



More than a Legend

Village of Sleepy Hollow
Department of Architecture, Land Use Development,
Buildings & Building Compliance
28 Beekman Avenue, Sleepy Hollow, NY 10591
Telephone (914) 366-5101 • Fax (914) 631-0607 • www.sleepyhollowny.gov

REQUIREMENTS TO FILE AN APPLICATION TO THE
ZONING BOARD OF APPEALS

The intent of this document is to assist the applicant with the requirements, process, and documentation necessary to file for an application to the *Village of Sleepy Hollow Zoning Board of Appeals*. **Failure to complete the application in its entirety and/or to provide the information indicated therein will result in rejection of the submission or a delay processing the application.**

1. The Zoning Board of Appeals' ("ZBA") has appellate jurisdiction. An application can only be brought before the ZBA if the applicant is appealing the interpretation or determination of an administrative official charged with enforcing the Code of the Village of Sleepy Hollow.
2. The ZBA has original jurisdiction and the authority to:
 - a. Grant area and use variances;
 - b. Make determinations and/or interpretations of the provisions of the Village of Sleepy Hollow Zoning Ordinance or the Official Zoning Map;
 - c. Grant Special Use Permits for off-site parking areas or joint use parking facilities;
 - d. Permit temporary occupancy and use of a structure in any district for a purpose that does not conform to the regulations for that district.
3. The ZBA can only consider an application/ appeal if it is filed within sixty (60) days of the administrative official's determination.
4. The ZBA cannot consider an application if violations, unrelated to the variances being sought, exist on the property.
5. New York Village Law and the Zoning Code of the Village of Sleepy Hollow govern the substance and procedure of applications to the ZBA. All applicants should be familiar with and comply with these provisions in making their application.
6. The application may be obtained from the Village of Sleepy Hollow Department of Architecture, Land Use Development, Buildings & Building Compliance or on the Village website: www.sleepyhollowny.gov
7. The application forms must be signed before a Notary Public by the person or entity making the application.
8. It is the applicant's responsibility to complete all parts of the application package and provide all required documentation. **INCOMPLETE APPLICATIONS WILL DELAY THE PROCESS OR BE RETURNED.**
9. The application must include the following fees:
 - a. Application: \$350
 - b. Minutes: \$100 per meeting
 - c. Escrow: \$500

Please make all checks payable to the *Village of Sleepy Hollow*. Application fee is **NON-REFUNDABLE**.

10. ZBA meetings are typically held on the third Wednesday of the month, except August, at 8:00 PM at Village Hall. Meeting dates and times are subject to change due to holidays, weather, or scheduling conflicts.
11. Submit (12) copies of the application and all required plans and documents. The maximum format is **24" x 36"**, stapled and folded no larger than **9" x 12"**.

Village of Sleepy Hollow
Zoning Board of Appeals

12. A completed application must be received by 4:30 PM by the 15th day of the month prior to the scheduled ZBA meeting to be considered for the next available agenda.
13. The applicant shall, at the applicant's sole expense, provide written notice by certified mail, return receipt requested, to all owners of property within 200 feet of the property affected by the appeal. The applicant will be provided with a Public Notice and a list of all properties to receive notice.
14. The applicant shall, by affidavit, present satisfactory proof to the Department of Architecture no later than 4:30 PM the Friday prior to the scheduled ZBA meeting that said notices have been duly served.



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ZONING BOARD OF APPEALS APPLICATION: CHECKLIST

An application to the Village of Sleepy Hollow Zoning Board of Appeals will not be considered complete without the following:

Applicant:	Location:		
NO.	DESCRIPTION	REC'D	NA
1.	Application fee – check, or money order in the amount of \$450 (\$350 Application fee plus \$100 minutes fee) made payable to the <i>Village of Sleepy Hollow</i> .	<input type="checkbox"/>	<input type="checkbox"/>
2.	Escrow fee – check, or money order in the amount of \$500 Payable to the <i>Village of Sleepy Hollow</i> .	<input type="checkbox"/>	<input type="checkbox"/>
Twelve (12) identical stapled/ bound packets of the following:			
3.	Determination being appealed (Building Inspectors letter or permit denial).	<input type="checkbox"/>	<input type="checkbox"/>
4.	Completed application signed by the property owner. The property owner may complete the Proxy Statement authorizing an agent or representative to sign the application.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Completed Zoning Compliance Form – completed by a NYS registered architect or professional engineer.	<input type="checkbox"/>	<input type="checkbox"/>
6.	State Environmental Quality Review Act (SEQRA) Short Form, Part 1.	<input type="checkbox"/>	<input type="checkbox"/>
7.	Property survey. Survey must be updated to show all existing conditions.	<input type="checkbox"/>	<input type="checkbox"/>
8.	Property deed, including all easements and covenants.	<input type="checkbox"/>	<input type="checkbox"/>
9.	Construction plans and specifications, drawn to scale, signed and sealed by a NYS registered architect or professional engineer as required by NYS Law.	<input type="checkbox"/>	<input type="checkbox"/>
10.	Photographs of the property (3"x5" or larger) showing the location and impacts of your application.	<input type="checkbox"/>	<input type="checkbox"/>
11.	Other (indicate document):	<input type="checkbox"/>	
12.	Other:	<input type="checkbox"/>	
13.	Other:	<input type="checkbox"/>	
14.	Other:	<input type="checkbox"/>	
15.	Other:	<input type="checkbox"/>	



