Town of Claverack Application for a Use Variance

Please refer to "Application Submittal Checklist" for instructions on filling out this form.

	OFFICE USE ONLY			
	Permit Appli	cation #		
	Date of App (Postmark o	eal r Hand-Delivered)		
	Date of Rec	eipt by Board		
	Date of Pub	lic Hearing		
	Date of Fina	l Action		
		g of Decision nicipal Clerk		
PLEASE PRINT				
Applicant(s) name				
Address				
Phone				
Email (if applicable)				
Appeal Concerns Property at the follow	ving address:			
County Tax Map Section	Block	Lot		
Zoning District Classification				
Date Applicant Acquired Property(If property is not owned by the applica	nt the applicant mus	t submit a statement by		
the property owner authorizing the app	• •	•		
The applicant's appeal from a decision following:	of the Zoning Enforce	ement Officer concerns the		
Denial of an Application for a Build	ing Permit (Attach to	Application)		
Denial of an Application for a Certificate of Occupancy (Attach to Application)				

For the Proposed Activity:
Denial was made based on the following sections of the Zoning Code:
Date of Zoning Enforcement Officer's Decision
State what type of variance you are requesting:

TEST: No use variance will be granted without showing by you (the applicant) that applicable zoning regulations and restrictions have caused unnecessary hardship. The following tests must be met for each and every use allowed by zoning on the property, including uses allowed by special use permit. Below please briefly describe how each of the four variance tests are met. Attach all supporting materials.

1. The applicant cannot realize a reasonable return, as shown by competent financial evidence. The lack of return must be substantial. PROOF:
2. The alleged hardship relating to the property is unique. (The hardship may not apply to a substantial portion of the zoning district or neighborhood.) PROOF:
3. The requested use variance, if granted, will not alter the essential character of the neighborhood. PROOF:

4. The alleged hardship has not been self-cre PROOF:	eated.	
Applicant Signature	Date	