

**TOWN OF LYSANDER**  
**ZONING BOARD OF APPEALS**

**APPLICATION**

**Application Number** \_\_\_\_\_ **Date** \_\_\_\_\_ **Fee** \_\_\_\_\_

**Type of Application**

- Special Use Permit
- Permit for Temporary Structure/Occupancy (explain need on page 2)
- Extension of Permit for Temporary Structure/Occupancy (explain need on page 2)
- Appeal of Decision made by the Code Enforcement Officer
  - Area Variance (provide details on page 2)
  - Use Variance (use requested \_\_\_\_\_)
- Informal Interpretation (describe issue on page 2)
- Other \_\_\_\_\_

**Applicable Sections of the Zoning Ordinance**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Review by Onondaga County  
Planning Board**

Required  Not Required

**Review by Town of Lysander  
Planning Board**

Required  Not Required

**Applicant**

Name \_\_\_\_\_  
Street Number \_\_\_\_\_ Municipality \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Property**

Street Number \_\_\_\_\_ Municipality \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Tax Map Number \_\_\_\_\_  
Owner (if different than applicant)  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Zoning District \_\_\_\_\_ Overlay Control \_\_\_\_\_  
Size of Property \_\_\_\_\_ acres  
Existing Structures/Uses  Conforming  Nonconforming

**Need and Description**

For temporary permits, explain why a permit is needed. For area variances, attach a copy of a current survey and any drawings or plans - if reducing or enlarging documents that **do not** include a graphic representation of scale indicate the percentage of reduction or enlargement. Attach additional pages if necessary.

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**Area Variances**

- Residential
- Nonresidential
- Principal Structure
- Accessory Structure

- Front Yard Setback  
Required Setback \_\_\_\_\_ feet  
Variance Requested \_\_\_\_\_ feet
- Individual Side Yard Setback  
Required Setback \_\_\_\_\_ feet  
Variance Requested \_\_\_\_\_ feet
- Lot Dimensions/Coverage/Floor Area  
Type \_\_\_\_\_  
Requirement \_\_\_\_\_  
Variance Requested \_\_\_\_\_

- Rear Yard Setback  
Required Setback \_\_\_\_\_ feet  
Variance Requested \_\_\_\_\_ feet
- Total Side Yard Setback  
Required Setback \_\_\_\_\_ feet  
Variance Requested \_\_\_\_\_ feet
- Other  
Type \_\_\_\_\_  
Requirement \_\_\_\_\_  
Variance Requested \_\_\_\_\_

**Alternatives**

Explain in detail why the proposed action cannot be conducted where a variance would not be required, or where a smaller variance would be required (attach additional pages if necessary).

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Sworn this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Applicant/Representative Signature

\_\_\_\_\_  
Owner/Representative Signature