

TOWN OF MOREAU
NEW YORK
351 REYNOLDS ROAD • MOREAU, NY

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APPLICATION FOR AREA VARIANCE

37-1-15.22

TOWN OF MOREAU
BUILDING DEPARTMENT

FOR INTERNAL USE ONLY

APPLICANT: Sue+Anthony Havens APPEAL #: 887
Area Variance ZONING DISTRICT: UR
DATE SUBMITTED: 5/9/25
DATE ACCEPTED: _____
HEARING DATE: 7/23/25
☐ SEQR Type 1 ☐ SEQR Type 2 ☐ Unlisted

APPLICANT INFORMATION:

1. Applicant(s): Anthony Havens/Andrew Havens
Street Address: 96B Harrison Ave
City, State, Zip: South Glens Falls NY 12803
Telephone #: _____ Fax #: _____
E-mail Address: _____
2. Agent: Same as above
Street Address: _____
City, State, Zip: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____
3. Owner: Andrew Havens/Anthony Havens
Street Address: 96A Harrison Ave
City, State, Zip: South Glens Falls NY 12803
Telephone #: _____ Fax #: _____
E-mail Address: _____

RELATIONSHIP TO THE PROPERTY:

OWNER: ☒ Yes ☐ No

LESSEE: ☐ Yes ☐ No

AGENT: ☒ Yes ☐ No

If an agent, please attach an Agent Authorization Form.

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ADDRESS: 96A Harrison Ave TAX MAP #: 414489 37.-1-34
CURRENT USE: Personal /Wooded ZONING DISTRICT: Town of Moreau /UR/residential
LENGTH OF TIME OF USE: 34 years PROPOSED USE: 2 Acres deeded to Children
RELIEF SOUGHT: Variance to deed 2 acres to children to build or use as please

	Required Dimension	Proposed Dimension	Difference	%
Front Yard Setback				
Side Yard Setback				
Rear Yard Setback				
Lot Area				

We would like to get approval to have 2 acres that have been surveyed given to our children to build on or leave wooded as part of our estate. Also as brothers and co owners we would like to get this area divided into each of our names so estates when we pass are easier to manage and our wives or children dont have to deal with it.

- (1) That the strict application of said dimensional requirements would result in a specified practical difficulty to the applicant.
- (2) How substantial the requested variance is in relation to the requirements.
- (3) That the difficulty cannot be alleviated by some practical method feasible for the applicant to pursue.
- (4) That there will be no substantial change in the character of the neighborhood or a detriment to the adjoining properties.

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- (5) That the variance would not be materially detrimental to the purpose of this chapter or to property in the district in which the property is located or otherwise conflict with the description or purpose of the district or the objectives of any plan or policy of the town and that the variance requested is the minimum variance which would alleviate the specific practical difficulty found by the Zoning Board of Appeals to affect the applicant.

Please describe how your circumstance meets ALL five (5) criteria (please attach additional pages as necessary):

There will be no change to the area if this takes place. This is located in an existing high density Residential Area.

Currently homes a Apartment Complex runs along one side. Then back of the parcel they are working on the second Apartment complex which borders the far end of the property.

CHECKLIST OF VARIANCE APPLICATION COMPLETENESS:

As per §149-57 of the Zoning Chapter of the Town Code, the following information shall be supplied by the applicant with any variance application:

Please complete the checklist of required application elements:

- ☒ 1. Map of the property with a scaled site plan and/or elevations necessary to show the proposed project for which the variance is sought.
- ☒ 2. Complete narrative response addressing each of the criteria as specified in this application.
- ☒ 3. Financial documentation demonstrating the reasonableness of financial return on the property.
- ☒ 4. Completed and signed Part 1 of the appropriate Environmental Assessment Form. Paper copies are available at the Building Department in Town Hall or electronically at <https://www.dec.ny.gov/permits/6191.html>.
- ☐ 5. Additional information requested by the Zoning Board of Appeals.

Please return the original application, with all four pages intact, along with ten (10) paper copies and an electronic copy, including required information and documentation. The electronic copy may be submitted on a flash drive or emailed to biclerk@townofmoreau.org.

NOTE: The application will not be scheduled on the Zoning Board of Appeals agenda until all paper and electronic copies have been received by the Town Building Department.

Also note that the information to be provided is not limited to the space on this form. If additional space is needed, please use separate sheets and indicate the enclosure number or page number for the attached sheets in the related space provided on this application.

Signature

Anthony Havens

Applicant (print)

Anthony S Havens

Applicant (sign)

05/12/2025

Date