

VILLAGE OF MARCELLUS
CODE ENFORCEMENT OFFICE

6 Slocombe Avenue | Marcellus, NY 13108
Phone: (315) 673-3112
codes@villageofmarcellus.com

ZONING APPEAL/ INTERPRETATION
APPLICATION PROCEDURE

- A) Complete all applicable sections of the application.
- B) Sign and date the application.
- C) Provide 9 copies of each of the following at least two (2) weeks before the public hearing date
(Some items may not apply to your project):
 - a. APPLICATION – correctly completed and signed by applicant
 - b. PROPERTY SURVEY – drawn to scale and representing property as it currently exists
 - c. SITE PLAN – drawn to scale, maximum 1" = 50' of the proposed project
 - d. FLOOR PLANS – drawn to scale, showing proposed layout
 - e. ILLUSTRATION OF THE EXTERIOR APPEARANCE OF THE PROPOSED PROJECT – showing all details including trim, etc.
 - f. SHORT ENVIRONMENTAL ASSESSMENT FORM – completely filled out and signed
 - g. APPLICATION FEE – must accompany application. Fee is non-refundable
- D) The applicant must appear in person or by agent. If an agent is to appear, the applicant must submit a notarized letter authorizing the agent to represent them in all matters and decisions related to the appearance.
- E) Public hearings are scheduled upon receipt of an application and are held at:
 - Marcellus Village Hall
 - 6 Slocombe Avenue
 - Marcellus, NY 13108
- F) Applicants or their agents are required to attend the public hearing, ready to prove the need for the granting of the variance or the purpose of the interpretation. See guidelines for variance information.
- G) Applications for front yard variances within 500 feet of a county road or park must be sent to Onondaga County Planning for review before the Zoning Board of Appeals can act on the application.

For additional information, please contact the Code Official at: (315) 673-3112

VILLAGE OF MARCELLUS

6 Slocombe Avenue, Marcellus, NY 13108

(315) 673-3112 / Fax: (315) 673-3217

ZONING APPEAL/ INTERPRETATION APPLICATION

All applicable sections of this application must be completed - incomplete applications will be returned.

Applicant Name: _____ Day Time Phone: _____

Applicant Address: _____ E-mail: _____

The undersigned hereby makes application for: () Area Variance () Use Variance () Interpretation

Complete this Section for an Area or Use Variance:

The undersigned hereby appeals the decision of the Code Official whereby he/she did: () Grant () Deny

Under Zoning Law: Article: _____ Section: _____ Subsection: _____ Paragraph: _____

Owner Name: _____ Project Address/ Tax Map #: _____

Permit Type: _____ Permit Number: _____ Dated: _____

Description of project: _____

Basis for requesting an Area Variance (Check all that apply):

- () An undesirable change will NOT be produced in the character of the neighborhood or a detriment to nearby properties will NOT be created by the granting of the area variance;
- () The benefit sought by the applicant CANNOT be achieved by some method, feasible for the applicant to pursue, other than an area variance;
- () The requested area variance is NOT substantial;
- () The proposed variance will NOT have an adverse effect of impact on the physical or environmental conditions in the neighborhood or district; and
- () The alleged difficulty was NOT self-created

Basis for requesting a Use Variance (Check all that apply):

- () The applicant cannot realize a reasonable return. Provided that lack of return is substantial as demonstrated by competent financial evidence;
- () The alleged hardship relating to the property in question is unique, and does not apply to a substantial portion of the district or neighborhood;
- () The requested use variance, if granted, will not alter the essential character of the neighborhood; and
- () The alleged hardship has NOT been self-created.

Complete this Section for a Zoning Law Interpretation:

I hereby request an interpretation of the Zoning Law. Reason for interpretation: (provide on separate page)

Article: _____ Section: _____ Subsection: _____ Paragraph: _____

Applicant Certification: I hereby certify that this application is true and correct to the best of my knowledge.

Consent to Enter Property: By signing this application I agree to allow representatives of the Village access to the above referenced property at reasonable times for the purpose of obtaining information relevant to the processing of this application.

SIGNATURE OF OWNER OF PREMISES: X

DATE:

Official Use Only Official Use Only Official Use Only Official Use Only Official Use Only

Application Number: _____ Date Completed: _____

Action of the Zoning Board: _____ Granted () Denied () Date: _____

Chairperson Signature: _____ Date: _____