

**TOWN OF CONQUEST  
APPLICATION TO DWELLING AND STRUCTURE LAW  
BOARD OF APPEALS**

**Part A: Please fill in all information in this section.**

**Applicant's Name** \_\_\_\_\_

**Applicant's Address** \_\_\_\_\_

**Applicant's Contact Phone** \_\_\_\_\_

**Is applicant the owner of the property?**  Yes  No  
**(If no, please enter owner's name, address and phone)**

**Owner's Name** \_\_\_\_\_

**Owner's Address** \_\_\_\_\_

**Owner's Contact Phone** \_\_\_\_\_

**Property Address (If different)** \_\_\_\_\_

**Property's Tax Map ID#** \_\_\_\_\_

**Part B: Please Indicate the Variance Being Requested:**

Type of Area Variances	Amount of Variance Requested
Minimum Lot Size (1 acre or 43,560 sq. ft.)	_____
Minimum Lot Width (150 ft.)	_____
Multiple Family Lot Size (2 acres + 25,000/additional unit)	_____
Front Setback (75 feet from centerline of road)	_____
Side Setback (25 feet from side lot line)	_____
Rear Setback (25 feet from rear lot line)	_____
Building/Structure Separation (10 feet or greater)	_____
Density per lot (40% maximum)	_____
Other (please describe)	_____
	_____
	_____
	_____

**Part C: Please answer all questions in this section:**

1.) Please describe in detail any changes you propose to make on the property.

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2.) Please explain how you will suffer a significant economic injury unless the variance is granted.

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3.) Please explain why the requested variance will not produce an undesirable change in the character of the neighborhood.

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4.) Please explain why no detriment will be created to nearby properties.

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5.) Please explain the reasons why there is no other feasible method available to you to pursue in order to achieve the benefit you seek other than the requested variance.

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6.) Please explain why this variance is not substantial.

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Please attach sheets of paper if you require further space, clearly indicating which questions you are answering. Remember that it is the sole responsibility of the applicant to provide sufficient information and documentation concerning this application. Because the determination is based solely on information provided to the Board of Appeals, it is to the applicant's benefit to include as much supporting information as possible.

This application, a survey and/or site plan of your property, and the application fee of \$20 must be submitted to the Town of Conquest Town Clerk at 1289 Fuller Road, Port Byron N.Y. 13140. A public hearing must be held concerning your application. You will be sent notification of the time, date and place of the hearing.

The undersigned applicant(s) hereby certifies that the information provided above in the attachments hereto is true and correct and makes said statements knowing that any permit granted under this application may be revoked if it is found that an untrue or incorrect statement was made in this application.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**For Town Use Only**

Date Received \_\_\_\_\_ Fee Received \_\_\_\_\_ Tax Map Number \_\_\_\_\_

Hearing Date \_\_\_\_\_ Date Notification was Sent \_\_\_\_\_

Owner of Record \_\_\_\_\_ Applicable Section of Law \_\_\_\_\_

Variance Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason \_\_\_\_\_

Signed by \_\_\_\_\_ Chairman, Dwelling and Structure Law Board of Appeals

**BOARD OF APPEALS**  
**VARIANCE APPLICATION**  
**TOWN OF CONQUEST, NY**

List the owners of record of all properties adjacent to, and across the road from, the property for which the application is being filed. These parties will be notified by the Town of Conquest prior to the public hearing.

OWNER'S NAME	MAILING ADDRESS

THE APPLICANT'S SIGNATURE BELOW INDICATES THE INFORMATION CONTAINED IN THIS APPLICATION AND ON ANY ACCOMPANYING DOCUMENTS IS TRUE AND ACCURATE, AND THAT ANY ATTORNEY'S FEES OR ENGINEER'S FEES INCURRED BY THE TOWN RELATIVE TO THE REVIEW OF THIS PROJECT SHALL BE PAID BY THE APPLICANT.

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_

Received: \_\_\_\_\_

**Fee is \$50**

Check No.: \_\_\_\_\_

**Please make check payable to:**

Meeting Date: \_\_\_\_\_

**Town of Conquest**

Board Decision: \_\_\_\_\_

TOWN OF CONQUEST  
1289 Fuller Road  
Port Byron, NY 13140  
315-776-4539