

Town of Saratoga Zoning Board of Appeals

General Information and Procedures

Zoning Officer	Gil Albert	(518) 369-4595 or (518) 695-3688 ext. 313
Zoning Board Clerk	Linda McCabe	(518) 695-3644 ext. 322
Regular Meetings	*Fourth Monday each month at 7:00 p.m.	
Meeting Location	Town of Saratoga Town Hall, 12 Spring St., Schuylerville	

Procedures

1. The applicant or a representative must be present before the ZBA will hear the case.
2. **The applicant must supply the Clerk with 11 copies of the following: application, plot plan showing all property dimensions; lot size, location of septic and size of all buildings, and a diagram showing all proposed changes no later than 14 days before meeting date, by 10:00 AM.** Photographs of the property and buildings are recommended. In addition, where appropriate, it is recommended that the applicant have a larger field drawing (such as a tax map) showing the location of all adjoining properties and their structures. For their own protection, the applicant should have a certified survey of the lot for which the variance is requested, but this is not mandatory.
3. The applicant should bring written, signed letters from adjoining landowners stating their position regarding the requested variance and or proof of notification via certified mail return receipt requested.
4. The applicant or their representative will describe the variance requested and answer all questions by members of the Board.
5. Input concerning the requested variance will be requested from the Zoning Officer, and where appropriate, the Town Planning Board the County Planning Board.
6. Concerned citizens will be provided the opportunity to give input concerning the requested variance.
7. If more information is needed, the Board may request that the applicant obtain the requested information and come back at the following month's meeting.
8. In order for any motion to pass, 4 votes, the majority of the Board, are required.

Summary of Use Variance Criteria

To allow a use not otherwise allowed in zoning, an applicant must demonstrate to the board **Unnecessary Hardship. Such demonstration includes all of the following for each and every permitted use:**

1. can not realize a reasonable return- substantial as shown by competent financial evidence;
2. alleged hardship is unique and does not apply to substantial portion of district or neighborhood;
3. requested variance will not alter essential character of the neighborhood;
4. alleged hardship has not been self-created.

If approved, the Board shall grant minimum variance necessary, and may impose reasonable conditions.

Summary of Area Variance Criteria

Balancing test – Board of Appeals shall balance benefit to applicant with detriment to health, safety, and welfare of the community. Board of Appeals shall also consider:

1. whether benefit can be achieved by other means feasible to applicant;
2. undesirable change in the neighborhood character or to nearby properties;
3. whether the request is substantial;
4. whether the request will have adverse physical or environmental effects;
5. whether the alleged difficulty is self-created.

If approved, the Board shall grant the minimum variance necessary, and may impose reasonable conditions.

***Subject to change**

**Application to the Zoning Board of Appeals
Town of Saratoga
12 Spring St.
Schuylerville, NY 12871
Telephone # 695-3644 ext. 313 or 322 Fax # 695-6782**

Appeal No. _____
Date _____
Section/Block/Lot # _____

Applicant(s): Name _____
Complete Address _____
Telephone Number _____

I (we) hereby appeal to the Zoning Board of Appeals from the decision of the **Enforcement Officer** for a building permit to _____

dated _____, 20__ whereby the zoning officer did (___) Grant (___) Deny

1. Location of property _____
2. Criteria by which to identify the property (ex. house color, neighboring property description, etc) _____
3. Zoning District _____
4. Type of Appeal An appeal is made herewith for:
 - (___) An **interpretation** of the zoning regulations on zoning map
 - (___) A **variance** to the zoning regulations (___) **Use** (___) **Area**
 - (___) A certification to re-establish an abandoned non-conforming use

Appeals Information

	Required	Proposed	Variance Needed
Lot Area:	_____	_____	_____
% of building coverage	_____	_____	_____
Set Backs: Front	_____	_____	_____
Back	_____	_____	_____
Two-sides	_____	_____	_____
Side	_____	_____	_____
Minimum Lot Width	_____	_____	_____
Minimum Frontage	_____	_____	_____
Height Variance	_____	_____	_____
Sign Variance	_____	_____	_____

Reason for the Variance (be specific and complete – attach additional pages if necessary)

Are there any deed restrictions, easements, or covenants on the property which affect the proposed request and use that you are applying for?

No _____

Yes _____

Explain _____

If yes, please provide a copy of your deed.

I hereby attest that the information presented in this application is accurate and is a truthful representation of the proposal.

Signed: _____ Date: _____

This application, with the required documents (11 copies of all) and a \$150 application fee payable to The Town of Saratoga, must be to the Zoning Clerk 14 days prior to the meeting, no later than 10:00 a.m., in order to be on the agenda.

* Files that remain inactive for a period of 2 months must be re-filed with a \$150 application fee.

Zoning Board of Appeals meetings begin at 7:00 p.m.