**Town of Clifton Park**  
Zoning Board of Appeals

One Town Hall Plaza | Clifton Park, New York 12065 | (518) 371-6702 | FAX: (518) 383-2668  
Building & Development  
building@cliftonpark.org

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**APPEAL OF ADMINISTRATIVE DETERMINATIONS**

(1) An appeal to the Zoning Board of Appeals for review of administrative determinations pursuant to Section 109(c)1 of Town Code shall be made to the Zoning Enforcement Officer. The Zoning Enforcement Officer shall forthwith transmit to the Board of Appeals all papers constituting the record upon which the action appealed from was taken.

(2) The Application  
   
   **-- ALL attached forms must be completed.**

   A. The first page of the variance application packet is similar to a building permit application that will, as part of the variance process, be denied. The reason for the denial will be determined and noted by the Zoning Enforcement Officer and the packets will then be forwarded to the Zoning Board of Appeals.

   B. NAMES and addresses of all current ADJACENT/adjoining/abutting property owners must be provided at time of submission. **Failure to provide these names will result in unnecessary delay.**

   C. The applicant shall provide **THIRTEEN (13) SEPARATE COLLATED PACKETS**, each containing completed copies of ALL FORMS in this application packet, along with plot plans or site plans, and any accompanying documentation or narrative.

(3) Prior to taking action on an application, the Zoning Board shall refer all applications for properties which fall under Section 239-m of the General Municipal Law to the County Planning Board for a determination. Generally, these would include properties within 500 feet of a town boundary, a county or state park or other recreational area, thruway or other controlled-access highway or right-of-way, or any county-or state-owned land in which a public building or institution is situated. **Applicants should be aware that the County Planning Board meets once a month and this may cause a delay in scheduling the application for the Zoning Board agenda.**

(4) When the application is placed on the Zoning Board agenda, the **Secretary of the Zoning Board** will notify the applicant of the date and time.

(5) **FEES:** Payable at time of submission --  
   
   $150.00 residential applications  
   $300.00 commercial applications

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*Updated 2/2016*
APPLICATION FOR PERMIT REQUIRING REVIEW BY ZONING BOARD OF APPEALS
APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit and Zoning Permit pursuant to the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described.

Applicant's Name
Address
Zip
Phone or
Property Location

Owner's Name
Address
Zip
Phone or
Sec Block Lot

EXISTING Use
EXISTING Zoning Classification
Lot Size Area
EXISTING Building Size

INTENDED Use/Describe

INTENDED
Frontage Ft
Front Yard Depth Ft
Right Side Yard Width Ft
Left Side Yard Width Ft
Rear Yard Depth Ft
Building Height Ft Stories

ADJACENT PROPERTY OWNER NAMES (not addresses): Failure to provide names will result in unnecessary delay
North
South

PROJECT DESCRIPTION (Briefly describe the proposal):

FEE: ____________________, payable to Town of Clifton Park

X Signature of Owner, Applicant or Agent

Clearly Print Name of Owner, Applicant or Agent:

(To be completed by Agency)
This application is hereby disapproved and forwarded to the Zoning Board of Appeals for the reason(s) cited below:

Dated: ____________________

X Zoning Enforcement Officer
APPLICATION FOR APPEAL OF ADMINISTRATIVE DETERMINATION

NOTE - Orders, requirements, decisions, interpretations, determinations. The board of appeals may reverse or affirm, wholly or partly, or may modify the order, requirement, decision, interpretation or determination appealed from and shall make such order, requirement, decision, interpretation or determination as in its opinion ought to have been made in the matter by the administrative official charged with the enforcement of such ordinance or local law and to that end shall have all the powers of the administrative official from whose order, requirement, decision, interpretation or determination the appeal is taken. NYSTL § 267-b (1).

1. Applicant. __________________________ Property Location: __________________________ __________________________ __________ /2015
   Street Address Date of Decision

2. Project Description (Briefly describe the proposal)

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. INTERPRETATION SUBMISSION REQUIREMENTS (Explain the nature of the requested interpretation.)

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

4. Explain why the order, determination or interpretation appealed from should be overturned.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

   (If more space is needed, please attach extra sheets to this form.)

5. APPLICANT CERTIFICATION
   I hereby depose and say that all of the above statements and the statements contained in the attached submission are true to the best of my knowledge and belief.

   __________________________
   Clearly Print Applicant's Name

   __________________________
   Applicant Signature

   Sworn to before me this __________ day of ________________ 20___.

   __________________________
   Notary Public Signature

Updated 2/2016