

ZONING BOARD OF APPEALS
Town of Owasco, New York
Application for Interpretation or Variance
OFFICE USE ONLY

This section to be completed by Code Enforcement Officer. Define part of c

a. Ordinance _____ Case No. _____
b. Title _____ Date Rec'd BA _____
c. Section _____ Date Hearing _____
c. Paragraph _____ Date Action _____
Action _____

4' rear yard
+ 6' side yard
area variance
to install a 12x16
storage shed.

To the Zoning Board of Appeals:

A. Statement of Ownership and Interest

1. The applicant(s) Cheryl Klink
(is) (are) the owner(s) of property situated at 25 First Ave

2. The applicant's appeal concerns the property owned by _____
and located at _____
Tax Map # 116.19-1-79

B. Nature of Request:

Replacing shed to larger shed

C. Attach copy of Plot Plan

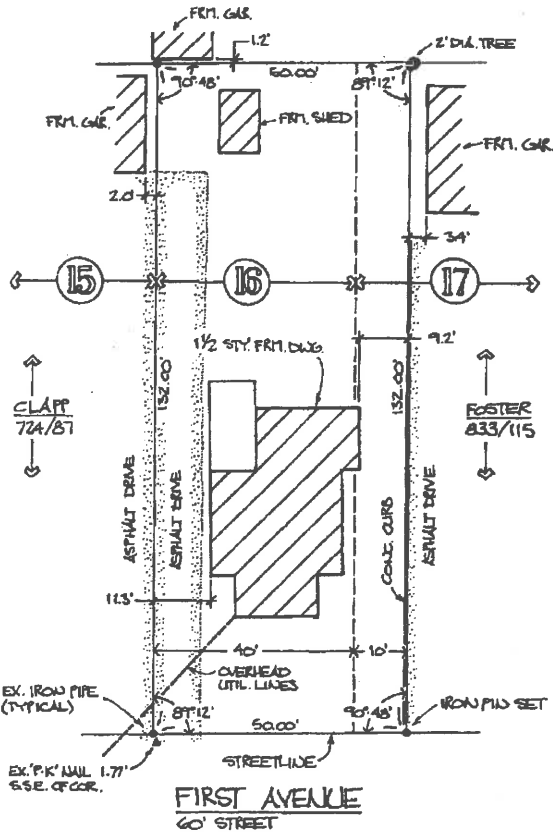
Signature(s) Cheryl Klink

Telephone No. _____ DATE 4/28/2022

Cell No. 315-406-5255



SEE FILED MAP 2/88 469



MAP OF SURVEY

of premises of

ALAN R. FOSTER*
Book 665 of Deeds, Page 228

located at

**25 FIRST AVENUE, TOWN OF OWASCO
CAYUGA COUNTY, NEW YORK**

DECEMBER 4, 1990

SCALE: 1" = 20'

*now **MARC BREAULT**
Book 822 of Deeds, Page 36

REDATED 8/31/01, no changes
found.

CERTIFIED TO:

**COMMONFUND MORTGAGE CORPORATION,
ITS SUCCESSORS AND/OR ASSIGNS**

UNITED GENERAL TITLE INSURANCE COMPANY

CHERYL L. BRENNAN

** abstract provided and reviewed at
time of 8/31/01 redate.



**ANDERSON
SURVEY**

302 SOUTH STREET ROAD
ALBANY, NEW YORK 12202
518 866 7117

This map was prepared with / without
benefit of an abstract of title. **

Certifications indicated hereon signify that this
survey was prepared in accordance with the exist-
ing Code of Practice for Land Surveys adopted by
the New York State Association of Professional
Land Surveyors. Said certifications shall run only
to the person for whom the survey is prepared, and
on his behalf to the title company, governmental
agency and lending institution listed hereon, and
to the assignees of the lending institution. Certifica-
tions are not transferable to additional institutions
or subsequent owners.

Unauthorized alteration or addition to a survey
map bearing a licensed land surveyor's seal is a
violation of section 7209, sub-division 2, of the
New York State Education Law.

