

1/8/98

Application #: ZBA 2024-071
Date: 9-6-24

**Town of Amsterdam
Zoning Board of Appeals**

Application to Board of Appeals

CHECKLIST

- 1) Completed, signed and notarized Application to Board of Appeals (including this checklist and all information required hereon)
- 2) Tax Map indicating property in question and SBL or Tax parcel ID #
- 3) A complete sketch plan drawing with all appropriate dimensions and information
- 4) Copy of denied Application, including the Administrative Officer's Denial
- 5) Copy of any supporting documentation submitted with the Zoning Permit Application including, but not limited to photos, notarized statements, etc.
- 6) If appropriate, and at a minimum, a completed Part I of a Short Environmental Form (SEQR) (see attached), for type 1 actions please use Part I of a Full Environmental Form (SEQR) (also attached).
- 7) If the property is a farm operation within a New York State Agricultural District or with boundaries within 500 feet of a farm operation located in a New York State Agricultural District, the applicant must complete and submit (with this application) a completed Agricultural Data Statement (Ag. and Markets) (see attached)
- 8) Other
 - a) explain: town minimum is not met of 100ft frontage
 - b) explain: only have 80ft with a lot size of 1.5 acres
 - c) explain: _____
 - d) explain: _____
 - e) explain: _____

2/10/2011

Application #: ZBA-2024-071
Date: 9-6-24

**Town of Amsterdam
Zoning Board of Appeals**

Application to Board of Appeals

A completed Application must be filed at least ten (10) days prior to the meeting at which it is to be considered by the Zoning Board of Appeals.

Applicant: Christopher Mathewson Property Owner: Mark Mathewson
(if different)

Address: 131 Upper Van Dyke Ave Address: _____
Amsterdam, NY 12010

Phone: (518) 534-9978 Phone: (518) 703-5879

Professional Advisor: _____ Other : _____
(if appropriate)

Address: _____ Address: _____

Phone: () _____ Phone: () _____

1.) Property Location

Address: Between 131-149 upper Van Dyke Ave

General Location: Between the two homes across from Amsterdam Municipal parking lot

Zoning District: R-1

Tax Parcel ID # (SBL) 39.-4-4 and 39.-4-1.1

2.) Type of Application (please check appropriate box(s)):

- Interpretation of the Zoning Law and/or map
- Area Variance
- Use Variance
- Temporary Permit
- Other _____

3.) For variances and interpretations, indicate the articles(s), section(s), subsection(s) and paragraph(s) of the Zoning Law that apply (by number)

article - Zoning schedule "A" R-1

section - Minimum lot size 100ft frontage

subsection - _____

paragraph - _____

4.) If previous applications have been made with respect to this property, indicate the Application(s) or Appeal Number(s) and Date(s) below

_____ date _____

_____ date _____

_____ date _____

_____ date _____

_____ date _____

5.) Indicate the reason for the filing of this application. Complete only the relevant blanks below (attach extra sheets, if necessary)

A. Interpretation: _____

B. Area Variance: Minimum lot frontage is
unable to be met. Frontage is 0ft

C. Use Variance: _____

D. Temporary Permit: _____

E. Extension of a Temporary Permit: _____

F. Other _____ :

State of New York
County of Montgomery

Sworn to this 6th day of September, year of 2024

[Signature]
Signature of Applicant

[Signature]
Notary Public

State of New York
County of Montgomery

Sworn to this 6th day of September, year of 2024.

[Signature]
Signature of Property Owner
(if different)

