

VILLAGE OF BUCHANAN
236 TATE AVE., BUCHANAN, NY 10511
(914) 737-1033

APPLICATION TO THE ZONING BOARD

I. IDENTIFICATION OF APPLICANT

APPLICANT NAME _____ PHONE _____
ADDRESS _____
ARCHITECT/ENGINEER _____

II. IDENTIFICATION OF PROPERTY

TAX MAP SECTION _____ BLOCK _____ LOT(S) _____
LOCATION OF AFFECTED PREMISES (ADDRESS) _____

ZONING DISTRICT _____ AREA _____ SQ/FT

III. DESCRIPTION OF PROPOSED ACTIVITY/OCCUPANCY

RESIDENTIAL _____ COMMERCIAL _____ OTHER _____

IV. TO THE ZONING BOARD:

APPLICATION IS HEREBY MADE FOR (CHECK ALL THAT APPLY):

_____ VARIANCE FROM THE REQUIREMENT OF SECTION _____
_____ SPECIAL PERMIT PER THE REQUIREMENT OF SECTION _____
_____ REVIEW OF AN ADMINISTRATIVE DECISION OR ORDER OF THE BUILDING
INSPECTOR (ATTACHED, IF APPLICABLE)
_____ AN ORDER TO ISSUE A CERTIFICATE OF OCCUPANCY
_____ AN ORDER TO ISSUE A BUILDING PERMIT
_____ AN INTERPRETATION OF THE ZONING LOCAL LAW OR ZONING MAP
_____ CERTIFICATE OF AN EXISTING NON-CONFORMING LOT, BUILDING, OR USE.
_____ OTHER (EXPLAIN) _____

V. ADDITIONAL INFORMATION

HAVE PREVIOUS APPLICATIONS TO THE PLANNING OR ZONING BOARD BEEN FILED IN
REGARD TO THESE PREMISES? YES _____ NO _____

HAS VIOLATION BEEN SERVED RELATIVE TO THIS MATTER? YES _____ NO _____

**VI. ATTACHED HERETO AND MADE PART OF THIS APPLICATION, I SUBMIT TEN (10) COPIES
OF THE FOLLOWING (CHECK ALL THAT APPLY):**

_____ FLOOR PLANS WITH ALL NECESSARY MEASUREMENTS
_____ PROPERTY SURVEY AND/OR A SITE DEVELOPMENT PLAN.
_____ SIGNED CONSENT AND/OR A SITE DEVELOPMENT PLAN
_____ OTHER (EXPLAIN): _____

VII. APPROVAL FOR SUBMISSION

SIGNATURE OF APPLICANT _____ DATE _____

VIII. RECEIPT

DATE RECEIVED BY CLERK _____ FEE RECEIVED \$ _____
RECEIPT NO. _____
ESCROW RECEIVED _____

**NOTE: ALL COMMERCIAL APPLICANTS ARE RESPONSIBLE FOR DEPOSIT OF ESCROW AND THE
REIMBURSEMENT OF COSTS INCURRED BY THE VILLAGE FOR ENGINEERING,
ENVIRONMENTAL, OR OTHER TECHNICAL CONSULTANTS WHERE DEEMED NECESSARY BY
THE VILLAGE BOARDS AS PER LOCAL LAWS.**

AFFIDAVIT OF APPLICANT

STATE OF NEW YORK)
COUNTY OF WESTCHESTER) SS:
VILLAGE OF BUCHANAN)

I HEREBY DEPOSE AND SAY THAT ALL THE ABOVE STATEMENTS AND THE STATEMENTS CONTAINED IN THE PAPERS SUBMITTED HEREWITH ARE TRUE.

APPLICANT: _____
ADDRESS: _____

SWORN TO ME THIS
_____ DAY OF _____, 20____

NOTARY PUBLIC
COUNTY OF WESTCHESTER

AFFIDAVIT OF OWNERSHIP

STATE OF NEW YORK)
COUNTY OF WESTCHESTER) SS:
VILLAGE OF BUCHANAN)

_____ BEING DULY SWORN, DEPOSES AND SAYS THAT HE/SHE RESIDES AT _____ IN _____, IN THE COUNTY OF _____ IN THE STATE OF _____ THAT HE/SHE IS THE OWNER IN FEE OF ALL THAT CERTAIN LOT , PIECE OR PARCEL OF LAND SITUATED, LYING AND BEING IN THE VILLAGE OF BUCHANAN AFORESAID AND DESIGNATED AS TAX MAP SECTION _____ BLOCK _____ LOT(S) _____ OF THE BUCHANAN TAX MAP AND THAT HE/SHE HEREBY AUTHORIZES IN HIS/HER BEHALF THAT THE STATEMENTS OF FACT CONTAINED IN SAID APPLICATION ARE TRUE.

OWNER _____
ADDRESS _____

SWORN TO ME THIS
_____ DAY OF _____, 20____

NOTARY PUBLIC
COUNTY OF WESTCHESTER

NOTICE

TEN (10) COPIES OF THE APPLICATION AND ANY ATTACHEMENTS SHALL BE SUBMITTED TO THE CLERK’S OFFICE BEFORE THIS MATTER WILL BE PLACED ON THE ZONING BOARD AGENDA.

OFFICE USE ONLY

CAL NO. _____