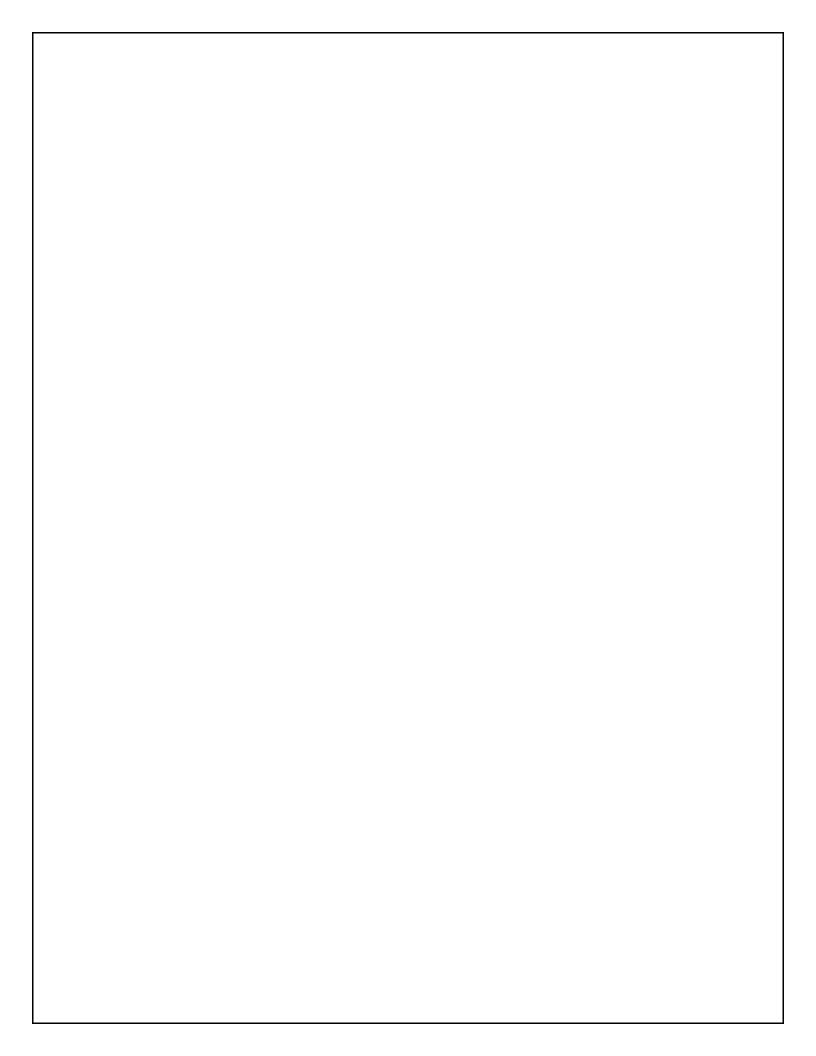


Interpretation Application

For:

Contact Morgan Melancon with any questions: (315) 629-4052 or clerk@townofleray.org





Town of LeRay Interpretation application

OFFICE USE ONLY
□ \$100 Application Fee □ \$100 Fee for Special Meeting
□ Cash □ Check Check #: Receipt #:
Zoning District Classification:
□ AR □ R-1 □ MU □ CC □ PD □ MED □ MHO □ Well Head Protection Zone
Date submitted: Received by:
Appeals for Interpretations
All zoning laws are complex enough that, from time to time, there will be trouble interpreting them. The ZBA may interpret the zoning law for an applicant only where there is an appeal from a decision of the Zoning Enforcement
Officer (ZEO), as in the case of variances. If a ZEO denies a permit on the basis of his interpretation of the zoning law, and the applicant disagrees, the applicant may appeal to the ZBA for a "second opinion," or interpretation, of a particular section of the law. Likewise, a neighbor who disagrees with the issuance of a permit may appeal for an interpretation of the law.
The ZBA must determine the facts of the case. The board may use the opinions of town officials such as the town attorney and planning board, and the context provided by the comprehensive plan to help them determine the intent of the law. The interpretation must be consistent with precedents. The ZBA's decision is final.
Interpretation Application Checklist
Please provide 5 additional copies of all supporting documents unless otherwise directed by the Zoning Board of Appeals Chairperson.
A Complete Application Must Have the Following:
☐ A Completed Application Form
☐ A Completed Part 1 SEQR Form
☐ A denial letter of the Zoning Permit Application
☐ The fee for application submission
The Zoning Board of Appeals has the power to interpret the Ordinance text and map in the administration of the Zoning Ordinance as to the meaning and intent of the Zoning Ordinance.
Contact Information
Applicant Name: Title:
Company Name (if applicable):
Email: Phone:
Mailing Address: City: State: Zip:
You are the: ☐ Owner ☐ Tenant ☐ Contractor ☐ Other, explain:
Would you like to be notified of appeal information (i.e., meetings, mailed correspondence, emails)? \square Yes \square No

	Is. 🗆 Miss. Business Na	ame (ir applicable)):		
Email:			Pho	one:	
Mailing Address:	City	r:	State:	Zip:	
Would you like to be notified	d of appeal information (i.	.e., meetings, mail	ed corresponden	ce, emails)? □ Yes	□No
Contact Person Name:			Title: \square M	ſr. □ Mrs. □ Ms.	☐ Mis
Company Name (if applicabl	le):				
Email:			Pho	one:	
Iailing Address:	City	:	State:	Zip:	
ou will be notified of corre	spondence for all appeal i	nformation.			
additional contact to be no	- /				
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