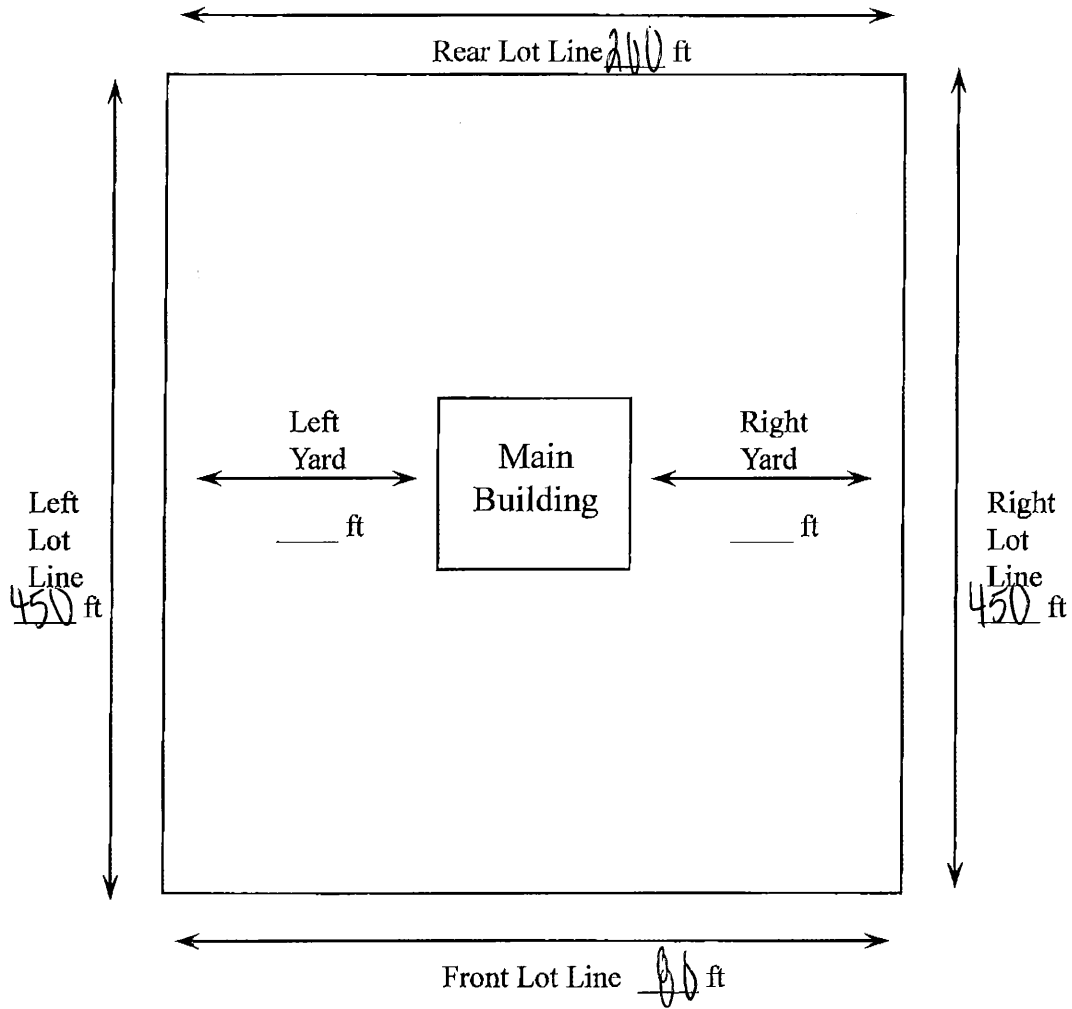
[Signature]
Notary Public



SKETCH PLAN

Application #: _____

Date: _____



•Please locate main building, accessory building, any additions, and any significant features, including but not limited to well and septic location giving all pertinent yard dimensions.

•Below, please identify the type and approximate distance of any structures within 50' of the structure or area in question, on neighboring properties.

TYPE	DISTANCE (FT)
SEWER WELL	30 ft from right lot line within 50 ft

Short Environmental Assessment Form

Part 1 - Project Information


Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: <i>Christopher Mathewson lot frontage variance Application</i>			
Project Location (describe, and attach a location map): <i>Between 131-149 Upper Van Dyke Ave Amsterdam, NY 12010</i>			
Brief Description of Proposed Action: <i>Requesting approval to build with 80 ft of frontage since it does not meet the requirement of 100 ft</i>			
Name of Applicant or Sponsor: <i>Christopher Mathewson</i>		Telephone: <i>(518) 534-9978</i>	
		E-Mail: <i>cmathewson@pga.com</i>	
Address: <i>131 Upper Van Dyke</i>			
City/PO: <i>Amsterdam</i>		State: <i>NY</i>	Zip Code: <i>12010</i>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<i>1.5</i> acres	
b. Total acreage to be physically disturbed?		_____ acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: <u>private well</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>Christopher Mathewson</u> Date: <u>9/6/2024</u></p> <p>Signature: <u></u></p>		



TOWN OF AMSTERDAM

283 Manny's Corner Road
Amsterdam, NY 12010

Phone: 518-842-7961 • Fax: 518-843-6136

www.townofamsterdam.org

APPLICATION FOR ZONING/USE PERMIT

APPLICATION DATE: 09 / 03 / 2024 ZONE: R-1

APPLICATION #: 2024-071 FEE PD: \$25/CASH TAX MAP NO: 39.4-4 + 39.4-1.1

1.) PROPERTY/BUILDING LOCATION: Between 131 - 149 upper Van Dyke Ave.

