

Request# \_\_\_\_\_

# VILLAGE OF NEWARK VALLEY

**villageofnewarkvalley.com**

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## **BOARD OF APPEALS VARIANCE REQUEST**

The following items are required to seek a variance from the Board of Appeals of the Village of Newark Valley:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: Home: \_\_\_\_\_

Work: \_\_\_\_\_

TAX MAP # \_\_\_\_\_

Please have ready the following information:

- Survey of property (if available)
- List of all neighbors within 1000 feet of property
- Septic permit ( if applicable)

List below any additional information that would help the Board of Appeals reach a decision:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE OF REQUEST: \_\_\_\_\_ DATE OF PUBLIC HEARING: \_\_\_\_\_

PLEASE RETURN ALL COMPLETED FORMS PLUS ANY OTHER PERTINENT INFORMATION TO THE NEWARK VALLEY CODE ENFORCEMENT OFFICER. UPON RECEIPT OF ALL DATA, A PUBLIC HEARING WILL BE SCHEDULED. **Fee: \$50.00**

**DECISION RENDERED:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Signature, Chairman, Board of Appeals*

\_\_\_\_\_  
*Date*

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