

ZBA Interpretation Application

Village of Weedsport
 8892 South Street, PO Box 190
 Weedsport, NY 13166
 (315) 834-6634

OFFICE USE ONLY	
Date of Code Enforcement Officer's Decision: _____	Application No. I- _____
Denial was made because of a violation or conflict with the Zoning Law Section(s): _____	Date Received: _____
_____	Fee Paid: \$ _____
_____	Date of Public Hearing: _____
_____	Date of Final Action: _____
_____	Date of Filing of Decision with the Clerk: _____

Appeal Concerns Property at the Following Address: _____

Tax Parcel I.D. No.: _____ Acres: _____ Zoning District: _____

The applicant's appeal concerns property (choose one):

- Owned by the applicant or the applicant as agent for the owner
- Which is adjacent to or nearby property owned by the applicant: _____
 (Tax Parcel I.D. No. of such property)

Reason for appeal: _____

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

I, the undersigned, am the legal owner or legal representative of the owner of the real property that is the subject of this appeal request. I understand that the Zoning Board of Appeals must review this request against the intent of the section(s) of the zoning code related to this request; and may reverse or affirm, wholly or partly, or may modify the order, requirement, decision, interpretation or determination of the Code Enforcement Officer's decision related to this request as permitted by NYS Village Law §7-712-b. I attest that the information provided on this application is true and accurate to the best of my knowledge. I also hereby acknowledge that the Town has the right to place a sign in the right-of-way along this property in order to advertise a public hearing for the appeal that I have requested; and I will not interfere with or remove said signage.

 APPLICANT SIGNATURE

_____/_____/_____
 DATE