

Town of Lorraine Zoning Board of Appeals Development Law Change Application	Lorraine Form # 26 Rev. 14 Aug 14
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Instructions:

- 1 . Fully complete this application.
- 2 . Write NA when Non-applicable.
3. Application, complete with fees, shall be filed with the Zoning Enforcement Officer.
4. Zoning Officer will file a copy with the Town Clerk

Office Use Only

Application # V- _____
Application Fee \$500.00
Date of Appeal: _____
(Postmark or Hand Delivered)
Date of Receipt by Board: _____
Date of Public Hearing: _____
Date of Final Action: _____

Date of Filing of Decision with the
Municipal Clerk: _____

Applicant Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

If application is by petition, please attach hereto.

Application is for:

- () Zoning Map Amendment
- () Zoning Ordinance Amendment

Attach a completed Part 1 of the Full Environmental Assessment Form (EAF). Forms are available from the Planning Board or through the NYSDEC website.

Complete Section A and/or B as appropriate:

Section A – Zoning Map Amendment

1. General Description of boundaries or area for which the zone change is requested:

2. Attach a copy of the tax map showing the area for which the zone change is requested.

3. Total area (square feet or acres): _____

4. Present zoning classification: _____

5. Present use: _____

6. Adjacent zoning classification: _____

7. Adjacent use: _____

8. Proposed zoning classification: _____
9. Proposed use: _____
10. Reasons for amendment request: _____

Section B – Zoning Ordinance Amendment

1. Section(s) reference: _____

2. Existing section(s) is not adequate because: _____

3. Proposed change: _____

4. The proposed change will clarify or improve the ordinance because: _____

Signature of Applicant: _____ Date: _____

- NOTE: 1. Parts II and III of the Full Environmental Assessment Form EAF and the assessment process must be completed by the Town Board before the application can be considered complete.
2. The Town Board will notify you of their action in writing within 30 days of the date of the public hearing held on this application.

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Approval Date: _____ Signed: _____

Denial Date: _____

Reason for Denial:
