

PETITION FOR A CHANGE OF ZONE

*Please read
instructions!!*

*Incomplete
applications will
NOT be
processed.*

PETITION FOR CHANGE OF ZONE

INSTRUCTIONS TO PETITIONER

1. Submit original and four (4) copies of the Petition (a total of 5 (five) to:

Commissioner of Planning and Development
Town of Clay
4401 Route 31
Clay, New York 13041

2. The original application must be signed by the owner of the property, or if the applicant is not the owner, the attached form stating that the owner “*agrees to and joins in*” the application must be filled in and attached to each petition.
3. Attach a copy of the *legal description* the *Disclosure Affidavit*, the *environmental assessment form*, a *zone change map*, and *survey* of the subject premises, prepared by a licensed land surveyor, to each petition.
4. Upon request of the Commissioner of Planning and Development, submit additional maps or surveys sufficient to delineate the boundaries and location of the subject premises on the Town Zoning Map.
5. The **\$ 400.00** administrative fee must be received by the Commissioner of Planning and Development before the Petition will be accepted for processing.
6. The Petitioner’s failure to adequately complete this application or to provide requested data will result in delays in processing the request for change of zone.
7. Provide seven (7) copies of the plot plan for Board Members the night of the Public Hearing.
PLEASE NOTE: Provide 7 additional copies for the Planning Board, the night of their meeting.
8. An electronic copy (pdf) of the final zone change map (disk or email) must be submitted.

(REMOVE THESE INSTRUCTIONS BEFORE SUBMITTING PETITION)

NOTE: ALL SURVEYS, MAPS, ETC., THAT ARE SUBMITTED MUST BE FOLDED TO 8 1/2” X 14” MAXIMUM (except any copies provided the night of the public hearing).

TOWN OF CLAY - SCHEDULE OF FEES

CHAPTER 105

| A. TOWN CLERK'S OFFICE | | <u>FEE</u> |
|---|--|-------------------------------------|
| 1. | TOWN MAPS | \$ 3.00 |
| 2. | ZONING ORDINANCE (Copy) | \$ 20.00 |
| 3. | ZONING MAP (Whole) | \$ 20.00 |
| 4. | ZONING MAP (Half) | \$ 10.00 |
| 5. | DRAINAGE & SEWER STANDARDS | \$ 5.00 |
| 6. | COPIES (per page) | |
| | ♦ Small | \$.25 |
| | ♦ Ledger | \$.50 |
| | ♦ Wide format | \$ 3.00 |
| 7. | CERTIFICATION | \$ 1.00 |
| 8. | ZONING INFORMATION RESEARCH | \$ 30.00 |
| B. PLANNING & DEVELOPMENT DEPARTMENT | | <u>FEE</u> |
| 1. | ZONE CHANGE APPLICATIONS | \$ 400.00 |
| 2. | VARIANCES | |
| | ♦ Residential | \$ 200.00 |
| | ♦ Commercial | \$ 400.00 |
| | ♦ After construction | \$ Double the fee |
| 3. | SPECIAL PERMIT | \$ 300.00 |
| 4. | Interpretation | \$ 200.00 |
| 5. | SITE PLANS (<i>& Special Permits requiring Site Plan review</i>) * | |
| | ♦ 3 acres or less | \$ 900.00 |
| | ♦ Over 3 acres | \$ 1500.00 |
| 6. | AMENDED SITE PLANS * | \$ 600.00 |
| | <i>Amendment of site plans which are proposed within five (5) years of the original site plan approval, which in the opinion of the Commissioner of Planning & Development, would not involve any changes that could adversely impact adjacent properties.</i> | |
| 7. | ADMINISTRATIVE SITE PLAN | \$ 75.00 |
| 8. | PRELIMINARY PLATS* | \$ Base fee: \$200 + 50 per lot. |
| 9. | FINAL PLATS* | \$ 300.00 |
| 10. | ADMINISTRATIVE SUBDIVISION | \$ 75.00 |
| 11. | ADDITIONAL ADVERTISING | \$ As per cost |
| 12. | ADDITIONAL ENGINEERING FEES INCURRED BY THE TOWN | \$ As per cost |
| 13. | AFTER HOURS INSPECTION FEE | \$ 75.00 |

***NOTE:** *For a commercial site plan or residential subdivision (with no proposed public utilities) requiring the preparation of a Stormwater Pollution Prevention Plan, an additional \$1500 will need to be deposited with the Town to cover engineering fees for the review of the Stormwater Pollution Prevention Plan.*

ENVIRONMENTAL ASSESSMENT FORM

MUST BE SUBMITTED WITH ALL APPLICATIONS

All Commercial Projects -Use **Full** Environmental Assessment Form

All Industrial Projects - Use **Full** Environmental Assessment Form

Residential Projects -Over 10 Acres -Use **Full** Environmental Assessment Form

Residential Projects -Under 10 Acres -Use **Short** Environmental Assessment Form

Town Board Case # _____

Planning Board Case # _____

Tax Map # _____ - _____ - _____

Routing (1) Commissioner of Planning & Development

(2) Town Clerk

(3) Town Board Attorney

(4) City County Planning

(5) Town Supervisor

TOWN OF CLAY
PETITION FOR CHANGE OF ZONE

PROJECT NAME _____

PROJECT LOCATION _____

PROJECT DESCRIPTION _____

NAME OF APPLICANT _____

Mailing Address _____

Email _____ Phone _____

PROPERTY OWNER(s) (if not applicant) _____

Mailing Address _____ Phone # _____

PERSON/FIRM REPRESENTING APPLICANT _____

(if applicable, please check one: architect, engineer, attorney)

Mailing Address _____

Email _____ Phone _____

LAND USE:

Current Use of Land _____ Total Acres _____

Present Zoning: _____

Requested Zoning: _____

ACTION ON PETITION

- | | |
|---|--------------|
| 1. Date Petition and Fee received by Commissioner: | _____ 20____ |
| 2. Planning Board Action: (a) Date of Filing | _____ 20____ |
| (b) Date of Hearing | _____ 20____ |
| (c) Date of Recommendation | _____ 20____ |
| 3. Date Petition referred to County Planning | _____ 20____ |
| 4. Date recommendation received from County Planning | _____ 20____ |
| 5. Date of Public Hearing to be <i>called</i> by the Town Board | _____ 20____ |
| 6. Date of Public Hearing to be <i>heard</i> by the Town Board | _____ 20____ |
| 7. Date of Town Board decision on Petition | _____ 20____ |
| Application <i>granted</i> () <i>denied</i> () | |
| 8. Date of notification to Petitioner | _____ 20____ |

Commissioner of Planning and Development

TO THE TOWN BOARD OF THE TOWN OF CLAY:

The Petition of _____, residing at _____

respectfully states:

1. The Petitioner is the (owner) (purchase under contract) of certain property located at: _____ in the Town of Clay. (List the street address of the subject premises.)

2. The name of the school district in which the subject premises is located is:

3. The Petitioner requests that the Zoning Ordinance of the Town of Clay, be amended, and the Zoning Map of the Town of Clay be to reclassify and change the zone of the subject premises from _____ District to _____ District.

4. The Petitioner hereby declares, for the purpose of reliance thereon by the Town of Clay, that the full particulars of the Petitioner's proposed use of the subject premises for the next five (5) years, if this change of zone is granted, are as follows: (Preliminary plat or site plan will be required upon request by the Planning Board.)

5. The proposed change of zone will not be materially detrimental to the public welfare nor to other property in the neighborhood because:

6. There are no nonconforming uses or structures on the subject premises and have been none during the last six (6) months preceding this Petition, except as follows: (Specify exact date when nonconforming use or structure was commenced.)

7. The subject premises (are) (are not) located within 500 feet of the town line of the Town of Clay.

8. The subject premises (are) (are not) located within 500 feet of the boundary of the Village of North Syracuse.

9. The subject premises (are) (are not) located within 500 feet of any existing or proposed County or State park or other recreation area.

10. The subject premises (are) (are not) located within 500 feet of any right-of-way of any existing or proposed County or State parkway, thruway, expressway, road or highway.

11. The subject premises (are) (are not) located within 500 feet of any existing or proposed right-of-way of any stream or drainage channel owned by the County or for which the County has established channel rights.

12. The subject premises (are) (are not) located within 500 feet from the existing or proposed boundary of any County or State owned land on which a public building or institution is situated.

13. The proposed zone change (does) (does not) affect property within the protectively zoned area of a housing project authorized under the Public Housing Law.

14. The Petitioner hereby consents to Board action reverting the subject premises to its original zoning classification if the Town Board subsequently determines that any statement contained in this Petition or any statement made by the Petitioner at the public hearing called to consider the said Petition is materially false and was not made in good faith, the Petitioner further consents to Board action reverting the subject premises to its original zoning classification in the event that the Petitioner fails to abide by any conditions or restrictions contained herein or imposed hereafter by the Town Board.

15. Petitioner further waives any or all rights otherwise afforded to him under provisions of The Zoning Ordinance of the Town of Clay upon the granting of the change of zone requested herein.

Dated: _____, 20____

Dated: _____, 20____

(Individual Signature)

(Individual Signature)

(Entity Name)

(Entity Name)

By: _____
(Officer) (Title)

By: _____
(Officer) (Title)

(Mailing Address of Applicant)

(Mailing Address of Applicant)

Telephone Number _____

Telephone Number _____

NOTE: It is desirable to obtain the signatures of owners of adjacent property certifying that they have no objection to the reclassification of the zone as applied for in this Petition.

WE, the undersigned owners of the property adjacent to the property legally described in the PETITION FOR CHANGE OF ZONE, hereby certify that we do not object to the granting of this Petition.

Signature

Address

Lot

Block

Tract

TOWN OF CLAY

DISCLOSURE AFFIDAVIT

This affidavit is a part of and must be completed and attached to every application, petition, request submitted for a variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit.

STATE OF NEW YORK)
COUNTY OF ONONDAGA) ss.:
 OF)

I. _____, being duly sworn, deposes and says that (s)he is:

(applicant, petitioner, corporation officer, property owner, etc.)

II. That deponent has read and is familiar with the provisions of the General Municipal Law, Section 809 which states:

- A. Every application, petition or request submitted for a variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit, pursuant to the provisions or any ordinance, local law, rule or regulation constituting the zoning and planning regulations of a municipality shall state the name, residence and the nature and extent of the interest of any state officer or any officer or employee of such municipality is a part, in the person, partnership or association making such application, petition or request (hereinafter called the applicant) to the extent known to such applicant.
- B. For the purpose of this action an officer or employee shall be deemed to have an interest in the applicant when (s)he, his/her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:
 - 1) is the applicant, or
 - 2) is an officer, director, partner or employee of the applicant, or
 - 3) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or
 - 4) is a party to an agreement with such an applicant, express or implied, whereby (s)he may receive any payment or other benefit, whether or not for services rendered, or contingent upon the favorable approval of such application, petition or request.
- C. Ownership of less than five percent (5%) of the stock of a corporation whose stock is listed on the New York or American Stock Exchanges shall not constitute an interest for the purposes of this section.
- D. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

III. That no Town of Clay officer, employee or a relative of either, as defined in Section 809 General Municipal Law has any interest in this application.

-OR-

If a Town of Clay officer, employee or relative of either as defined in Section 809 General Municipal law has any interest in this application, the full particulars are provided on an attached sheet.

Date: _____, 20____.

Date: _____, 20____.

(Individual Signature) (Print Name)

(Individual Signature) (Print Name)

(Entity Name)

(Entity Name)

By (Officer) (Title)

By (Officer) (Title)

(Mailing address of applicant)

(Mailing address of applicant)

(Telephone Number) (Fax Number)

(Telephone Number) (Fax Number)

ACKNOWLEDGEMENTS

STATE OF NEW YORK)
) SS:
COUNTY OF ONONDAGA)

On this _____ day of _____ in the year **20**____, before me, the undersigned, a notary public in and for said state, personally appeared _____, _____, and _____ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within Petition and acknowledged to me that he/she/they executed the same in her capacity, and that by his/her/their signature(s) on the Petition, the individual or the persons upon behalf of which the individual acted executed the instrument.

Notary Public

PETITION FOR A ZONE CHANGE:

Date _____

(I / We) _____ being owner of
premises known as:

ADDRESS(ES):

TAX MAP NUMBER(S) _____ . - _____ - _____
_____ . - _____ - _____
_____ . - _____ - _____

Agree to and join in the application of:

APPLICANT NAME:

FOR A CHANGE OF ZONE TO:

FOR THE PURPOSE OF:

SIGNATURE _____