension (ft.)				
Max. width of structure as a % of lot width (Structure width divided by lot width)				
Min. livable floor area, each dwelling				

List below any OTHER variances, Special Permits requested

(Section of the Zoning Law)

(Description)

Please state below all reasons to support your appeal or application. Attach other sheets as needed to support your appeal/application

Dated _____

Signature of Applicant/Appellant