Only copies from the original of this survey
marked with an original of the land surveyor's
embossed seal shall be considered to be valid true
copies.

Dan Michael Anderson, P.L.S. #49723

9097

BK1071 PG160

RECEIVED

APR 29 2022

TOWN OF OWASCO

Town of Owasco
2 Bristol Avenue
Auburn, New York 13021

J. Patrick Doyle
Code Enforcement Officer
Email: codes@owascony.gov

Office Phone: 315-253-9021

Fax: 315-253-2683

Cell Phone: 315-729-3921

Application No. _____

Date: _____

Fee: \$ _____

Application for Building/Zoning Permit
(Not a Permit)

IMPORTANT INSTRUCTIONS, PLEASE READ CAREFULLY.

1. Application must be complete. Please type or clearly print in ink all necessary information.
2. Completed Application must be submitted to the Owasco Town Clerk with appropriate fee before review process can begin.
3. Application must be supported with the following documents:

- MINOR PROJECT:** A. Plot plan (see attached sample)
B. Sketch of project and/or specifications/materials list.

- MAJOR PROJECT:** A. Three (3) copies of plot plan signed
B. Three (3) copies of design drawings signed and sealed by a licensed architect or licensed professional engineer.
C. One (1) copy of approval from developer, if in Planned Development District.

PLEASE COMPLETE:

Location of property: 25 First Ave
(Street or Firelane No., Lot No., Nearest Road)

Tax Map No.: 116.19-1-79

Name of Owner: Cheryl Klink

Address: 25 First Ave

Phone, Email
(Phone) 315 406 5255 (Cell) Cher & Cool@yahoo.com (Email)

Application for Building/Zoning Permit (continued)

A. PROJECT CONTACTS:

Builder (If self, so indicate) Cheryl Klink
Address 25 First Ave
Phone / Cell / Email 315-406-5255 Cherylcool@yahoo.com
Architect or Engineer _____
Address _____
Phone / Cell / Email _____

B. NATURE OF WORK

(CHECK ALL APPROPRIATE CATEGORIES BELOW):

Existing Structure(s)

- | | |
|------------------------------|--------------------------|
| 1. Repair (structural) _____ | 4. Removal _____ |
| 2. Addition _____ | 5. Demolition <u>X</u> |
| 3. Alteration _____ | 6. Other (specify) _____ |

New Structure(s)

- | | |
|--|---|
| 1. Single Family _____ | 3. Two Family _____ |
| 2. Accessory Buildings: Garage: <u>X</u> Attached _____ Detached _____ Shed <u>X</u> | 4. Deck: _____ Covered _____ Open _____ |
| | 5. Swimming Pool: _____ Above _____ Below _____ |
| | 6. Other (specify) _____ |

C. PRINCIPAL CONSTRUCTION MATERIAL TO BE USED:

- | | |
|------------------|--------------------------|
| 1. Wood <u>X</u> | 3. Block _____ |
| 2. Brick _____ | 4. Other (Specify) _____ |

D. TYPE OF FOUNDATION:

- | | |
|--------------------------------|---------------------|
| 1. Cellar _____ | 3. Basement _____ |
| 2. Slab _____ | 4. Crawlspace _____ |
| 5. Other (Specify) <u>wood</u> | |

E. COMPLETE THE FOLLOWING:

- | | | |
|--|--------------------|---------------|
| 1. Water Source: Public _____ | Private Well _____ | Other _____ |
| 2. Sewage: Public _____ | Private* _____ | None <u>X</u> |
| * If private, has sewage disposal permit been applied for Yes _____ No _____ | | |
| 3. Will the project involve plumbing? | Yes _____ | No <u>X</u> |
| 4. Will the project involve H.V.A.C.? | Yes _____ | No <u>X</u> |
| 5. Will the project involve electrical ? | Yes <u>X</u> | No _____ |

F. COST OF THIS PROJECT: (all labor* and materials)

* estimate your labor, if applicable.

