

VILLAGE OF BALLSTON SPA

66 Front St
Ballston Spa, NY 12020
Ph: (518)885-5711 Fax: (518)885-0512

APPLICATION FOR:
APPEAL TO THE ZONING BOARD FOR AN
INTERPRETATION, USE VARIANCE, AREA VARIANCE AND/OR VARIANCE EXTENSION

Table with 3 columns: APPLICANT(S), OWNER(S) (if not applicant), ATTORNEY/AGENT. Rows include Name, Address, Phone, and Email.

*An applicant must be the property owner, lessee, or one with an option to lease or purchase the property in question.

Applicant's interest in the premises: X Owner Lessee Under option to lease of purchase

PROPERTY INFORMATION

- 1. Property Address/Location: 31 Hyde Blvd. Tax Parcel No: 203.81-2-31
2. Date acquired by current owner: 9/23/2020
3. Zoning District when purchased: R1
4. Present use of property: Residential
5. Current Zoning District: R1
6. Has a previous ZBA application/appeal been filed for this property?
a. Yes (when? for what?)
b. X No
7. Is property located within (check all that apply):
Historic District
Architectural Review District
within 500' of a State Park, city boundary, or county/state highway?

8. Brief description of proposed action:

Demolition of existing detached garage and building of new detached garage

9. Is there a written violation for this parcel that is not the subject of this application? ___ Yes X No

10. Has the work, use or occupancy to which this appeal relates already begun? ___ Yes X No

11. Identify the type of appeal you are requesting (*check all that apply*):

- ___ INTERPRETATION (p.2)
- ___ VARIANCE EXTENSION (p.2)
- ___ USE VARIANCE (pp.3-6)
- X AREA VARIANCE (pp. 6-7)

FEES: Make checks payable to the "VILLAGE OF BALLSTON SPA". Fees are cumulative and required for each request below:

- ___ Interpretation \$500
- ___ Use variance \$200
- X Area variance
 - Residential use/property: \$100
 - Non-residential use/property: \$300
- ___ Extensions: \$150

INTERPRETATION – PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

1. Identify the section(s) of the Zoning Ordinance for which you are seeking an interpretation:

Section(s) _____

2. How do you request that this section be interpreted?

3. If interpretation is denied, do you wish to request alternative zoning relief? ___ Yes ___ No

4. If the answer to #3 is "yes", what alternative do you request? ___ Use Variance ___ Area Variance

EXTENSION OF A VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

1. Date original variance was granted: _____
2. Type of variance granted? ____ Use ____ Area
3. Date original variance expired: _____
4. Explain why the extension is necessary. Why wasn't the original timeframe sufficient:

When requesting an extension of time for an existing variance, the applicant must prove that the circumstances upon which the original variance was granted have not changed. Specifically demonstrate that there have been no significant changes on the site, in the neighborhood, or within the circumstances upon which the original variance was granted:

USE VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

A use variance is requested to permit the following: _____

For the Zoning Board to grant a request for a use variance, an applicant must prove that the zoning regulations create an unnecessary hardship in relation to that property. In seeking a use variance, New York State law requires an applicant to prove all four of the following "tests".

1. That the applicant cannot realize a reasonable financial return on initial investment for any currently permitted use on the property. "Dollars & cents" proof must be submitted as evidence. The property in question cannot yield a reasonable return for the following reasons:

A. Submit the following financial evidence relating to this property (attach additional evidence as needed):

1. Date of purchase: _____ Purchase amount: \$ _____

2. Indicate dates and costs of any improvements made to property after purchase:

<u>Date</u>	<u>Improvement</u>	<u>Cost</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Annual maintenance expense: \$ _____

4. Annual taxes: \$ _____

5. Annual income generated from property: \$ _____

6. City assessed value: \$ _____

7. Appraised Value: \$ _____ Appraiser: _____ Date: _____

Appraisal Assumptions: _____

B. Has property been listed for sale with the Multiple Listing Service (MLS)?

___ Yes If "yes", for how long?

___ No

1. Original listing date(s): _____ Original listing price: \$ _____

If listing price was reduced, describe when and to what extent:

2. Has the property been advertised in the newspapers or other publications? ___ Yes ___ No

If yes, describe frequency and name of publications:

3. Has the property had a "For Sale" sign posted on it? ___ Yes ___ No

If yes, list dates when sign was posted:

4. How many times has the property been shown and with what results?

2. That the financial hardship relating to this property is unique and does not apply to a substantial portion of the neighborhood. Difficulties shared with numerous other properties in the same neighborhood or district would not satisfy this requirement. This previously identified financial hardship is unique for the following reasons:

3. That the variance, if granted, will not alter the essential character of the neighborhood. Changes that will alter the character of a neighborhood or district would be at odds with the purpose of the Zoning Ordinance. The requested variance will not alter the character of the neighborhood for the following reasons:

4. That the alleged hardship has not been self-created. An applicant (whether the property owner or one acting on behalf of the property owner) cannot claim "unnecessary hardship" if that hardship was created by the applicant, or if the applicant acquired the property knowing (or was in a position to know) the conditions for which the applicant is seeking relief. The hardship has not been self-created for the following reasons:

AREA VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

The applicant requests relief from the following Zoning Ordinance article(s) 205-25 items 1, 2(b), and 2(c)

<u>Dimensional Requirements</u>	<u>From</u>	<u>To</u>
---------------------------------	-------------	-----------

Height of accessory building	15'	25'
Side yard setback	12'	6'
Distance to principal building	15'	10'

Other: N/A

To grant an area variance, the ZBA must balance the benefits to the applicant and the health, safety, and welfare of the neighborhood and community, taking into consideration the following:

1. Whether the benefit sought by the applicant can be achieved by other feasible means. Identify what alternatives to the variance have been explored (alternative designs, attempts to purchase land, etc.) and why they are not feasible.

We are unable to identify another way to build a larger garage to accommodate our needs without variances due to the constraints of our plot of land, the placement of the existing garage, and the location of the house. The existing one-car garage is currently located 6' from the principal building.

2. Whether granting the variance will produce an undesirable change in the character of the neighborhood or a detriment to nearby properties. Granting the variance will not create a detriment to nearby properties or an undesirable change in the neighborhood character for the following reasons:

We do not believe that granting the variances will produce an undesirable change in the neighborhood or cause a detriment to nearby properties. The design of the garage will reflect the principal building and is consistent with other garage structures in the neighborhood.

3. Whether the variance is substantial. The requested variance is not substantial for the following reasons:

We do not think the variances are substantial because the proposed location and size would align with the existing driveway and would partially utilize the existing garage footprint after demolition.

4. Whether the variance will have adverse physical or environmental effects on neighborhood or district. The requested variance will not have an adverse physical or environmental effect on the neighborhood or district for the following reasons:

There will not be any adverse physical or environmental impacts to the neighborhood as this is replacement of an existing structure and small amount of yard space.

- 5. Whether the alleged difficulty was self-created (although this does not necessarily preclude the granting of an area variance). Explain whether the alleged difficulty was or was not self-created:

The difficulty is self-created due to the desire to build a garage that can fit our three vehicles, yard maintenance equipment, and other storage. Right now, the existing garage is too small to accommodate even one car. We would like to restore one of the vehicles that is currently stored outside.

DISCLOSURE

Does any Village of Ballston Spa officer, employee, or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? No Yes If "yes", a statement disclosing the name, residence and nature and extent of this interest must be filed with this application.

APPLICANT CERTIFICATION

I/We, the property owner(s), or purchaser(s)/lessee(s) under contract, of the land in question, hereby request an appearance before the Zoning Board of Appeals.

By the signature(s) attached hereto, I/we certify that the information provided within this application and accompanying documentation is, to the best of my/our knowledge, true and accurate. I/We further understand that intentionally providing false or misleading information is grounds for immediate denial of this application.

Furthermore, I/we hereby authorize the members of the Zoning Board of Appeals and designated Village of Ballston Spa staff to enter the property associated with this application for purposes of conducting any necessary site inspections relating to this appeal.

Jason Tawley Date: 10/2/23
(applicant signature)

Lauren Tawley Date: 10/2/23
(applicant signature)

If applicant is not the currently the owner of the property, the current owner must also sign.

Owner Signature: _____ Date: _____

Owner Signature: _____ 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: <u>new detached garage</u>							
Project Location (describe, and attach a location map): <u>31 Hyde Blvd.</u>							
Brief Description of Proposed Action: <u>Demolition of existing garage and addition of new detached garage</u>							
Name of Applicant or Sponsor: <u>Jason Townley</u>		Telephone: <u>518-915-8476</u>					
Address: <u>31 Hyde Blvd.</u>		E-Mail: <u>jason.townley@aol.com</u>					
City/PO: <u>Ballston Spa</u>		State: <u>NY</u>	Zip Code: <u>12020</u>				
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.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
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:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
3.a. Total acreage of the site of the proposed action?		<u>0.47</u> acres					
b. Total acreage to be physically disturbed?		<u>0.024</u> acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>0.47</u> 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 checked="" type="checkbox"/> Residential (suburban) <input checked="" type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland							

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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: _____ _____ _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
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: _____ _____ _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
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: _____ _____ _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>Jason Townley</u>		Date: <u>10/2/23</u>
Signature: <u>Jason Townley</u>		

Village of Ballston Spa

66 FRONT STREET

Ballston Spa, NY 12020

518-885-5711

September 27, 2023

To: Jason Townley
31 Hyde Blvd.
Ballston Spa, NY 12020

Re: Application for construction of an accessory building (garage) located at 31 Hyde Blvd, Ballston Spa, NY 12020.

