FORM F

NOTICE — This APPLICATION must be filed in duplicate within 30 days of the date of the order of the administrative official on which application is based, accompanied by necessary data. (See reverse side of this sheet.)

TOWN OF OLIVE

BOARD OF APPEALS

Owner: _____

Address: _____

_____

Signature: _____

Date: _____ Phone: _____

Applicant, if other than owner:

_____

Address: _____

_____ Phone: _____

(For Office Use Only)	Date	Initials
Cal. No.		
Application & Fee Red'd.		
Other Req. Documents/Information Rec'd.		
Hearing Notice Given		
Copy Sent to Town Board and Planning Board		
Planning Board Opinion Rec'd.		
Public Hearing Held		
Decision Notice Sent		
County Planning Board Referral		
Notice to Abutting Property Owners		

Interest of applicant, if other than owner: _____

TO THE ZONING BOARD OF APPEALS OF THE TOWN OF OLIVE: Application is hereby made for:

( ) A Variation of Article _____, Section _____ of the Zoning Ordinance.

( ) An Interpretation of Article_____, Section _____ of the Zoning Ordinance.

( ) An Interpretation of the Zoning Map in the _____. (Describe the general area)

( ) Appeal under Section 280(a) of the Town Law.

( ) An Appeal from an Order of the Zoning Inspector to correct a Violation of the Zoning Ordinance, Section _____.

( ) (Other) _____

and further described as follows (**Specify ruling sought**):

1. Location of Affected Premises

_____

(Give street number, name, site distance from cross street)

and shown on the Tax Map (if any) as: Sheet_____ Block _____ Lot_____

Zoning District _____

2. Size of Lot: Front_____Rear_____Depth_____Area_____

3. Have previous appeals been filed in regard to these premises? _____

(If yes, give calendar number and date, if any)

Cal. No. _____ Date _____

Cal. No. _____ Date _____

Cal. No. _____ Date _____

4. Has court summons been served relative to this matter? _____

5. Have you inquired of the Clerk of the Town of Olive whether there is any petition pending to change the use district regulations affecting the block on which these premises are located? _____

6. ATTACHED HERETO AND MADE A PART OF THIS APPLICATION, I SUBMIT THE FOLLOWING:

(Note— All these papers must be submitted with the application or as required by the Board)

a. A facsmile copy of decision of order of administrative official on which application is based.

b. A statement of the grounds on which I base my application with a clear and accurate description of proposed work, if any.

c. THREE SETS OF DIAGRAMS, including:

a block diagram with street numbers and tax block and lot numbers (if any and street frontage, showing the character and occupancy of all property affected, with points of compass and scale indicated. A copy of ground floor plans and elevation of buildings with all necessary measurements. A copy of Zoning Map for location.

d. A full list of NAMES and ADDRESSES of owners of all property shown on block diagram or all abutting properties, and indicating property owned by Tax Section, Block and Lot numbers (if any.)

e. Duly acknowledged or signed consents, given by such property owners; affidavits of publication and service of notice by mail, and such other date or information as the Board may deem necessary when specifically asked for by the Board.

f. Copy of notice to the particular Town office, offices or agency from whose order I have appealed.

g. A fee in the amount of $ _____

(Spaces below to be completed by the Notary Public except where otherwise indicated)

I hereby depose and say that all the above statements and the statements contained in the papers submitted herewith are true.

Sworn to before me this _____ day) _____

(Applicant to sign here)

of _____, 19_____

AFFIDAVIT OF OWNERSHIP

State of New York)
County of) _____ being duly sworn,

deposes and says that he resides at _____ in the Town of

_____, in the County of _____, in the State of _____,

and that he is the owner in fee of all that certain lot, piece or parcel of land situated, lying and being in the Town of Olive, N.Y., aforesaid

and known and designated on the Tax Map (if any) as Lot Number _____ in Block _____ on Sheet _____

and that he hereby authorizes _____ to make the annexed application in his behalf and that the statements of fact contained in said application including the statements contained in all of the exhibits transmitted herewith are true.

Sworn to before me this _____ day)

of _____, 19_____ _____

(Notary Public)

VALLEY PRESS