



**Zoning Board of Appeals Application Checklist**  
**Zoning Board of Appeals Chairman, Gerard Piering**

Village of Westhampton Beach, 165 Mill Road, Westhampton Beach, New York 11978  
 Phone: (631) 288-2429 Fax: (631) 288-6275 Email: [secretary@westhamptonbeach.org](mailto:secretary@westhamptonbeach.org)

**NOTICE:** This checklist is presented as a guide for the preparation of a complete Zoning Board of Appeals application. Please be sure to include all of the documents and items required. Please print legibly or type the application.

**ZBA APPLICATIONS WILL NOT BE ACCEPTED WITHOUT A DENIAL LETTER ANNEXED.**

Name of Applicant: \_\_\_\_\_

Suffolk County Tax Map No.: 905-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_. Property Address: \_\_\_\_\_

10 Fully Executed Applications, inclusive of 2 originals and 8 photocopies, **submitted in collated packets, all containing the requested documents.** Items #1-11 on the Certification **MUST BE** initialed.

**Application Submitted By:**

\_\_\_\_\_ Property Owner (Must be Notarized)      \_\_\_\_\_ Agent of Owner (If so, the Owner's Authorization must be attached, signed and Notarized)

**Application Includes:**

\_\_\_\_\_ 10 Fully Executed Environmental Assessment Forms

\_\_\_\_\_ 10 Surveys of the Property (Must be prepared within one (1) year of the date of the application, and must include both the existing and proposed lot coverage thereon, and should not exceed 11" x 17" and must show dimensional setbacks and must show dimensional setbacks)

**\*NOTE: Coastal Erosion Variance Applications: The survey must show the lot coverage of the dwelling, decks, swimming pools and accessory buildings SEPERATLEY.**

\_\_\_\_\_ 10 Copies of EVERY Certificate of Occupancy issued for the property.

\_\_\_\_\_ 10 Copies of the current Deed.

\_\_\_\_\_ 8 Sets of Construction Plans for the proposed work

**If Applicable:**

\_\_\_\_\_ NYS Department of Environmental Conservation Determination/No Jurisdiction letter if within 300 feet of tidal waters

\_\_\_\_\_ Certified Abstract of Single and Separate Ownership (for dimensional variances on undersized lots)

**Application Fee Attached:** (If relief is requested from more than one of the following, the filing fee for EACH appeal shall be paid at the time of filing.) **A description/summary of the Use Variance and Area Variance must be attached.**

\_\_\_\_\_ \$350.00 – Area Variance or Zoning Interpretation

\_\_\_\_\_ \$500.00 – Use Variance

\_\_\_\_\_ \$1,000.00-Coastal Erosion Variance

\_\_\_\_\_ \$1,000.00-FEMA Variance

\_\_\_\_\_ \$350.00-Appeal from the determination of the Architectural Review Board

When a hearing date has been scheduled, applicant or his/her designated agent will be responsible to notify the bounders of the date, time, and place the hearing, in accordance with the Village Law. At that time, the Secretary to the Board of Zoning Appeals will mail a copy of the Public Notice to the applicant or his/her designated agent with detailed instructions for notifying the bounders. Failure to properly notify the bounders, as instructed, will result in the inability of the Zoning Board of Appeals to hear the application.

Checklist completed by: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Administrative Use Only</b>	
Application Date Stamped:	_____
Application is	___ Complete ___ Incomplete
Receipt # R	_____





**Zoning Board of Appeals Application**  
**Zoning Board of Appeals Chairman, Gerard Piering**

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Has a prior Variance, Special Use Permit, or Interpretation ever been applied for on this property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give the date \_\_\_\_\_, and **ATTACH** a copy of the prior Board of Zoning Appeals decision.

**NOTE:** If sufficient space does not exist to give appropriate answers to any questions on this form, please attach a rider giving such answers properly referenced to question and page number.

State in factual terms the exact manner in which applicant seeks relief from the Board of Zoning Appeals: \_\_\_\_\_

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Specify the practical difficulty or hardship: \_\_\_\_\_

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Describe any circumstances supporting this application: \_\_\_\_\_

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**Certification  
Zoning Board of Appeals Chairman, Gerard Piering**

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This form must be completed in its entirety.

