11/10/17.

- 3. Will the requested variance, if granted, alter the essential character of the neighborhood?
- 4. Is the alleged hardship self-created?

Town Of Chester Zoning Board of Appeals 1786 Kings Highway, Chester, New York 10918 Phone: (845) 469-7000, ext. 308 Fax: (845) 469-9242

#### APPLICATION TO THE ZONING BOARD OF APPEALS

| PART I: OWNER INFORMATION-Please type or print below  DATE: 11917  |
|--|
| Property Location: 72 West Ave Chester W 10918   |
| Owner(s) of Record: Full name(s) John Barton, Knistina Barton  |
| Home Phone#: ( ) - Work #: ( ) - Cell #: (845 674 6375   |
| Email address: Kristnamh 1030 a gmail com  |
| Mailing Address of Owners(s): 72 WEST AVE  |
| City, State, Zip Code: (Mester M) 10918  |
| PART II: AGENT INFORMATION- If applicable (Please attach Owner Authorization letter)                     |
| Agent Name:  |
| Work #: ( ) - Cell #: ( / ) -  |
| Email address:   |
| Mailing Address of Agent:  |
| City, State, Zip Code:   |
| PART III: ATTORNEY INFORMATION   |
| Attorney for Applicant:  |
| Mailing Address of Attorney:   |
| City, State, Zip Code: Phone # ( ) -   |
| PART IV: APPLICATION DETAILS   |
| Note: If this application is being made by someone other than the owner, the owner must sign the owner's |
| authorization attached to this document.   |
| Orange County Tax Map Number: Section/Block/Lot 6 / 1 / 6 + 5  |
| Zoning District: SR-6 Lot Size   |
| Type of Variance Sought: (check one or more)   |
| ( Area Variance  |
| Use Variance   |
| ( Interpretation   |
| Referred by:   |

| (V) Planning Board   |
|--|
| () Code Enforcement Officer  |
|  |
|  |
| State in factual terms the exact manner in which applicant seeks from the Zoning Board of Appeals:         |
| I am requesting an area Vanada Y   |
| an interpretations of "home occupation"  |
|  |
|  |
|  |
|  |
|  |
| A summary statement of the practical difficulty because of the existing zoning regulations for the subject |
| premises as follows:   |
| Existing Zoning regs. require lacre tora   |
| home business and my 2 lots combiled   |
| are short by about , 20 acres.   |
|  |
|  |
|  |
| Describe any circumstances supporting this application:  |
|  |
|  |
|  |
|  |
|  |
| Has a variance or special exception use ever been applied for on this property?                            |
| (_) Yes (\(\) No   |
| If yes, indicate the Zoning Board of Appeals date of   |
| decision:  |
| Is the subject property located within 500 feet of any of the following?                                   |
| () Town or Village boundary line (if yes, indicate which Town or Village :)                                |
| () State road, park, or other recreational facility  |
| () County Road or right of way   |

### ZONING BOARD OF APPEALS

## OWNERS AUTHORIZATION FOR A SITE VISIT

| I (Please print) Kristina Barton   |
|--|
| grant permission for members of the Zoning Board of Appeals and/or representatives of same Board to make a site visit on my property should they deem it necessary to review my application. The property location is: |
| 73 West Ave  |
| Chester Ny 10918   |
|  |
|  |
| Signed   |
| Date!  |
|  |

Town of Chester Zoning Board of Appeals 1786 Kings Highway, Chester, New York 10918 (845) 469-7000, ext. 308

# **Interpretation Only**

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# **Area Variance Only**

## Please answer the following:

| Will there be an undesirable change in the character of the neighborhood, or a detriment to nearby properties if this variance is granted?  No. Neighborhood will be unaffected.                   |
|--|
| Can you achieve your goals via a reasonable alternative which does not involve the necessity of an area variance?  |
| Is the variance is substantial? No. The Variance is about - 2 acres or less.   |
| Will the variance have an adverse impact on physical or environmental conditions in the neighborhood or district?  NO. Physical environment impacts will be unchanged from curvent circum stances. |
| Is this a self-created difficulty?  NO. I have not sold or subdivided my property  |

Kristina Barton Variance/Interpretation Application 11/09/2017

#### A request for an interpretation is made for the following reason:

I am requesting an interpretation of the term "home occupation" as is noted in the Accessory Use section of the Schedule of Use and Area Requirements for the SR-6 District zone (Chapter 98 Attachment 2).

The Definitions and Word Usage of the Zoning Code defines home occupation as:

Any gainful occupation customarily conducted within a dwelling by the residents thereof, clearly secondary to the use of the dwelling for living purposes and which does not change the character of the structure as a residence. Examples of home occupations are provided and include physician and dentist.

Although my plan of a private practice psychotherapy office as a home occupation is similar to that of a physician or dentist, it is not specifically identified in this list and I would like clarification that my plan would be appropriately classified as such. There is no intention or ability for this private practice home occupation to ever function as a clinic or hospital.

Tobantor 11/9/17