Tax ID: 203.81-2-31

Dear Mr. Townley:

Attached please find your denied application to construct an accessory building (garage) on property located at 31 Hyde Blvd., Ballston Spa, NY.

Application is out of compliance with Village of Ballston Spa Code 205-25 items 1 ,2(b,) and 2(c).

- (1) Maximum height of accessory building shall be one story or 15', whichever is greater.
- (2b) Side yard, street side of corner lot: 12' from the side lot line.
- (2c) Not closer than 15' to a principal building, whether in a rear yard or a side yard.

If you wish to move forward with this project, please submit the enclosed Zoning Board of Appeals application to the Building Department Clerk.

Sincerely,



Dave LaFountain
Code Enforcement Officer

Phone: (518)885-3167

Email: buildinginspector@villageofballstonspa.org

Cc: Anna Stanko

VILLAGE OF BALLSTON SPA
 BUILDING DEPARTMENT
 APPLICATION for BUILDING PERMIT

DATE APPLICATION MADE: _____
 PERMIT NUMBER: _____
 ISSUED: _____
 EXPIRES: _____

ALL CONSTRUCTION TO BE IN COMPLIANCE WITH "NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE" AND "VILLAGE OF BALLSTON SPA ZONING ORDINANCE"

1. GENERAL INFORMATION

PDD / Subdivision Name: _____

Tax Map No: 203.01-2-31 Historic District: Yes No Ownership: Private Public

2. APPLICANT

Name: Jason Townley Position: Owner Email: jason.townley@aol.com
 Address: 31 Hyde Blvd City: Ballston Spa State: NY Zip Code: 12020
 Telephone: 518-915-8476 Ext: _____

3. PROPERTY OWNER

Name: Jason and Lauren Townley Position: _____ Email: jason.townley@aol.com
 Address: 31 Hyde Blvd City: Ballston Spa State: NY Zip Code: 12020
 Telephone: 518-915-8476 Ext: _____ Liability Carrier: _____ Policy #: _____

4. PROPOSED CONSTRUCTION LOCATION

Street Number: 31 Street Name: Hyde Blvd
 Apt. Number: _____ Zoning District: R1

5. USE

Existing Use: Garage Proposed Use: Garage

6. TYPE OF WORK

New Addition Change of Tenant Other

Brief Description of proposed work: Detached garage

SETBACKS (in feet)

FRONT	25'
BACK	37'
LEFT SIDE	6'
RIGHT SIDE	64'

7. PROPOSED BUILDING

Height: 25 Actual Stories: _____ Total Size: 1072 square feet Style: _____
 Type of Frame: Wood Type of Foundation: poured masonry Number of Rooms (excl. bathrooms): _____ Number of Bathrooms: _____
 Number of Bedrooms: _____ Primary Heat System: _____ Type of Fuel: _____ Number of Fireplaces: _____ Number of Wood Stoves: _____
 Sprinklers: Yes No Central Air Conditioning: Yes No Garage: Attached - No. of Cars: _____ Detached - No. of Cars: 2

8. ARCHITECT / ENGINEER

Name: Timothy Wade Position: Architect Organization: Verdant Architecture
 Address: PO Box 305 City: Ballston Spa State: NY Zip Code: 12020
 Telephone: 518-490-2070 Ext: _____ Professional License No.: _____ State: _____

9. CONTRACTOR

Name: Andy Champagne Position: Owner Organization: A. Champagne Builders
 Address: 43 Lewis St City: Ballston Spa State: NY Zip Code: 12020
 Telephone: 518-528-4486 Ext: _____ Liability Carrier: _____ Policy No.: _____

10. NAMES, ADDRESSES AND TELEPHONE NUMBERS OF ALL SUBCONTRACTORS:

11. COST AND FEES

Estimated Project Cost \$ 127,000 Building Permit Fee \$ 215

12. PROVIDED WITH THIS APPLICATION

Two (2) Complete Sets of Plans Plot Plan Energy Audit Materials List Electrical Layout Plumbing Layout