\_\_\_\_\_ states as follows:  
[FULL NAME]

(1) I am interested in an application for a Variance of Special Use Permit now pending before the Village of Westhampton Beach Board of Zoning Appeals.

(2) I reside at: \_\_\_\_\_

(3) The nature of my interest in the aforesaid application is as follows: \_\_\_\_\_  
\_\_\_\_\_

(4) If the applicant or owner is a corporation, list officers:

President: \_\_\_\_\_ Vice President: \_\_\_\_\_

Secretary: \_\_\_\_\_ Treasurer: \_\_\_\_\_

(5) Do any of the following individuals have an interest, as defined below, in the owner of the applicant:

\_\_\_\_\_ (A) Any New York State officer, or

\_\_\_\_\_ (B) Any officer or employee of Westhampton Beach, Southampton Town, or Suffolk County.

For the purposes of this disclosure, an officer or employee shall be deemed to have an interest in the owner or applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren or the spouse of any of them:

\_\_\_\_\_ (A) Is the applicant or owner, or;

\_\_\_\_\_ (B) Is an officer, director, partner, or employee of the applicant or owner, or;

\_\_\_\_\_ (C) Legally or beneficially owns or controls stock of a corporate applicant or owner, or;

\_\_\_\_\_ (D) Is a party to an agreement with such an applicant or owner, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered dependent or contingent upon the favorable approval of such application.

A person who knowingly and intentionally fails to make such disclosure shall be Guilty of a misdemeanor as provided for in General Municipal Law, Section 809. \_\_\_\_\_ Yes \_\_\_\_\_ No

If "yes" state the name, address, nature and extent of the interest of such individual.

\_\_\_\_\_ [NAME]

\_\_\_\_\_ [ADDRESS]

\_\_\_\_\_ [EXTENT OF INTEREST]

\_\_\_\_\_

\_\_\_\_\_



**Certification**

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This application is submitted as follows: **(Initial each, as applicable)**

- (1) After denial of a Building Permit application (Copy of the denial must be annexed): ( )
- (2) In ten (10) copies, inclusive of two (2) originals: ( )
- (3) Notarized properly: ( )
- (4) With ten (10) accurate original surveys prepared by a NY State Licensed Surveyor within the past twelve (12) Months (surveys must include the existing and proposed lot coverage) ( )
- (5) With one (1) original and nine (9) copies of a completed and executed Environmental Assessment Form: ( )
- (6) With ten (10) copies of every Certificate of Occupancy issued for the property: ( )
- (7) With a Certified Abstract of Single and Separate Ownership (for dimensional variances on undersized lots): ( )
- (8) With NY State Department of Environmental Conservation determination or no jurisdiction letter (if within 300 feet of tidal waters): ( )
- (9) With a written authorization signed by the Owner, if the applicant is a contract vendee: ( )
- (10) Applicant affirms that he/she will notify all property owners within a two-hundred (200) foot radius by Certified Mail, Return-Receipt-Requested. Notice must be at least ten (10) days prior to the scheduled hearing date. Original receipts of the Certified Mailings must be submitted to the Zoning Board Secretary five (5) days prior to the hearing date and the signed return receipt cards must be submitted to the Zoning Board Secretary at or prior to the hearing date: ( )
- (11) With the appropriate filing fee payable to the Village of Westhampton Beach: ( )
- (12) Copy of the recorded Deed, if new purchase: ( )

Any application not filled in properly, or submitted without the necessary papers will not be processed until it is complete. The Board of Zoning Appeals reserves the right to request additional documentation and drawings, and to condition upon relief upon the filing of covenants and restrictions with the Suffolk County Clerk.

\_\_\_\_\_  
Signature of Owner, Agent, or Attorney

Sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public



**Use Variance and Area Variance**  
**Zoning Board of Appeals Chairman, Gerard Piering**

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**PART I: USE VARIANCE**

An individual who wants to utilize property for a use that is not permitted by the Zoning Ordinance must apply for a Use Variance. An application for a Use Variance must demonstrate unnecessary hardship by satisfying each of the following four (4) tests:

- (1) **Uniqueness:** The applicant must prove that there are certain features or conditions of the land that are not generally applicable throughout the zone and that these features make it impossible to earn a reasonable return without some adjustment. If the features or conditions are generally applicable throughout the district a variance should not be granted. In those situations where the difficulty is shared by others, the relief should be accomplished by an amendment to the Zoning Ordinance, not a variance.
- (2) **Reasonable Return:** The applicant must demonstrate an inability to realize a reasonable return under any of the uses permitted by the Zoning Ordinance. There must be a dollar and cents proof of the applicant(s) inability to realize reasonable return; speculation of qualitative assessment is inadequate. Failure to realize the highest return is not considered a hardship.
- (3) **Character:** The applicant must prove that the requested modification will not change the character or quality of the neighborhood. In addition, the spirit of the ordinance or local law should be preserved.

