

APPLICATION FOR APPEAL
Zoning Board of Appeals
Town of Pittstown
Valley Falls, NY 12185

Tax Map No. _____

Date: _____

PROCEDURE: The appeal of a decision of Building Inspector or Zoning Officer may be made to the Zoning Board of Appeals by any person, firm or corporation, or by an officer, department, board, or bureau affected by such decision. The appeal shall be within thirty (30) days of said decision by filing with the Town Clerk on this form. The following attachments must accompany the appeal:

1. Diagram of entire lot with existing improvement.
2. Copy of decision pertaining to the appeal.
3. Check for \$25.00 for appeal.

Applicant/Appellant: _____
Address: _____
Telephone Number: _____

Owner of Property: _____
Address: _____
Telephone Number: _____

Property is located on the _____ side of _____ (street, avenue) between _____ (street, avenue) and is known as No. _____.

Present Zoning _____ Present Use _____

Present Improvements _____

Appeal for: () Area Variance () Use Variance () Special Use Permit

Reason for Appeal: _____

Section of Zoning Ordinance violated: _____

If Hardship Explain: _____

Include any comments, recommendations, or requirements of any Town of Pittstown authorities that may be applicable to this appeal.

Signature of Applicant/Appellant