13. AFFIDAVIT

I swear to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE, the ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature: Jason Townley DATE: 9/25/23
 (Owner or Owner's Agent)

BELOW THIS LINE TO BE COMPLETED BY THE BUILDING DEPARTMENT

ACTION ON APPLICATION

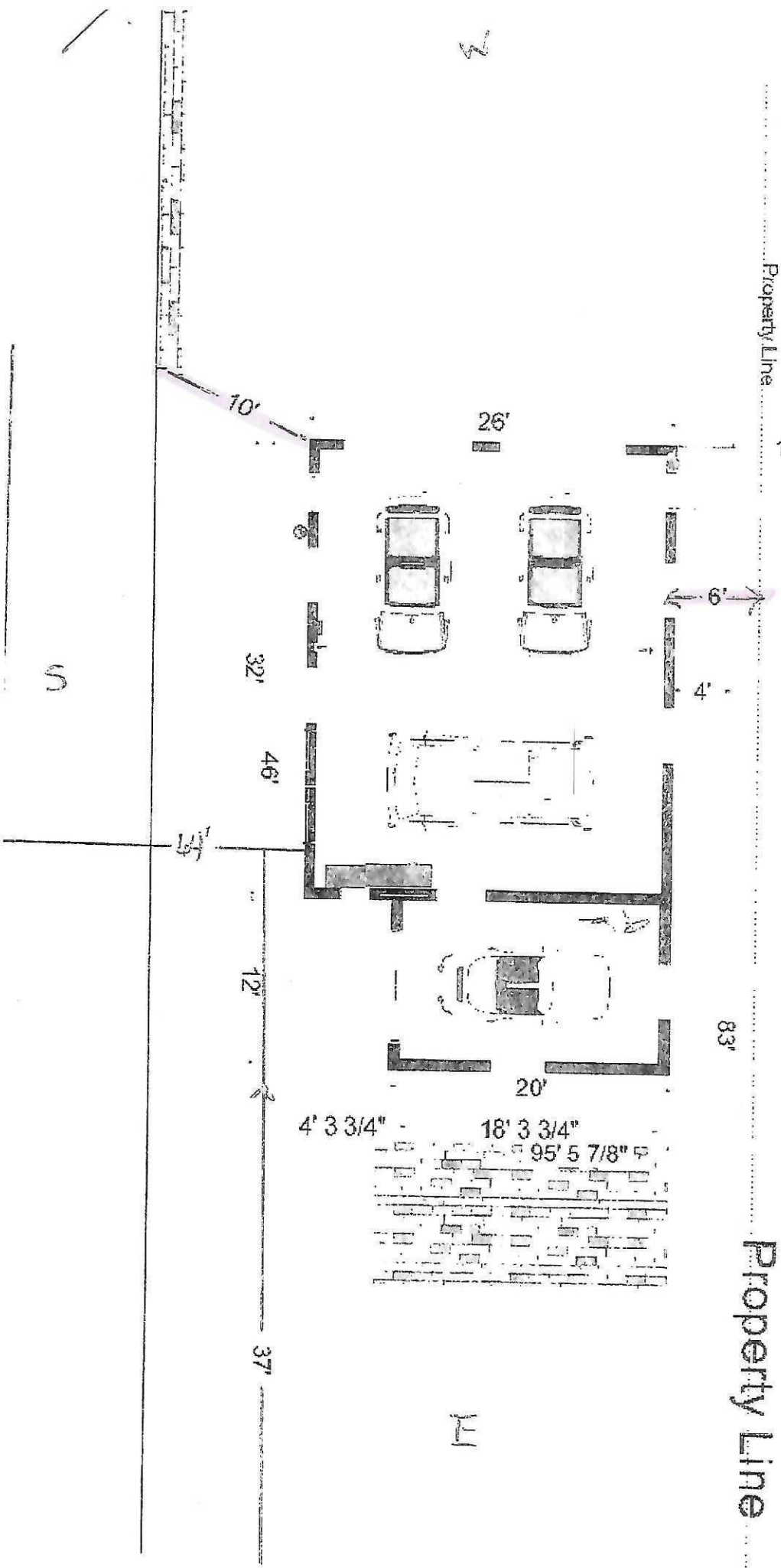
Permit Granted Date: _____ Signed: _____
 Permit Denied Date: OCT 02 2023 Signed: _____