**PART II: AREA VARIANCE**

In making its determination, the Board of Zoning Appeals shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety, and welfare of the neighborhood or community by such grant. In make such determination, the Board shall also consider:

- (1) Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance.
- (2) Whether the benefit sought by the applicant can be achieved by some other method, feasible for the applicant to pursue, other than an area variance.
- (3) Whether the requested area variance is substantial.
- (4) Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district.
- (5) Whether the alleged difficulty was self-created, which consideration shall be relevant to the decision of the Board of Zoning Appeals, but shall not preclude the granting of the area variance.

**The Appeals Board should grant the minimum relief necessary to allow reasonable use of the land in question. An applicant is not automatically entitled to receive relief.**

**SUMMARY**

The major difference between a Use Variance and an Area Variance involves the use of the property. An Area Variance results in a modification of physical restrictions so that an allowable use may be established on this property. By contrast, a use variance permits the establishment of a use which is prohibited by the Zoning Ordinance and the Zoning Map. It is for this reason that the standards established for an area variance.

***The Board of Zoning Appeals shall have the power, upon an appeal from a decision of the administrative official charged with the enforcement of such ordinance or local law, to grant area variances as defined herein.***



**Owner Authorization  
Zoning Board of Appeals Chairman, Gerard Piering**

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State of \_\_\_\_\_ )

) ss.:

County of \_\_\_\_\_ )

I, \_\_\_\_\_,  
[Owner]

residing at \_\_\_\_\_  
[Owner Address]

being the owner of premises \_\_\_\_\_  
[Property Location]

also known as Suffolk County Tax Map No.: 905-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

hereby authorize \_\_\_\_\_  
[Agent]

whose mailing address is \_\_\_\_\_  
[Agent Address]

to appear on my behalf before the **Board of Zoning Appeals** of the Village of Westhampton Beach, and to file  
any documents required with reference to my application for \_\_\_\_\_.

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by  
any requirements imposed by this Board as a condition of their approval.

\_\_\_\_\_  
Owner Signature

Sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public



**Environmental Assessment Form  
Zoning Board of Appeals Chairman, Gerard Piering**

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**PART 1 (To be completed by the Applicant)**

(Note: To be accompanied by a survey showing the location of a project or action, including elevations, if necessary). This form must be completed in its entirety. **If a question does not apply, please indicate so.**

The purpose of this Environmental Assessment Form is to provide information, which will assist the Village in determining whether the action you propose, may have a significant impact or effect on the environment. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Please complete the entire form leaving no blanks. If a question does not apply, please indicate so.

This is a standardized form widely used by agencies of Government in an effort to comply with the State Environmental Quality Review Act (SEQRA) and to protect the environment by a close review of a proposed action. Different parts, accordingly, will be of lesser or greater significance depending on actual facts as presented by the applicant.

NOTE: If sufficient space does not exist to give appropriate answers to any questions on this form, please attach a rider giving such answers properly referenced to question and page number.

**VILLAGE REVIEWING AGENCY**

Project Name: \_\_\_\_\_ Site Plan: \_\_\_\_\_  
 Street: \_\_\_\_\_ Subdivision Waiver: \_\_\_\_\_  
 Zoning District: \_\_\_\_\_ Suffolk County Tax Map No.: 905-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
 Subdivision: \_\_\_\_\_ Special Permit: \_\_\_\_\_  
 Zoning Board: \_\_\_\_\_

**OWNER:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**ATTORNEY OR AGENT:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_





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**SURVEYOR OR ENGINEER:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

**DESCRIPTION OF PROJECT:** (Briefly describe type of project or action)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

