

INSTRUCTION FOR SPECIAL PERMIT

The Town of Geddes Zoning Board of Appeals (ZBA) the second Wednesday of each month at 7:00 PM at the Geddes Town Hall, 1000 Woods Rd. Solvay, NY. All applications and exhibits are to be completed and returned to the Code Enforcement Office no later than ***three (3) weeks*** prior to the board meeting date.

All applications must be complete in context before the ZBA will schedule a hearing.

Nine (9) copies of the completed application along with all **nine (9) copies** of the exhibits are required with an **application fee of \$75.00**, plus a deposit of **\$500.00- Existing Building-- \$ 750.00- New Building** for legal and engineering fee (***two (2) separate checks***) as approved by the Town Board, in order for the application to be processed.

All applicants or their authorized agent must appear at the scheduled public hearing. Failure to do so may result in delays or denials.

Submit the completed application along with all of the following exhibits:

- A site plan and survey of the property, showing all existing and proposed structures on which the special permit is involved. The plan must depict all areas devoted to parking, landscape and its relation to traffic and egresses.
- A letter of intent indicating the exact use, all hours of operation, number of employees and other information that may be associated with the special permit.
- In the case of home occupation please document the percentage of floor area to be utilized by the home occupation.
- A letter from the owner of the property (if not the applicant) approving of said application.
- An environmental form completed (SEQRA)(***Front Side Only***)
- Estimate of number of clients and location at peak use time.
- Signage information, including size, location, type and lighting must be identified.

The Zoning Board of Appeals may at its own discretion, send the application to the Town of Geddes Planning Board, or the City/County Planning Agency or any other concerned agency for their review and recommendation.

Appeal Number _____

Date received _____

Applicant Name _____

Address _____

Phone _____

City _____ State _____ Zip _____

Email _____

Project Location _____

City _____ State _____ Zip _____

Zoning District of Parcel _____

Name of Property Owner _____

Address of Property Owner _____

Phone _____

City _____ State _____ Zip _____

Email _____

The applicant requests a special permit pursuant to the Town Of Geddes Zoning Ordinance,
Chapter ____ Section _____ Paragraph _____

Project Description

Justification Of Request

Has there been a previous appeal. Yes _____ No _____

Are there no restrictions in the deed of the property that does not allow the special permit that I am requesting Yes _____ No _____

Applicants Signature _____

Date _____