TOWN OF WATERFORD BUILDING DEPARTMENT Town Hall 65 Broad Street Waterford, New York 12188

ZONING VERIFICATION

APPLICATION FOR ZONING VERIFICATION FOR ANY PROJECT OTHER THAN A SUBDIVISION OF LAND

(SUBMIT TO TOWN OF WATERFORD BUILDING DEPARTMENT)

IF YOU PROPOSE TO CREATE A RESIDENTIAL OR COMMERCIAL SUBDIVISION DO NOT USE THIS FORM - ANOTHER FORM IS AVAILABLE FOR THAT PURPOSE

Any proposal which requires a Town of Waterford Building Permit or an approval issued by the Town of Waterford Planning Board/Department must first be reviewed by the Zoning Enforcement Officer of the Town of Waterford to determine whether the proposal violates any provision(s) of the Town of Waterford Zoning Law. The officer's determination is based upon the information submitted on this form and such determination is subject to review and change if the project is modified at a subsequent date. The officer reserves the right to request further information if it is deemed necessary. A disapproval of the application by the zoning officer means the project, as designed, cannot proceed for the reasons provided. If you, the applicant, disagree with the zoning officer's determination you may appeal said determination to the Town of Waterford Zoning Board of Appeals. The applicant further agrees and understands that a new "Application for Zoning verification' may have to be submitted if the applicable zoning laws change before the proposed action is completed.

1. GENERAL INFORMATION:

SITE IN	ORMATI	ON			
Address	f site of pi	roposed act	ion:		
Number	Street		2	Zip Code	
To	wn Tax M	ap No.	Lot #	Block #	
<u> </u>			<u> </u>		
APPLICA	NT INFO	RMATION	V		
	Applicant:				
Address:	Тррпсанс.				
Address:	Number	Street		7.	ip Code
Tolonhon		Work:	Home:	Z.	ip Code
Telephone #s:		WOLK:	nome:		
COMPA	TE BEB a o	N DIEGE	T A TO YOU		
CONTAC	T PERSO	N INFORM	MATION		
Name of Contact:					
Address:					
	Number	Street		Z	ip Code
Telephon	e #s:	Work:	Home:		
			·		
PROPER	TY OWN	ER INFOR	MATION		
Name of Owner:					
Address:					
	Number	Street		Zi	ip Code
Telephon	e #s•	Work:	Home:		

2. APPLICANT'S PROPOSED ACTION: a) Describe Present Use (If vacant, existing building, describe last prior use) Is the Proposed Use: commercial in character residential in character b) Is the proposed action a: New Building Addition Renovation Accessory Structure: garage, shed, pool, other: Change of Use (New Use: Change of Business Type (Specify:) Other type (Specify: Describe the proposed use in detail: Yes No Is the structure handicapped accessible? If not, will improvements be required to make it accessible? ☐ Yes ☐ No Gross Floor Area: Existing Proposed c) Total: zoning district. (refer to Town of Waterford Zoning ordinance. d) Parcel is located in a Copies are available for purchase from the Town Clerk) e) Are there any known Deed Restrictions on parcel? (check deed) ☐ Yes ☐ No

f)	Will you be installing/moving/replacing any new or existing signs? If yes, explain:	Yes No	

3. SITE STATISTICS:

If Yes, length of frontage: feet

Provide a sketch of proposed construction with all pertinent dimensions labeled.

	To the distriction of proposition with the personnel and the control of the contr						
	Area of parcel:	acres or	sq ft.				
	s this a corner lot? Y	res No es No					
Does the parcel front upon a developed public highway? Yes No							

inches

Building Setbacks:	Existing		Proposed		
Front Yard Depth:	Feet	Inches	Fe	eet	Inches
Left Side Yard	Feet	Inches	Fe	eet	Inches
Right Side Yard:	Feet	Inches	Fe	eet	Inches
Rear Yard Depth	Feet	Inches	Fe	eet	Inches
Existing Building Height (at peak)	Feet	Inches	Stories		
Proposed Height (at peak):	Feet	Inches	Stories		
Foundation Type:	Full	Partial 🗌 Slab			·

Dimensions of building at foundation (footprint)	Existing	Proposed	Total
Length:			
Width:			
Area (square Feet):			

Name STATE OF SS: Mailing Address **COUNTY OF** Signature being duly sworn deposes and says that he is the applicant above named. He/She is the said owner/applicant, and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith. Sworn before me this day of 20 State of New York) County of _____) Notary Public, If applicant is **other** than the owner of the property, the Applicant must sign below. Name STATE OF SS: Mailing Address **COUNTY OF** Signature being of duly sworn deposes and says that he/she is the applicant above named. He/She is the _____ of said owner or owners, and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith. Sworn before me this day of 20 New York) State of County of) Notary Public, If Applicant is not the Owner: Owner must sign to acknowledge proposed development: Owner Date:

If applicant is the **owner** of the property, the **owner** must sign below.

FOR OFFICIAL USE ONLY

I,	_	own of Waterford do hereby find that the
proposed action as described above Zoning law(s) of the Town of Waterford	•	hereto, IS IN ACCORDANCE with the
Zonnig law(s) of the Town of Waterix	oru.	
Signature:		Date Approved:
action as described above, and in any	attachments hereto, IS NOT	of Waterford do hereby find that the proposed IN ACCORDANCE with the Zoning Law(s) date, subject to the following conditions;
Signature:		_ Date Disapproved
Parcel in/near a flood zone? Parcel in/near a wetland? Is a protected watercourse on/near the Zoning variance ever been granted at Is the existing use or site non-conform If so, was it legally established?	property? Yes No	
Town tax map no		
TO THE APPLICANT:		
You may now file a:		
☐ Building Permit Application☐ Site Plan Review Application☐ Application for a Zoning Va	on	