



**Town of Fishkill  
Zoning Board of Appeals  
807 Route 52  
Fishkill, NY 12524  
Phone: (845) 831-7800 ext. 3328  
Fax: (845) 831-3256**

**APPLICATION FOR A USE VARIANCE**

<b>FOR OFFICE USE ONLY</b>	
Application No.:	ZB <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>
Application Fee:	<input type="text"/>
Escrow Deposit:	<input type="text"/>
Escrow Account No.	<input type="text"/>

**Note:** If all information does not fit on this form, please attach additional pages to this form.  
If any items are not applicable on this form, please indicate so as N/A.

**APPLICANT'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**PROPERTY OWNER'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

*(If the Applicant does not own the property, the Applicant must submit a statement from the Property Owner authorizing the Applicant to appeal on his/her behalf)*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**REPRESENTATIVE'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

<b>FOR OFFICE USE ONLY - DATE RECEIVED</b>



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**PROFESSIONAL ENGINEER, ARCHITECT OR LAND SURVEYOR INFORMATION  
(ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
License Number: \_\_\_\_\_

**ATTORNEY INFORMATION  
(ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

**APPEAL CONCERNS THE FOLLOWING PROPERTY (ENTIRE SECTION MUST BE COMPLETED)**

The Applicant's Appeal from a decision concerns the following:

Tax Grid Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Acres: \_\_\_\_\_

Tax Grid Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Acres: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property is located in \_\_\_\_\_ Zoning District(s)

Year Owner acquired the property: \_\_\_\_\_



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**APPEAL CONCERNS THE FOLLOWING PROPERTY (ENTIRE SECTION MUST BE COMPLETED)  
(CONTINUED)**

The Applicant's Appeal from a decision of the Zoning Enforcement Officer or as directed by the Planning Board as permitted by New York State Law, concerns the following:

- Town of Fishkill Planning Board Action Denial
- of an Application for a Building Permit.
- Denial of an Application for a Certificate of Occupancy.

Interpretation of Town Code Chapter:

Proposed activity:

\_\_\_\_\_

\_\_\_\_\_

The Denial was based on the following Section(s) of the Town Zoning Code: \_\_\_\_\_

The Date of the Zoning Enforcement Officer's Decision: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of the type of Use Variance requested:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the property within 500' of any of the following?

- |  |   |
|--|---|
| <input type="checkbox"/> Village of Fishkill   | <input type="checkbox"/> City of Beacon   |
| <input type="checkbox"/> Town of Wappinger     | <input type="checkbox"/> Interstate 84  |
| <input type="checkbox"/> Town of East Fishkill | <input type="checkbox"/> State or County Road (Rt 9, Rt 9D, Rt 52, Rt 82, DC Route 34, DC Rt 34, DC Rt 35 and DC Rt 36) |

Existing or proposed right-of-way of any stream, creek or river? (Please describe): \_\_\_\_\_

\_\_\_\_\_

Wetlands or wetland buffer areas



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**CRITERIA FOR A USE VARIANCE (ENTIRE SECTION MUST BE COMPLETED)**  
**(CONTINUED)**

No Use Variance will be granted without proof being shown by the Applicant that applicable Town Zoning Regulations and restrictions have caused unnecessary hardship. The following tests must be met for each and every use allowed by the current zoning of the property, including uses allowed by Special Use Permit. Describe below how each of the four (4) tests are met and attach a copy of any supporting materials.

- 1. The Applicant cannot realize a reasonable return, as shown by competent finance evidence. The lack of a 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 neighbor.

Proof: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 4. The alleged hardship has not been self-created.

Proof: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**ACKNOWLEDGEMENT**

In accordance with Town of Fishkill Town Code §150-98, the undersigned Owner, and if different, the undersigned Applicant acknowledge and agree to the following:

In the event of failure to reimburse the engineer, legal and consulting expenses incurred by the Town with regard to this Application, the Town may seek recovery of such expenses by action venued in a court of appropriate jurisdiction and the Owner and the Applicant, if different, shall be jointly and severally responsible for the reasonable and necessary attorney's fees expended by the Town in prosecuting such action. In the alternative, and at the sole discretion of the Town, a default reimbursement of such expenses incurred by the Town, with regard to this Application, shall be remedied by charging such unpaid sums against the subject property and collecting such unpaid sums along with any other charges against the subject property.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representative's Signature

\_\_\_\_\_  
Date



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**APPLICATION CHECKLIST**

All items listed below must be submitted at time of application to the ZBA and must be submitted in accordance with the current year’s ZBA Meeting Schedule of Meetings, which lists the deadline dates for all ZBA Meetings. The current year’s ZBA Meeting Schedule may be obtained on the Town’s website at [www.fishkill-ny.gov](http://www.fishkill-ny.gov) on the homepage under the dropdown menu entitled Board & Meetings/Meeting Schedules or you may visit the Town Hall and obtain a copy from the ZBA Secretary.

**Items Required with an Application for an Use Variance:**

- Application Fee: Residential = \$350.00  
Commercial = \$1,200.00
- Escrow Deposit: Residential = \$2,000.00  
Commercial = \$5,000.00

One CD or USB Drive containing a copy of the completed Application, Environmental Assessment Form, Professional drawings, Building Permit Denial Letter, Owner’s Consent Letter and any other documentation being submitted as part of this application in **PDF format**.

***One (1) original and three (3) copies of the following: (Please be sure to separate your submission into four (4) complete sets - one (1) original and three (3) copies)***

- Application for a Use Variance
- Environmental Assessment Form (EAF) - submission of Short EAF or Long EAF must be determined by the Town Building Inspector/Zoning Administrator.
- Professional drawings along with a plot plan or site plan outlining the project.
- Town Building Inspector/Zoning Administrator’s Decision
- Owner’s Consent Letter (if applicable)
- Any additional supporting documentation