



TOWN OF SOUTHPORT

1139 Pennsylvania Avenue, Elmira, NY 14904

Variance Procedure

Variance procedure requires a Public Hearing to be held. Procedure on what you will need to do for the Public Hearing will be provided to you. The Town will also post a sign on the variance property stating the date and time of the Public Hearing. It will take at least two meetings before you will have the Board of Appeals decision. There is no guarantee your variance will be granted. If your Variance is granted, you may also be required to go before the Planning Board for Site Plan Review. Code Enforcement will provide you with all information needed.

If the Variance application is approved, a Building Permit is required for any construction, renovations, or alterations. ALL commercial projects will require prints signed by a Licensed Architect or Engineer. ALL other projects costing \$20,000 and over will require prints signed by a Licensed Architect or Engineer. Discuss your project fully with the Code Enforcement Officer.

1. Write a detailed letter to the **Board of Appeals** explaining your request. Include answers to all required Questions.
2. Fill out and sign the attached State Environmental Assessment (SEQR) form.
3. Read, sign and date the Acknowledgement Sheet.
4. Submit a property survey performed by a Licensed Surveyor depicting all Bulk & Density requirements and actual dimensions. Major projects will require full Site Plan drawings. Discuss with Code Enforcement Officer.
5. If you do not own the property, provide a letter from the Owner giving you permission for your project. If you are buying the property, provide copy of purchase offer agreement (cost may be redacted).
6. Application fee: **\$100.00 Residential** **\$150 Commercial** Make check payable to "Town of Southport".

Submit all paperwork to our office 10 days prior to the Board of Appeals meeting _____

(Incomplete Applications will not be heard. Late Applications will be put on the next Agenda.)

First meeting _____ Wednesday at 7:00 PM at the Town Hall.

(You or your representative must attend all meetings.)

****Some applications may need to be referred to the Chemung County Planning Board****

I/we hereby certify that I/we have read the instructions and received a copy. I/we understand that a provision of laws and ordinances covering this application will be complied with whether specified or not. Instructions specified here do not presume to give authority to violate or cancel provisions of any other law or local law regulating this application and/or construction or performance of construction relating to this application. I/we understand that I/we cannot operate or start the project applied for herein until such time as the Town of Southport grants approval and all necessary permits are secured.

Applicant signature _____ Date _____

Address _____

Phone _____ Email address _____

Area Variances

- A. The Zoning Board of Appeals, on an appeal from a decision or determination of the Code Enforcement Officer, shall have the power to grant Area Variances as defined herein.
- B. In making the determination, the Zoning Board of Appeals shall take into consideration the benefit to the applicant, if the Area Variance is granted, as weighed against the detriment to the health, safety, and general welfare of the neighborhood or community by such grant. In making such determination, the Board of Appeals shall consider the following:
- (1) Whether an undesirable change will be produced in the character of the neighborhood or community or a detriment to nearby properties will be created by the granting of the Area Variance;
 - (2) Whether the benefit sought by the Applicant can be achieved by some method, feasible for the applicant to pursue, other than an Area Variance;
 - (3) Whether the requested Area Variance is substantial;
 - (4) Whether the proposed Area Variance will have an adverse affect or impact on the physical or environmental conditions in the neighborhood or District;
 - (5) Whether an alleged difficulty of compliance with the zoning requirement was self-created, which is relevant to the decision but shall not necessarily preclude the granting of the Area Variance.

ACKNOWLEDGEMENT

The above information explains what the Board of Appeals will be considering on an Area Variance application.

I acknowledge receiving a copy of this explanation sheet and that it is my responsibility to provide written proof in response to the required questions prior to the Informational Hearing and discuss with the Board of Appeals how my application for an Area Variance complies with all of the issues listed above. I understand that a Public Hearing will not be scheduled without all required information submitted.

Applicant Signature

Date

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

| Part 1 – Project and Sponsor Information | | | |
|--|--|--------------------------------|---------------------------------|
| Name of Action or Project: | | | |
| Project Location (describe, and attach a location map): | | | |
| Brief Description of Proposed Action: | | | |
| Name of Applicant or Sponsor: | | Telephone: | |
| | | E-Mail: | |
| Address: | | | |
| City/PO: | | State: | Zip Code: |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2. | | NO <input type="checkbox"/> | YES <input type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: | | NO <input type="checkbox"/> | YES <input type="checkbox"/> |
| 3. a. Total acreage of the site of the proposed action? _____ acres | | | |
| b. Total acreage to be physically disturbed? _____ acres | | | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres | | | |
| 4. Check all land uses that occur on, are adjoining or near the proposed action: | | | |
| <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) | | | |
| <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): | | | |
| <input type="checkbox"/> Parkland | | | |

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| 5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan? | NO | YES | N/A |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____ | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____ | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____ | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____ | NO | YES | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |

| | | |
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| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest Agricultural/grasslands Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban Suburban | | |
| 15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered? | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is the project site located in the 100-year flood plan? | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____ | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | | |
| 18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____ | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____ | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____ | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____ | | |