_- Variance Referral to APA

Agency-approved Local Land Use Program Referral

Please use this form as a cover sheet for any correspondence associated with a variance referral to the Adirondack Park Agency as provided for in the Town's Agency-approved Local Land Use Program.

Send this cover sheet & variance referral record to:

Adirondack Park Agency, ^c/_o Local Government Services, PO Box 99, Ray Brook, NY 12977 or fax to: (518) 891-3938 or email* to: LocalGovernment@apa.ny.gov

From:	Title:		Date Sent:		
The Adirondack Park Age	ency is hereby notif	fied of the rece	eipt of a variance	referral record.	
Applicant(s):			Var. Application #:		
Parcel(s)				(tax map #)	
For: 🗆 Area V	∕ariance □ U	J se Variance	☐ Septic Vai	riance	
Local Zoning District(s):	APA I	<u>APA Land Use Area(s)</u> : ☐ Unknown			
	☐ Har	mlet	erate Intensity Use	☐ Low Intensity Use	
	Rur	ral Use	ource Management	☐ Industrial Use	
The variance involves (check all th	hat apply):				
☐ Shoreline Setback	□ Density		☐ Front/Rear/Side/Road Setbacks		
☐ Shoreline Lot Width	☐ Lot Size		☐ Road Frontage		
☐ Dock/Boathouse	☐ Structure Height		□ Maximum	☐ Maximum Lot Coverage	
☐ Other Shoreline Requireme	ents □ Other:				
The attached correspondence cont	tains:				
☐ Notice of Appli	ication Applic	ation Material	ls	Minutes	
☐ Record of Decision / Decision D					
☐ Postponed/Tabled (until:)		Denied variances do not need to be referred to the Agency	
Thank you for your ass	istance in helping to	o keep the vari	ance decision rec	ord complete.	
For Agency Use:			Agency Date	Stamp – Received:	
Log #: <u>LV</u>					
Cross References:					