

***Village of Pawling
Zoning Board of Appeals
9 Memorial Avenue
Pawling, New York 12564
Tel: (845) 855-1128
Fax: (845) 855-9317***

Zoning Board of Appeals Application

Appeal# _____

Fee Received: _____

Applicant: _____

Mailing Address: _____

Phone Number(s): _____

E-mail Address: _____

Property Owner: _____

Property Street Address: _____

Zoning Ordinance Appealed: _____

Type of Appeal: () Area Variance () Interpretation () Use Variance
() Appeal decision of Code Enforcement Officer

A previous appeal (has) been made: Appeal: _____ Date: _____

Appeal: _____ Date: _____

AREA VARIANCE:

APPEAL # _____

APPLICANT: _____

Please respond to the following 1-5: (use extra sheets if needed)

- 1) That the granting of the variance will not result in the undesirable change in character of the neighborhood or a detriment to nearby properties

- 2) The benefit sought cannot be achieved by some other feasible method.

- 3) Is the Variance substantial?

- 4) Will there be an adverse effect or impact on physical or environmental conditions in the neighborhood or district?

- 5) Was this difficulty self-created?

MINIMUM VARIANCE REQUIRED: _____

ZBA COMMENTS: _____