Reason for Denial: _____

Variance/ Special Permit Granted By: _____ Date: _____

Certificate of Occupancy Granted By: _____ Date: _____

Certificate of Compliance Granted By: _____ Date: _____



Property Line

10'

16'

4'

6'

N

Building height is 25'

83'

20'

4' 3/4"

18' 3/4"

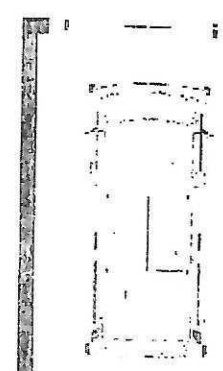
95' 5 7/8"

12'

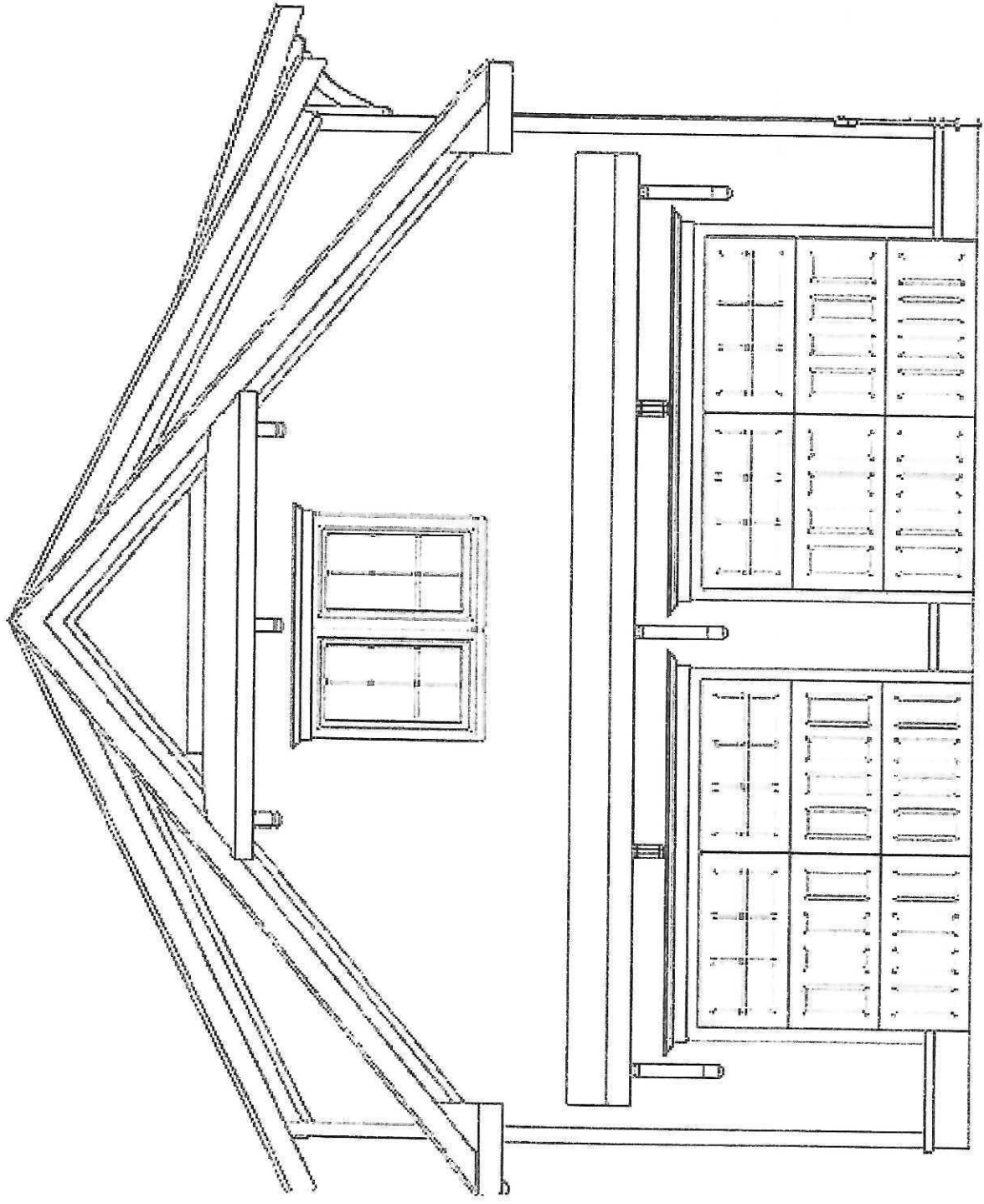
37'

E

Property Line



← 25 →



FRONT ELEVATION