2.) PROPERTY OWNER'S NAME: Christopher Mathewson TELEPHONE: (518) 534-9978
ADDRESS: 131 upper Van Dyke Ave
Amsterdam, NY 12010

3.) APPLICATION IS HEREBY MADE FOR: (Check ALL that are applicable),

- | | | |
|---|--|---|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> MOBILE HOME INSTALLATION | <input type="checkbox"/> PLANNED UNIT DEVELOPMENT |
| <input checked="" type="checkbox"/> RESIDENTIAL | <input checked="" type="checkbox"/> MODULAR HOME INSTALLATION | <input type="checkbox"/> KENNEL/STABLES |
| <input checked="" type="checkbox"/> 1 FAMILY | <input type="checkbox"/> GARAGE <input checked="" type="checkbox"/> ATTACHED GARAGE | <input type="checkbox"/> HOME OCCUPATION |
| <input type="checkbox"/> 2 FAMILY | <input type="checkbox"/> ACCESSORY BUILDING/STORAGE SHED | <input type="checkbox"/> OUTDOOR FURNACES |
| <input type="checkbox"/> MULTIPLE | <input type="checkbox"/> CHIMNEY CONSTRUCTION | <input type="checkbox"/> SOLAR COLLECTORS + INSTALLATIONS |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> SOLID FUEL BURNING DEVICE | <input type="checkbox"/> WIND ENERGY FACILITIES |
| <input type="checkbox"/> STOVE INSERT | <input type="checkbox"/> POOL <input type="checkbox"/> IN GROUND <input type="checkbox"/> ABOVE GROUND | |
| <input type="checkbox"/> RENOVATION, ALTERATION, CONVERSION | <input type="checkbox"/> SEPTIC SYSTEM <input checked="" type="checkbox"/> WELL | |
| <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> OTHER: _____ | |
| <input type="checkbox"/> COMMERCIAL | | |

COMMERCIAL OCCUPANCY (WITH NO RENOVATIONS) INSPECTION ONLY.

DEMOLITION
 COMMERCIAL OR RESIDENTIAL (CHECK ONE)

METHOD OF DEMOLITION: _____
PLACE OF DEBRIS DISPOSAL: _____
DISCONNECTION DATE OF UTILITIES: _____

4.) THE FOLLOWING DESCRIPTION OF THE USE FOR THIS PROPERTY, FOR WHICH APPLICATION IS MADE HEREWITH, IS SUBMITTED: single dwelling home

5.) SITE INFORMATION (THE FOLLOWING INFORMATION MUST BE PROVIDED ALONG WITH DETAILED PLOT PLAN)

A.) DIMENSIONS OF LOT: FRONTAGE 80ft REAR 200ft RIGHT SIDE 450ft LEFT SIDE 450ft

ACREAGE 1.5 *Lot to be subdivided based on frontage approval

B.) IS THIS A CORNER LOT? YES OR NO

C.) WILL THE GRADE OF THIS LOT BE CHANGED AS A RESULT OF THIS CONSTRUCTION? YES OR NO

IF "YES", DESCRIBE AND SHOW ON PLOT PLAN

D.) PUBLIC WATER OR PRIVATE WELL

E.) SEWER OR PRIVATE SEPTIC

*** SEPERATE PERMITS ARE REQUIRED FOR PUBLIC WATER AND SANITARY SEWER

F.) DISTANCE FROM LOT LINES: FRONT _____ REAR _____ RIGHT SIDE 300ft LEFT SIDE _____

131-(39.4-4)
149-(39.4-1.1)

6.) TYPE OF CONSTRUCTION: (CHECK ALL THAT APPLY)

STYLE: RANCH RAISED RANCH SPLIT LEVEL CAPE COD COLONIAL DUPLEX
 OTHER: _____

BASEMENT (CHECK ONE): FULL CRAWL SLAB

GARAGE: 1 STALL 2 STALL 3 STALL PRIVATE PUBLIC

THE ACCESSORY BUILDING WILL BE AS FOLLOWS: DESCRIPTION: _____

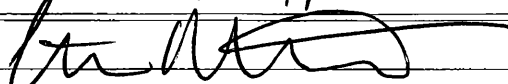
DIMENSIONS: FRONT WIDTH: _____ SIDE LENGTH: _____ HEIGHT: _____

7.) CONTRACTOR'S NAME: TBD after frontage approval DAY PHONE: (____) _____

MAILING ADDRESS: _____

(ALL CONTRACTORS MUST PROVIDE PROOF OF WORKERS COMPENSATION AND LIABILITY INSURANCE)

8.) ESTIMATED VALUE OF ALL WORK (LABOR & MATERIALS): \$ approx. \$400,000 - \$500,000

9.) SIGNATURE OF PROPERTY OWNER: 

I CERTIFY THAT THE CONSTRUCTION PLANS AND ALL OTHER INFORMATION SUBMITTED AS PART OF THIS APPLICATION ARE ACCURATE.

