

Town Of Wilmington

Zoning Board of Appeals

Permit Application

☒ Area Variance ☐ Use Variance

Instructions:

All information requested by this application MUST be supplied, except where not applicable and so indicated.
All applications must be accompanied by a sketch plan and preliminary plot as set forth in Article XI
of the Land Use Code of the Town of Wilmington.

Approval of this application DOES NOT eliminate the necessity of obtaining a building permit and/or certificate
of occupancy.

All applications must be accompanied by a \$20.00 application fee made payable to the "Town of Wilmington."

1. APPLICANT INFORMATION

Name CHRISTINA ANDERSON
Street Address 260 QUAKER Mtn. Rd.
City WILMINGTON State NY Zip Code 12997
Telephone (518) 527-5544

2. SUBJECT PROPERTY OWNER INFORMATION

Name SAUE AS ABOVE
Street Address _____
City _____ State _____ Zip Code _____

3. LOCATION OF SUBJECT PROPERTY

Street Address 260 Quaker Mtn. Rd.

4. LAND USE DISTRICT IN WHICH THE PROPERTY IS LOCATED

?

5. DESCRIBE TYPE AND EXTENT OF PROPOSED USE

ATTACHED GARAGE

6. CONTACT INFORMATION

A. Name Don't have an architect yet
Street Address _____
City _____ State _____ Zip Code _____
Telephone (____) _____
☐ ARCHITECT ☐ DESIGNER ☐ ENGINEER ☐ FRANCHISOR ☐ SURVEYOR

B. Name _____
Street Address _____
City _____ State _____ Zip Code _____
Telephone (_____) _____
☐ ARCHITECT ☐ DESIGNER ☐ ENGINEER ☐ FRANCHISOR ☐ SURVEYOR

C. Name _____
Street Address _____
City _____ State _____ Zip Code _____
Telephone (_____) _____
☐ ARCHITECT ☐ DESIGNER ☐ ENGINEER ☐ FRANCHISOR ☐ SURVEYOR

7. PRESENT USE OF PROPERTY

~~XXXX~~ FIREWOOD STORAGE

8. PRESENT USE OF ALL IMMEDIATELY ABUTTING PROPERTIES

VACANT

9. Indicate the type, kind, construction, alteration or additions to all buildings contemplated, including accessory structures. NOTE: The applicant is cautioned that an approval of this application shall pertain ONLY to buildings specifically set forth in this application.

GARAGE - FRAMES

10. GENERAL DESCRIPTION OF TOPOGRAPHY AND IMPROVEMENTS, including buildings of abutting lands:

11. ROAD FRONTAGE OF ABUTTING ROADS (Indicate if public or private.)

12. Height and number of stories of all buildings, alterations or additions when completed, and parking facilities to be provided

2 STORY GARAGE

ADDITIONAL SERVICES AVAILABLE

14. PROVISIONS TO BE MADE FOR WATER, SEWAGE, ETC., IN ADDITION TO AVAILABLE SERVICES ABOVE

N/A

15. If subject property is a mobile home park or campground, applicant must furnish detailed information indicating compliance with the Town of Wilmington land use code under separate cover.

☐ MOBILE HOME PARK ☐ CAMPGROUND ☐ NOT APPLICABLE

16. If Sections 239-L and 239-M of the General Municipal Law of the State of New York are applicable, indicate date of approval by the Essex County Planning Board: _____/_____/_____

17. If there is prior approval of the State of New York, County of Essex, Town of Wilmington, or any agency, department, or representative state in the land use code of the Town of Wilmington, or as otherwise set forth herein, the applicant shall so indicate:

A. Government unit involved _____

B. Regulation or requirement involved _____

C. Date of approval _____/_____/_____

18. IF MULTIPLE DWELLINGS ARE CONTEMPLATED, INDICATE PROJECTED DENSITY PER ACRE

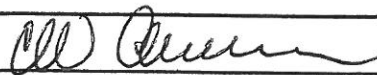
19. ESTIMATED STARTING AND COMPLETION DATES OF WORK TO BE PERFORMED

JUNE 2023 - NOVEMBER 2023

20. ADDRESS TO WHICH THE DECISION ON THIS APPLICATION SHOULD BE MAILED

PO Box 123 Wilmington, NY 12997

21. APPLICANT SIGNATURE



DATE 10/16/22

The following to be completed by the Zoning Board of Appeals

Date application received _____ Date of Public Hearing _____ Date of Decision _____

DECISION: APPROVED _____ DISAPPROVED _____ APPROVED WITH CONDITIONS _____ (below)

CONDITIONS (if any)

SIGNATURE OF ZBA CHAIRPERSON _____

DATE _____

PLANNING BOARD RECOMMENDATIONS

DATE FORWARDED TO TOWN PLANNING BOARD _____

DATE RECOMMENDATION RECEIVED FROM PLANNING BOARD _____

SYNOPSIS OF RECOMMENDATIONS

The following to be completed by the codes enforcement officer

DATE(S) OF INSPECTION BY CODES ENFORCEMENT OFFICER _____

REMARKS _____

SIGNATURE OF CEO _____ **DATE** _____

DATE FILED WITH TOWN CLERK ____/____/____

SIGNATURE OF TOWN CLERK _____

6 Bugbee

2499

GALVIN L. OLNEY
933/196

10196-2-21

~~OLD COPY 1986~~

~~SECRET~~

BUILDING
DIPOLOACHES
2.4' x 7'

662/186

Revised Order

IN (b) FREDERICA W. ANDERSON
1985, 860/200

TRAVEL WITH OTHERS
TRAVEL BOARD

251.19*

72 PM1

20 PMAL.
FACE