

# VILLAGE OF ORCHARD PARK ZONING BOARD OF APPEALS APPLICATION

Complete this application, return with the \$150.00 fee and attach to the corresponding Building Permit Application and fee. The actions requested by this application require a referral from the Planning Board (PB) and subsequent action by the Zoning Board of Appeals (ZBA). The next PB meeting is \_\_\_\_\_ @ 7:30 pm. The subsequent ZBA meeting/public hearing is the 3rd or 4th Wednesday of the month @ 7:00 pm. The deadline for the completed application with the required submittals and fee **1 week prior** to the scheduled meeting. The Code Enforcement Official will review this application to determine if the application can be placed on the Planning Board agenda and the subsequent ZBA meeting/public hearing can be scheduled. **Please contact the Village Office for Meeting Dates or visit the Village website at [www.orchardparkvillage.org](http://www.orchardparkvillage.org).**

**A ZBA APPLICATION WILL NOT BE MARKED AS RECEIVED UNTIL ALL FEES ARE PAID**

## VILLAGE USE ONLY

Complete ZBAA Rec'd Date: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Action Date: \_\_\_\_\_  
 SBL# \_\_\_\_\_ Zone: \_\_\_\_\_  
 Existing/Prev Occupancy Classification: \_\_\_\_\_ Existing/Prev Zoning Use: \_\_\_\_\_  
 Proposed Occupancy Classification: \_\_\_\_\_ Proposed Zoning Use: \_\_\_\_\_  
 Municipal Code Section Applied: \_\_\_\_\_  
 Text for Public Notice: \_\_\_\_\_

## INFORMATION

Property Address: \_\_\_\_\_  
 Name (Property Owner) \_\_\_\_\_ Phone# \_\_\_\_\_  
 Owner \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 Name (Occupant): \_\_\_\_\_ Phone# \_\_\_\_\_  
 Name (Applicant): \_\_\_\_\_  
 Applicant Mailing Address: \_\_\_\_\_

## REQUIRED SUBMITTALS - check boxes and attach the requested # of copies to the Building Permit Application

Attach the required # of copies to the corresponding Building Permit Application (check box when attached)

- |                          |                                              |
|--------------------------|----------------------------------------------|
| <input type="checkbox"/> | Survey/Site Plan (8 copies)                  |
| <input type="checkbox"/> | Construction Drawings/Information (8 copies) |

## OPTIONAL SUBMITTALS

Although not required, the applicant may submit additional information such as photographs, renderings, letters or anything that may help to present a more complete action. Optional submittals do not have to be attached to the application and may be presented to the PB and ZBA at a meeting.

## TYPE OF APPEAL (check one)

**A Variance to the Village of Orchard Park Municipal Code**

The applicant requests a variance to the Village of Orchard Park Municipal Code for the listed reason:

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**An Interpretation of the Village of Orchard Park Municipal Code**

The applicant requests an interpretation of the Village of Orchard Park Municipal Code for the listed reason:

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**A. Strict application of the Village of Orchard Park Municipal Code would produce undue hardship or practical difficulties because:**

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**B. Such hardships or difficulties are unique and not shared by all properties in the immediate vicinity because:**

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**C. The variance would not change the character of the district and would observe the spirit of the Municipal Code because:**

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**FEE - A ZBA APPLICATION WILL NOT BE MARKED AS RECEIVED UNTIL ALL FEES ARE PAID**  
 Receipt is hereby acknowledged of the sum of \$150.00 being the application fee established by the Village Board. Receipt# \_\_\_\_\_  
 Village Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTARIZED PROPERTY OWNER'S SIGNATURE**

**I have read this application explaining the procedure and the required information and authorize the Zoning Board of Appeals to act on this appeal.**

**PROPERTY OWNER'S SIGNATURE:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 State of New York  
 County of Erie ss:  
 ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_ BEFORE ME PERSONALLY APPEARED  
 \_\_\_\_\_  
 TO ME PERSONALLY KNOWN TO BE THE PERSON DESCRIBED IN AND WHO EXECUTED THE FORGOING DOCUMENT  
 \_\_\_\_\_  
 NOTARY PUBLIC

**Planning Board Approval (if required)**

Conditions: \_\_\_\_\_  
 \_\_\_\_\_

**APPROVALS**

**PLANNING BOARD REFERRAL**  Recommend Approval  Recommend Denial

Conditions: \_\_\_\_\_  
 \_\_\_\_\_

PB Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_

**ZONING BOARD of APPEALS APPROVAL**  Approved  Denied

Conditions: \_\_\_\_\_  
 \_\_\_\_\_

ZBA Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_