\$ _____

Application for Building/Zoning Permit (continued)

G. ZONING DISTRICT OF PROPERTY (Circle One)

1. Residential 2. Agricultural/Residential 3. Lakeshore

H. PRINCIPAL USE OF PRESENT STRUCTURE(S) AND/OR LAND (Circle One)

1. Residential 2. Agricultural/Residential 3. Lakeshore
4. Other (Specify) _____

I. PRINCIPAL USE OF THIS PROPOSED PROJECT. (Describe) Storage

J. DIMENSIONS OF TOTAL PROPERTY (If applicable)

Lot size: Length 132' (X) Width 50' (=) Total sq. ft. _____
Existing Buildings:
Length 12' (X) Width 8' (=) sq. ft. _____
Length _____ (X) Width _____ (=) sq. ft. _____
Length _____ (X) Width _____ (=) sq. ft. _____

Total square footage – Existing buildings _____

K. DIMENSIONS OF PROPOSED PROJECT (If applicable)

Length 12' (X) Width 10' (=) Total sq. ft. _____
Height _____ Number of stories 1

L. PROPERTY LINE SETBACKS OF PROPOSED PROJECT. (If applicable)

Front lot line setback _____ ft. Side lot line setback _____ ft.
Rear lot line setback _____ ft. Side lot line setback _____ ft.

M. ENCLOSED LIVING AREA. (If applicable) Total sq. Ft. _____

GENERAL INFORMATION PERTAINING TO THIS APPLICATION

This application will be reviewed by the Code Enforcement Officer and/or the Town Consulting Engineer. If disapproved, a letter of denial explaining reason(s) for denial will be issued to applicant. If approved, a BUILDING/ZONING PERMIT will be issued to the Applicant.

Work covered by this APPLICATION shall not commence prior to the issuance of a PERMIT. The PERMIT shall be valid for a period of twelve (12) months from the date of issuance. Construction under the PERMIT must be substantially complete within twelve (12) months or an extension must be obtained from the Code Enforcement Officer. A NOTICE OF PERMIT (issued by the Town) must be kept on the premises, publicly visible, throughout the progress of work.

Application for Building/Zoning Permit (continued)

This project may involve work requiring approval of various outside agencies. Certain outside agency approvals may be required prior to the issuance of a Permit. Final approval of all agencies involved must be submitted to the Code Enforcement Officer prior to the issuance of a Certificate of Occupancy or Compliance. Examples, not limited to the following, would be:

| <u>Project Involvement</u> | <u>Agency</u> |
|------------------------------|---|
| 1. Land division, SEQR, etc. | Owasco Planning Board |
| 2. Zoning matters, SEQR | Owasco Zoning Board of Appeals |
| 3. Public water, sewer | Owasco Water, Sewer Departments(s) |
| 4. Private septic system | Cayuga County Health Department |
| 5. N.Y.S. Roads | NYS Dept. of Transportation |
| 6. Floodplains, wetlands | NYS Dept. of Environmental Conservation |
| 7. Streams, Lakes, etc. | U.S. Army Corps of Engineers |

Application for a CERTIFICATE OF OCCUPANCY OR COMPLIANCE is made concurrently with this filing. It is the responsibility of the owner or authorized agent to notify the Code Enforcement Officer when the project is completed in order to obtain a Certificate of Occupancy or Compliance.

The Town Code Enforcement Officer and/or Building Inspector, upon the display of proper credentials and in the discharge of his duties, shall be permitted to enter upon the premises covered by this application with out interference, for the purposes of inspecting, during normal working hours.

No person shall make any changes to the plans herewith submitted or of the specifications herein contained in the structural part of the project without the written consent of the Code Enforcement Officer.



I certify that the answers to the questions set forth in this APPLICATION are true, correct and complete. Additionally, I agree that, in the event the PERMIT is approved, to comply with the provisions of all State of New York and Federal Government laws, rules and regulations, as they pertain this APPLICATION.

Signature: Cheng Khik
(Owner or authorized agent)

50'

Now - old