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ZONING BOARD OF APPEALS APPLICATION: PART 1 of 4						
LOCATION	Section: Block: Lot:			OFFICE USE	Application number:	
	Address:				Date received:	
					Date of decision:	
	Zoning District:				Expiration date:	
OWNER	Name:			Phone number:		
	Address:			Cellular number:		
				Fax number:		
				E-mail:		
APPLICANT	Name:			Phone number:		
	Address:			Cellular number:		
				Fax number:		
				E-mail:		
AGENT	Name:			Phone number:		
	Address:			Cellular number:		
				Fax number:		
	Attorney Architect Engineer Other: _____			E-mail:		
FEES	Application: \$350		Cash	Credit card	Money order	Check number: _____
	Minutes: \$100 per meeting					
	Escrow: \$500		Cash	Credit card	Money order	Check number: _____
The Department shall send all correspondences to: Owner Applicant Agent Other: _____						



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ZONING BOARD OF APPEALS APPLICATION: PART 2 of 4

If sufficient space does not exist to give appropriate answers to any questions on this form, please attach a rider giving such answers properly referenced to the question and page number.

1. This is an Application for the following (check all that apply):

- Area variance(s)
- Use variance
- Interpretation/ Appeal
- Special permit
- Temporary use
- Extension

2. Appeal is made from the decision of the Building Inspector made on the ____ day of _____, 201_.

3. Describe the scope of the project: _____

4. The applicable provisions of the Zoning Ordinance from which relief is sought are:

a. Article _____ § 450- _____ . _____

Relief sought _____

b. Article _____ § 450- _____ . _____

Relief sought _____

c. Article _____ § 450- _____ . _____

Relief sought _____

d. Article _____ § 450- _____ . _____

Relief sought _____

e. Article _____ § 450- _____ . _____

Relief sought _____

5. Is the property subject to any variances, covenants, easements, or restrictions? NO Yes Describe below:

Village of Sleepy Hollow
Zoning Board of Appeals

6. AREA VARIANCE

Explain specifically how this Application satisfies each of the following criteria and refer to and attach any documentation that supports your position.

- a. Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance;

- b. Whether the benefit sought by the applicant can be achieved by some method feasible for the applicant to pursue, other than an area variance;

- c. Whether the requested area variance is substantial;

- d. Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district;

- e. Whether the alleged difficulty was self-created;

Village of Sleepy Hollow
Zoning Board of Appeals

f. State any additional information that you believe would be helpful to the Board in making a determination.

7. USE VARIANCE

No such use variance shall be granted by the Board of Appeals without a showing by the applicant that applicable zoning regulations and restrictions have caused unnecessary hardship. *In order to prove such unnecessary hardship, the applicant shall demonstrate to the Board of Appeals that for each and every permitted use under the zoning regulations for the particular district where the property is located:*

a. Under applicable zoning regulations, the applicant is deprived of all reasonable economic use or benefit from the property in question, which deprivation must be established by competent financial evidence;

b. The alleged hardship relating to the property in question is unique and does not apply to a substantial portion of the district or neighborhood;

c. The requested use variance, if granted, will not alter the essential character of the neighborhood; and

Village of Sleepy Hollow
Zoning Board of Appeals

d. The alleged hardship has not been self-created.

e. State any additional information that you believe would be helpful to the Board in making a determination.

8. INTERPRETATION/ APPEAL

- Decision of the Building Inspector (attach copy of the decision)
- Interpretation of Zoning Ordinance
- Official Zoning Map

a. Indicate the provision of the Zoning Code you are seeking an interpretation/appeal of;

b. Provide a detailed explanation as to why you believe the Village Official's interpretation is not correct;

c. State the conclusion you believe the Board of Appeals should reach.

9. SPECIAL PERMIT

Describe in detail the reasons, circumstances, and conditions that require the issuance of a Special Permit;

10. TEMPORARY USE

Describe in detail the reasons, circumstances, and conditions that require the issuance of a Temporary Use Permit;

Village of Sleepy Hollow
Zoning Board of Appeals

11. VARIANCE EXTENSION

Describe in detail the reasons, circumstances, and conditions that require the issuance of a variance extension;

I HEREBY CERTIFY THAT ALL STATEMENTS MADE ON THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE.

Proxy Statement (Part 3) is required when anyone other than the property owner is signing this application.