A. Site Description (Physical setting of overall project, both developed and undeveloped areas.)

1. General Character of the land: \_\_\_\_\_ Generally uniform slope; \_\_\_\_\_ Generally uneven and rolling or irregular;

Other (describe): \_\_\_\_\_

2. Present land use: \_\_\_\_\_ Urban; \_\_\_\_\_ Industrial; \_\_\_\_\_ Commercial; \_\_\_\_\_ Rural; \_\_\_\_\_ Forest; \_\_\_\_\_ Agriculture;

\_\_\_\_\_ Suburban; \_\_\_\_\_ Other: (describe) \_\_\_\_\_

3. Approximate percentage of project area:	Presently	After completion
Meadow or brushland	_____ %	_____ %
Forested	_____ %	_____ %
Agricultural	_____ %	_____ %
Water surface	_____ %	_____ %
Wetland	_____ %	_____ %
Unvegetated (rock, earth or fill)	_____ %	_____ %
Roads, buildings and other paved surfaces	_____ %	_____ %
Other (indicate type) _____		

4. What is the predominant soil type(s) on site? \_\_\_\_\_



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5. Approximate percentage of presently undeveloped project area with slopes:  
 \_\_\_\_\_ 15% or greater;                      \_\_\_\_\_ 10-15% or greater;                      \_\_\_\_\_ 0-10% or greater
6. Is project located within quarter mile of or contain:
- a. A building or site listed on the National Register of Historic Places?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
- b. A building or site listed on the Statewide Inventory or Historic and Cultural Resources?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
- c. An archeological site or fossil bed?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
7. What is the depth to the water table? \_\_\_\_\_ Feet
8. Do hunting or fishing opportunities presently exist in the project area?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
9. Does project site contain any species of plant or animal life that is identified as Threatened or Endangered?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
10. Are there any unique or unusual landforms on the project site? (i.e. cliffs, dunes, other geological formations)?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
- If yes, describe: \_\_\_\_\_
- 
11. Is the project site presently used by the community or neighborhood as an open space or recreation area?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
12. Does the present site offer or include Scenic Views or Vistas known to the community?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
13. Are there any streams within or contiguous to project area?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
14. Are there lakes, ponds or wetland areas within or contiguous to project area?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No
- If yes, (a) Name: \_\_\_\_\_; (b) Size in acres: \_\_\_\_\_
15. What is the dominant Land Use and Zoning Classification within a ½ mile radius of the project (e.g. single family residential, R-2,) and the scale of development (e.g. two story) \_\_\_\_\_
- 

**B. PROJECT DESCRIPTION**

1. Physical dimensions and scale of project (fill in dimensions as appropriate).
- a. Total contiguous acreage owned by the project sponsor \_\_\_\_\_ acres.
- b. Project acreage developed: \_\_\_\_\_ acres initially; \_\_\_\_\_ acres ultimately.



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- c. Project acreage to remain undeveloped \_\_\_\_\_ acres.
- d. Length in miles \_\_\_\_\_
- e. If project is an expansion of the existing structure(s), indicate percent of expansion proposed:  
 Building square footage \_\_\_\_\_ Developed acreage \_\_\_\_\_
- f. Number of off-street parking spaces existing \_\_\_\_\_ Proposed \_\_\_\_\_
- g. Maximum vehicular trips generated per hour \_\_\_\_\_ (Upon completion of project).
- h. If residential, Number and type of housing units:

**One Family      Two Family      Multiple Family      Condominium**

Initial                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Ultimate                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

i. If: Orientation

**Neighborhood-Town-Regional                      Estimated Employment**

Commercial \_\_\_\_\_

Industrial \_\_\_\_\_

j. Total height of tallest proposed structure \_\_\_\_\_ feet.

