



37 ORCHARD STREET-MANHASSET, NY 11030

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APPLICATION FOR BOARD OF ZONING & APPEALS

Applicant Name:
Address:
Phone:
E-Mail:

I _____ owner/agent for the property located at:
_____ in Plandome Heights, known as
Street Address

Section 3, Block _____ Lot _____, do hereby make application for a variance of:
_____ of the

Building and Zoning Code of the Incorporated Village of Plandome Heights

Variance Requested:

A SEQR Full Environmental Assessment form Must Need not be submitted.

Application must be submitted with three sets of building plans each should include a current property survey, letter of denial and any additional information you would like to present for the hearing. Additional sets with all attachments will be needed for the meeting.

I understand that this matter will be determined following appropriate government action, including a Public Hearing. I also understand that I will be responsible for all expenses incurred for any and all hearings and include with this application my check (payable to the Incorporated Village of Plandome Heights) for \$1350.00 (thirteen hundred & fifty dollars) as a deposit toward the total expenses plus an additional \$250.00 (two hundred & fifty dollars) as the non-refundable application fee .

Applicant Signature

Date Received _____
Fee Received _____

Hearing to be held at the Plandome Heights Village Office
37 Orchard St., Manhasset NY at 7:30pm on _____