

**CITY OF LOCKPORT, NEW YORK  
ZONING BOARD OF APPEALS APPLICATION**

\_\_\_\_\_ **AREA VARIANCE**

\_\_\_\_\_ **USE VARIANCE**

*It is the responsibility of the applicant to complete this form in its entirety, including all required attachments, and as precisely as possible. Failure to submit a complete application may result in a delay in being placed on a Zoning Board of Appeals agenda or a delayed decision from the Zoning Board.*

PROPERTY ADDRESS: \_\_\_\_\_

**APPLICANT INFORMATION**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**OWNER INFORMATION**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

RELATIONSHIP OF APPLICANT TO PROPERTY:

\_\_\_ CONTRACT PURCHASER    \_\_\_ CONTRACTOR    \_\_\_ OTHER

\_\_\_ ARCHITECT/ ENGINEER    \_\_\_ LESSEE

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**OFFICE USE ONLY**

RECEIVED BY: \_\_\_\_\_ DATE/TIME RECEIVED: \_\_\_\_\_

FEE AMOUNT: \_\_\_\_\_ CHECK/MONEY ORDER#: \_\_\_\_\_

ZONING: \_\_\_\_\_ FEE TRANSMITTAL DATE: \_\_\_\_\_

AGENDA DATE: \_\_\_\_\_ DEADLINE DATE: \_\_\_\_\_

COUNTY TAX MAP IDENTIFICATION NUMBER: \_\_\_\_\_

**BRIEF HISTORY OF PROPERTY** (historic use of property, ownership history, etc.)

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**DESCRIPTION OF PROPOSED ACTION** (include specific use proposed, hours, # of employees, etc.)

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**VARIANCE STANDARDS (USE VARIANCE)**

Applications for use variances must be based on alleviating a clearly demonstrable hardship, as opposed to a special privilege of convenience sought by the owner. Furthermore, the hardship must be peculiar to the land or building and must not generally apply to land throughout the neighborhood. An example of a property that may potentially have a case for a used variance is a corner store in a predominantly residential neighborhood. If the building has large plate glass windows, a parking lot and loading docks in the rear, it would be extremely costly to convert the building to residential uses to comply with existing zoning regulations.

**VARIANCE STANDARDS (AREA VARIANCE)**

Applications for area variances must be based on some extraordinary topographic condition or other physical condition inherent in the parcel (for example: exceptional narrowness, shallowness, shape or area). This condition must prohibit or unreasonably restrict the use of the land and/or building. One example of special condition: A utility right-of-way cutting through the rear half of several properties within a larger neighborhood limiting the buildable area of those properties, thereby requiring variances for rear and side yard setbacks for those particular property owners to construct new garages or sheds.

**DESCRIPTION OF HARDSHIP** (describe the features or conditions of the property that restrict reasonable use of the property under current zoning regulations)

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Describe how the requested variance will not alter the character of the larger neighborhood or impact adjacent properties:

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**APPLICATION ATTACHMENTS**

To ensure appropriate and timely review of the application, please provide the following additional documentation in support of the application. Failure to provide all of the applicable materials listed below may result in a delay in scheduling the application for review by the Zoning Board of Appeals.

- \_\_\_ \$150 application fee (cash or checks payable to the City of Lockport)
- \_\_\_ Detailed site plan (10 copies)
- \_\_\_ Photographs of existing conditions
- \_\_\_ Property survey (10 copies)

**APPLICANT/OWNER AFFIRMATION**

I, THE UNDERSIGNED, DO HEREBY AFFIRM THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND I FURTHER UNDERSTAND THAT INTENTIONALLY PROVIDING FALSE OR MISLEADING INFORMATION IS GROUNDS FOR IMMEDIATE DENIAL OF MY APPLICATION.

FURTHERMORE, I UNDERSTAND THAT I (OR A DESIGNATED REPRESENTATIVE) MUST BE PRESENT AT THE MEETING TO REPRESENT THE APPLICATION AND RESPOND TO ANY QUESTIONS FROM THE ZONING BOARD OF APPEALS MEMBERS.

\_\_\_\_\_  
Signature (Applicant)

\_\_\_\_\_  
Date

**IF APPLICANT IS NOT THE OWNER OF RECORD FOR SUBJECT PARCEL:**

I, THE UNDERSIGNED, HEREBY AFFIRM THAT I AM THE OWNER OF RECORD FOR THE SUBJECT PARCEL AT THE TIME OF APPLICATION. FURTHERMORE, I AM FAMILIAR WITH THE REQUEST BY THE APPLICANT AND AUTHORIZE SAID APPLICANT TO REPRESENT THE INTEREST OF THE OWNER (S) IN FURTHERANCE OF THE REQUEST.

\_\_\_\_\_  
Signature (Owner)

\_\_\_\_\_  
Date

Regular meetings of the Zoning Board of Appeals are generally held on the 4<sup>th</sup> Tuesday of every month. The meetings are held at 6:00 P.M. in the Common Council chambers on the first floor of City Hall. Applicants will receive a reminder notice in the mail prior to the meeting.

Pursuant to Section §190-188(d) of the City of Lockport Zoning Ordinance, property owners within a 200’ radius will be notified of the intent of the applicant and given an opportunity to speak for or against the application.