- 2. How many acres of land will be graded? \_\_\_\_\_ acres.
- 3. How much natural material (i.e. rock, earth, etc.) will be removed from the site? \_\_\_\_\_ tons; \_\_\_\_\_ cubic yards
- 4. Approximate percentage of developed project area with slopes: \_\_\_\_\_ 15% or greater, \_\_\_\_\_ 10-15%, \_\_\_\_\_ 0-10%
- 5. How many acres of vegetation (trees, shrubs, ground covers) will be removed from the site? \_\_\_\_\_ acres.
- 6. Will any mature forest (over 100 years old) or other locally important vegetation be removed by this project? \_\_\_\_ Yes \_\_\_\_ No
- 7. Are there any plans for revegetation to replace that removed during construction? \_\_\_\_\_ Yes \_\_\_\_ No
- 8. If single phase project: (a) Anticipated date of commencement: Month \_\_\_\_\_ Year \_\_\_\_\_  
 (b) Approximate completion date: Month \_\_\_\_\_ Year \_\_\_\_\_
- 9. If multi-phased project: (a) Total # of phases anticipated? \_\_\_\_\_  
 (b) Anticipated date of commencement Phase I (including demolition) Month \_\_\_\_\_ Year \_\_\_\_\_  
 (c) Approximate completion date final phase: Month \_\_\_\_\_ Year \_\_\_\_\_  
 (d) Is Phase I financially dependent on subsequent phases? \_\_\_\_\_ Yes \_\_\_\_ No



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10. Number of jobs generated. During construction: \_\_\_\_\_ After projected completed \_\_\_\_\_

11. Number of jobs eliminated by this project: \_\_\_\_\_

12. Will project require relocation of any projects or facilities? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_

13. Acreage of freshwater or tidal wetlands affected by the project \_\_\_\_\_ acres.

14. (a) Is surface or subsurface liquid waste disposal involved? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) If yes, indicate type of waste (sewage, industrial, etc.) \_\_\_\_\_

(c) If surface disposal, name of stream into which effluent will be discharged \_\_\_\_\_

15. Will surface area of existing lakes, ponds, streams, bays or other surface waterways be increased or decreased by disposal? \_\_\_\_\_ Yes \_\_\_\_\_ No

16. Is project or any portion of project located in the 100 year flood plain? \_\_\_\_\_ Yes \_\_\_\_\_ No

17. (a) Does project involve disposal of solid waste? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) If yes, will an existing solid waste disposal facility be used? \_\_\_\_\_ Yes \_\_\_\_\_ No

(c) If yes, give name: \_\_\_\_\_ location \_\_\_\_\_

(d) Will any wastes not go into a sewage disposal system or into a sanitary landfill? \_\_\_\_\_ Yes \_\_\_\_\_ No

18. Will project use herbicides or pesticides? \_\_\_\_\_ Yes \_\_\_\_\_ No

19. Will project routinely produce odors (more than one hour per day)? \_\_\_\_\_ Yes \_\_\_\_\_ No

20. Will project cause a continuing increase in noise levels on completion? \_\_\_\_\_ Yes \_\_\_\_\_ No

21. Will project cause an increase in energy use? \_\_\_\_\_ Yes \_\_\_\_\_ No

22. If water supply is from wells, indicate pumping capacity: \_\_\_\_\_ gallons per minute.

23. Total anticipated water usage per day: \_\_\_\_\_ gallons per day.

24. Zoning: (a) Current specific zoning classification of site: \_\_\_\_\_

(b) Is proposed use consistent with present zoning? \_\_\_\_\_ Yes \_\_\_\_\_ No

(c) If no, indicate desired zoning: \_\_\_\_\_



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25. Approvals: (a) Is any Federal permit required? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) Does project involve State or Federal funding or financing? \_\_\_\_\_ Yes \_\_\_\_\_ No

(c) Local and Regional Approvals:

	<u>Approval</u>	<u>Type of Approval Required</u>	<u>Submittal Date</u>	<u>Approval Date</u>
Village Board of Trustees	_____ Yes	_____ No	_____	_____
Village Planning Board	_____ Yes	_____ No	_____	_____
Village Zoning Board	_____ Yes	_____ No	_____	_____
County Health Department	_____ Yes	_____ No	_____	_____
Other Suffolk County Agencies	_____ Yes	_____ No	_____	_____
State DEC	_____ Yes	_____ No	_____	_____
Federal Agencies	_____ Yes	_____ No	_____	_____

**C. INFORMATION DETAILS** Attach any additional information as may be needed to clarify your project. If there are or may be any adverse impacts associated with the proposal, please discuss such impacts and the measures, which can be taken to mitigate or avoid them.

PREPARERS SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

REPRESENTING: \_\_\_\_\_

DATE: \_\_\_\_\_