Print Name

Signature

Date

Sworn to before me this _____ day
of _____, 201__

Seal

Notary Public



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ZONING BOARD OF APPEALS APPLICATION: PART 3 of 4

PROXY STATEMENT

Proxy Statement is required when anyone other than the property owner is signing an application.

I, _____ being duly sworn, deposes and says that he/ she resides at
(Print Name)

_____ in the County of _____
(Street, City) (County)

State of _____, and that he/she own the property located at _____,
(State) (Street Address)

the property described in the attached application, hereby authorizes and empowers _____
(Agent's name)

to appear on my behalf before the **Zoning Board of Appeals of the Village of Sleepy Hollow**, and to sign and file any documents required with reference to my application.

Signature

Date

Sworn to before me this _____ day

Seal

of _____, 201__

Notary Public



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ZONING BOARD OF APPEALS APPLICATION: PART 4 of 4

DISCLOSURE STATEMENT

Signed by ALL Applicants and Deeded Owners

In accordance with the requirements of Article 18, §809 of the General Municipal Law of the State of New York, all applications before the Zoning Board of Appeals of the Village of Sleepy Hollow must include a statement by the applicant disclosing, to the extent known to said applicant, the name and residence of any officer or employee of the Village of Sleepy Hollow or County of Westchester, or any State officer, having an interest in the applicant or owner and the nature and extent of that interest.

_____ being duly sworn, deposes and says:

(Print Name)

1. I am an applicant for a project or an owner of the land that is the subject of a pending application before the Village of Sleepy Hollow Zoning Board of Appeals.

2. I reside at: _____

3. The nature of my interest in the aforesaid application is as follows: _____

4. If the applicant or owner is a corporation, list the corporation's officers:

President: _____ Vice President: _____

Secretary: _____ Treasurer: _____

5. Do any of the following individuals have an interest, as defined below, in the owner or applicant:

a. Any officer of New York State. YES NO

b. Any elected or appointed official or employee of the Village of Sleepy Hollow, Town of Mount Pleasant, or Westchester of County. YES NO

For the purpose of this disclosure, an officer or employee shall be deemed to have an interest in the applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them

a. is the applicant, or

b. is an officer, director, partner or employee of the applicant, or

c. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or

d. is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application, petition or request.

Note: Ownership of less than five per cent 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 disclosure.

Village of Sleepy Hollow
Zoning Board of Appeals

If the answer to Question #5 is “**YES**”, state the name, address, nature and extent of the interest of such individual:

Name: _____

Address: _____

Nature and extent of Interest: _____

(If the space allocated above is insufficient to list all persons interested in the applicant, please provide the required information on additional interested persons on a separate sheet(s) of paper and attach hereto)

A PERSON WHO KNOWINGLY AND INTENTIONALLY WITHHOLDS THE NAMES AND ADDRESSES OF ANY PERSONS INTERESTED IN THE APPLICANT OR OWNER AS DESCRIBED IN THIS STATEMENT VIOLATES §809 OF THE GENERAL MUNICIPAL LAW OF THE STATE OF NEW YORK AND SHALL BE GUILTY OF A MISDEMEANOR.

The undersigned affirms, to the best of his or her knowledge, that the person(s) disclosed in this statement is/are the only person(s) having an interest in the applicant.

Signature

Date

Sworn to before me this _____ day
of _____, 201_

Seal

Notary Public



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ZONING COMPLIANCE FORM

APPLICANT NAME :	PROPERTY LOCATION:
SECTION: BLOCK: LOT:	ZONING DISTRICT:

	REQUIRED	EXISTING	PROPOSED	VARIANCE
AREA OF LOT (SF)	MIN.			
WIDTH OF LOT (FT)	MIN.			
FLOOR AREA (SF)	MAX.			

PRINCIPAL BUILDING	FRONT YARD (FT)	MIN.			
	FRONT YARD – CORNER (FT)	MIN.			
	REAR YARD (FT)	MIN.			
	ONE SIDE YARD (FT)	MIN.			
	COMBINED SIDE YARDS (FT)	MIN.			
	BUILDING COVERAGE (%)	MAX.			
	BUILDING HEIGHT (FT/STY)	MAX.			

ACCESSORY	SIDE YARD (FT)	MIN.			
	REAR YARD (FT)	MIN.			
	BUILDING COVERAGE (%)	MAX.			
	BUILDING HEIGHT (FT)	MAX.			
	Distance to PRINCIPAL Bldg. (FT)	MIN.			

PARKING	PARKING (CARS)	MIN.			
	LOADING ZONE	MIN.			

NYS ARCHITECT/ENGINEER _____

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	YES
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO	YES
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, adjoining and 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				

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____</p>	<p>NO</p>	<p>YES</p>
<p>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: _____ _____ _____</p>	<p>NO</p>	<p>YES</p>
<p>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: _____ _____ _____</p>	<p>NO</p>	<p>YES</p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____</p>		

Project:

Date:

***Short Environmental Assessment Form
Part 2 - Impact Assessment***

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing:		
a. public / private water supplies?		
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Project:

Date:

Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)