10.) FOR OFFICE USE ONLY:

DATE APPROVED: _____

DATE DENIED: 9/4/24

SIGNATURE: _____
(ZONING OFFICER)

PERMIT EXPIRES: _____ DENIED AND REFERRED TO PLANNING BOARD
 DENIED AND REFERRED TO ZONING BOARD OF APPEALS

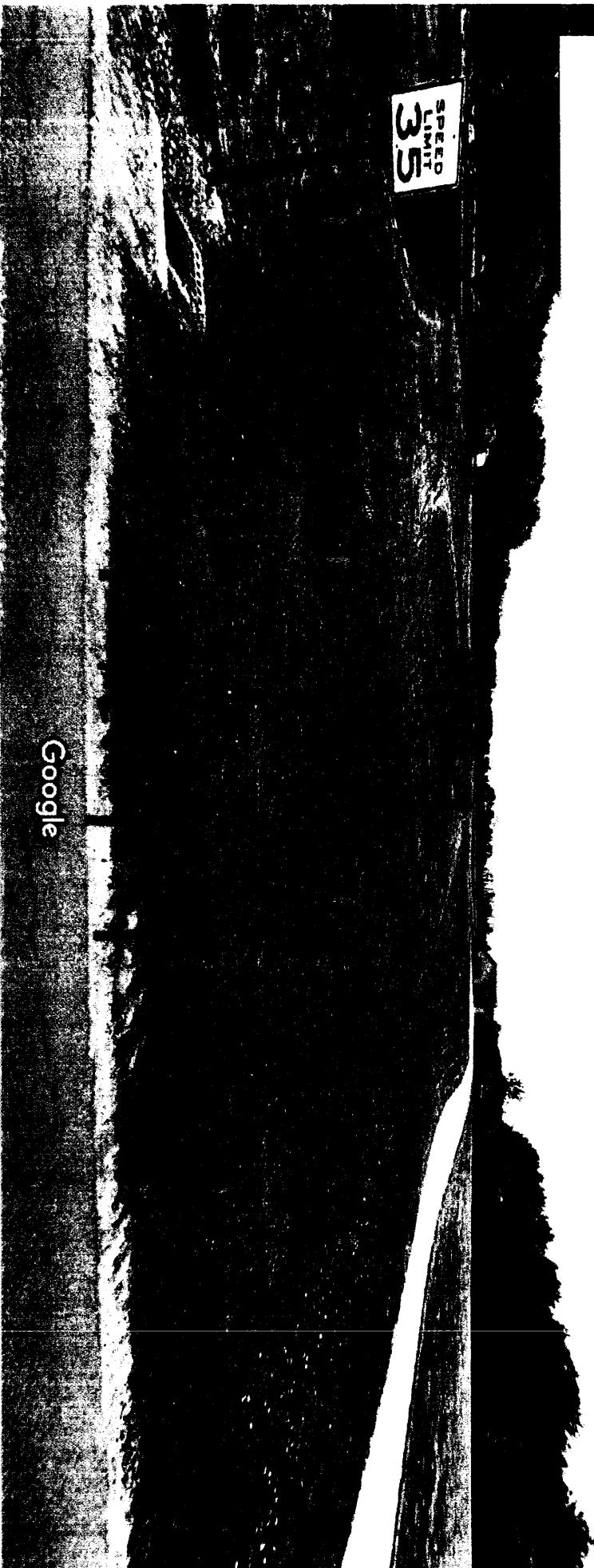
NOTES OR COMMENTS: LG T SIZE ZONING SCHEDULE A
R-1 MINIMUM LOT SIZE 100'
FRONTAGE, 20,000 sq ft. of sewer
provided - municipal

Google Maps 145 Upper Van Dyke Ave

Amsterdam, New York

Google Street View

May 2023 See more dates



Google

Image capture: May 2023 © 2024 Google

Tai

dam Municip
Golf Course



Google Maps 145 Upper Van Dyke Ave

Amsterdam, New York

Google Street View

May 2023 See more dates



Image capture: May 2023 © 2024 Google

Tai

Amsterdam Municipal Golf Course ▲

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MONTGOMERY COUNTY
Real Property Tax Service Agency
Christine DePasquale, Director



131 - (39.-4-4)
149 - (39.-4-1.1)

SERIAL DISTRICTS		LEGEND	
1	2	1	2
3	4	3	4
5	6	5	6
7	8	7	8
9	10	9	10
11	12	11	12
13	14	13	14
15	16	15	16
17	18	17	18
19	20	19	20
21	22	21	22
23	24	23	24
25	26	25	26
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97	98	97	98
99	100	99	100

TOWN OF AMSTERDAM
MONTGOMERY COUNTY, MARYLAND