

Town of Owego
2354 State Route 434 Apalachin, NY 13732
Phone: 607-687-0123 x6 Email: planningzoning@townofowego.com
Application fee \$25.00 made out to "Town of Owego"

Appeal No. _____
Date _____

AREA VARIANCE APPLICATION

To the Zoning Board of Appeals of the Town of Owego, New York:

I (we) _____ of _____
Applicant's Name Number & Street

City, Town or Village State Zip Code Telephone Number

Location of the property _____

Zoning District _____ Tax Map Number _____

hereby apply to the Zoning Board of Appeals for an Area Variance, pursuant to Chapter 125,

Article _____, Section _____, Subsection _____, Paragraph _____,

(& Chapter 125, Article _____, Section _____, Subsection _____, Paragraph _____).

A variance of _____ is requested.

In determining whether to grant an Area Variance, the Zoning Board of Appeals must consider the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety and welfare of the neighborhood or community by such grant.

Therefore, please provide the following information for the Zoning Board of Appeals' consideration on back of form. Attach additional sheets if needed.

1. *Why is the area variance wanted or needed?*
2. *How did the problem arise that now makes an area variance necessary or desired?*
3. *Will an undesirable change be produced in the character of the neighborhood or a detriment to nearby properties be created by the granting of the area variance?*
4. *Will the proposed variance have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district?*
5. *Is the requested area variance substantial?*
6. *Is there some method feasible for you to pursue other than an area variance?*
7. *Is the alleged difficulty self-created? (which consideration shall be relevant to the decision of the Board of Appeals, but shall not necessarily preclude the granting of the area variance.)*

STATE OF NEW YORK:

: SS

COUNTY OF TIOGA :

Sworn to this _____ day of _____, 20 _____.

NOTARY PUBLIC _____ APPLICANT'S SIGNATURE _____

