



# TOWN OF GALWAY

ZONING BOARD OF APPEALS  
SARATOGA COUNTY, NY  
ESTABLISHED 1792  
518-885-6070

5910 Sacandaga Road  
Galway, New York 12074

*For Town Code Enforcement Officer Use Only:*

Application # \_\_\_\_\_

Date Received: \_\_\_\_\_

TYPE OF APPEAL BEING REQUESTED:

- ( ) Area Variance to the Zoning Regulations  
( ) Use Variance to the Zoning Regulations  
( ) Interpretation of Zoning Regulations or Zoning Map  
( ) (affirm, modify or reverse enforcement decision)

**INSTRUCTIONS FOR APPLICANT:** Complete Parts I, II and III, sign, date and submit this application form to the code enforcement officer along with:

- 1) A State Environmental Quality Review Act (SEQRA) Short Form (attached, or available at [www.dec.ny.gov/permits/6191.html](http://www.dec.ny.gov/permits/6191.html))  
**Part I only** completed, signed and dated.
- 2) **Five (5)** 11x17 hard copy and one Digital PDF of a **plot plan drawn to scale\*** including, at a minimum, the following information:
  - A. Precise/accurate property lines (Lake District: Locate and identify survey markers)
  - B. All structures existing and proposed, including specific dimensions (sizes) and location on the lot.
    - 1) **(all corners should be flagged/staked in preparation for site visit by board members)**
  - C. All present and proposed side, front and rear yard setback dimensions from all structures (existing and proposed)
  - D. Location of water/well and septic facilities, proposed and existing, with separation distances noted.
  - E. Adjacent landowners (names) and approximate location of neighboring structures, water/well and septic facilities
  - F. Any natural or man-made features that may affect the property (i.e., roads, driveways or easements, drains, ponds/wetlands)  
**(\*Note:** The board reserves the right to request a surveyed plot plan if precise/accurate property lines cannot be determined or are unclear)
- 3) **Non-refundable application Fee is due at the time of application** (please refer to current Fee Schedule)
- 4) The property owner should be aware all board members will be making an unannounced site visit.

Submit the completed application to: Code Enforcement Officer and must be received by the first of the month to be placed on the agenda for the following month's meeting.

E.g., an application submitted by *January 1* will be heard at the *February meeting*.) The Zoning Board of Appeals meets the first Tuesday of each month.



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## Part I: APPLICANT INFORMATION:

Applicant Name: \_\_\_\_\_ Property Owner Name \_\_\_\_\_  
(If other than applicant)  
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Tele. (Cell) \_\_\_\_\_

Tele. (cell) \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Address/Location of subject property** (please complete even if the same as above and include street/road name, house/lot # and brief driving directions)

Subject property **tax parcel #** (can be found on tax bill) \_\_\_\_\_

District: Agricultural/Residential: \_\_\_\_\_ Lake: \_\_\_\_\_ Commercial: (C1) \_\_\_\_\_ (C2) \_\_\_\_\_

## Part II: APPEAL INFORMATION:

I (we) hereby appeal to the Zoning Board of Appeals from a decision of the code enforcement officer denying me (us):

- ☐ A permit to build;
- ☐ A certificate of occupancy; or
- ☐ A certificate of continuation of a non-conforming use

Date decision was issued \_\_\_\_\_

Has a previous appeal been filed for this property: \_\_\_\_ yes \_\_\_\_ no

If yes, please indicate the date(s) and appeal number(s) \_\_\_\_\_

Present Use of Property: \_\_\_\_\_

Brief Description of the Project: -

## Part III: REASON FOR APPEAL (Complete relevant sections, and please, be specific)

A. An AREA VARIANCE to the Zoning Regulations is requested for all of these reasons:



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An undesirable change will not be produced in the character of the neighborhood or a detriment to nearby property will not be created by granting the area variance because

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The relief sought by the applicant cannot be achieved by any other feasible method because

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The requested area variance is not substantial because

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The requested area variance will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district because

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The alleged difficulty has not been self-created because

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**AFFIRMATIONS/SIGNATURES:**



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I (we), \_\_\_\_\_ the applicant(s) for this action, do hereby affirm that all the information provided in this application is correct and accurate. I understand that furnishing information that is not correct or fraudulent may negate any findings and/or approvals granted by the Town of Galway Zoning Board of Appeals in regard this to application.

Further, I/We do hereby affirm and say that I/we are the owner(s) of the subject property or are under contract to purchase said property (*must provide proof – i.e., purchase contract*)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

B. USE VARIANCE to the Zoning Regulations is requested for all of these reasons (**all four standards must be met**):

Under the applicable zoning regulations, the applicant is deprived of all economic use or benefit from the property in question because:

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The alleged hardship relating to the property is unique and does not apply to a substantial portion of the district or neighborhood because:

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The requested use variance, if granted, will not alter the essential character of the neighborhood because: \_\_\_\_\_

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The alleged hardship has not been self-created because: \_\_\_\_\_

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C. An INTERPRETATION of the Zoning Regulations is requested because: \_\_\_\_\_



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## AFFIRMATIONS/SIGNATURES:

I (we), \_\_\_\_\_ the applicant(s) for this action, do hereby affirm that all the information provided in this application is correct and accurate. I understand that furnishing information that is not correct or fraudulent may negate any findings and/or approvals granted by the Town of Galway Zoning Board of Appeals in regard this to application.

Further, I/We do hereby affirm and say that I/we are the owner(s) of the subject property or are under contract to purchase said property (*must provide proof – i.e., purchase contract*)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

ESCROW: As per section 115-64 A of the Town of Galway code any application may be required to establish an escrow account based on the estimated cost of the Town for professional review of the proposal. Professional review services include but are not limited to Engineers, Attorneys, Architects, Landscape designers, Surveyors, Appraisers, and Planners. For additional information refer to Section 115-64 A-G.

Initials \_\_\_\_\_

## Optional Authorization/Consent for Third Party Representation

I/We, the owner(s) under contract of the above subject property, do hereby give consent for

Representative Name

\_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ to represent me and to act on my behalf at all proceedings before the Town of Galway Zoning Board of Appeals in regard to this application.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_



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## FOR TOWN USE ONLY

### Zoning/Code Enforcement Officer's Comments:

Verify type of permit that was denied:

( ) A permit to build; ( ) A certificate of occupancy; or, ( ) A certificate of continuation of a non-conforming use

Date decision was issued \_\_\_\_\_

Reason for denial: (Reference Zoning Regulation that was violated (# and/or page number)

Brief Description of Project:

Desired setbacks/variances being requested as reviewed/verified with applicant:

### Proposed Dimensions

Permitted Dimensions: (Pursuant to zoning regulations for specific district)

Road Frontage: \_\_\_\_\_ Lot Width: \_\_\_\_\_

Road Frontage \_\_\_\_\_ Lot Width: \_\_\_\_\_

Front Setback: \_\_\_\_\_ Rear Setback: \_\_\_\_\_

Front Setback \_\_\_\_\_ Rear Setback: \_\_\_\_\_

Side Setback: \_\_\_\_\_ Area (density) \_\_\_\_\_

Side Setback \_\_\_\_\_ Area (density) \_\_\_\_\_

Structure Coverage \_\_\_\_\_

Structure Coverage \_\_\_\_\_

Reviewed prints/plot plan submitted with application? \_\_\_\_\_ Comments? \_\_\_\_\_

Meeting all other town and/or NYS codes (i.e., for septic, well, foundation requirements, etc.)?

Any unique/special circumstances about this application the board should be aware of and/or Additional Comments: