



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 02/07/2024 ZONE: R1

APPLICATION # 2024-006 FEE PD \$25 TAX MAP NO.: 39-1-13

675 CL# 1724

1.) PROPERTY/BUILDING LOCATION: vacant lot residential bnd Golf Course Rd

2.) PROPERTY OWNER'S NAME: Thomas E. Testero TELEPHONE: 440-2592

ADDRESS: 202 Golf Course Road
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 type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> MODULAR HOME INSTALLATION | <input type="checkbox"/> KENNEL/STABLES |
| <input type="checkbox"/> 1 FAMILY | <input type="checkbox"/> GARAGE <input type="checkbox"/> ATTACHED GARAGE | <input type="checkbox"/> HOME OCCUPATION |
| <input checked="" 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"/> RENOVATION, ALTERATION, CONVERSION | <input type="checkbox"/> STOVE INSERT | |
| <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> POOL <input type="checkbox"/> IN GROUND <input type="checkbox"/> ABOVE GROUND | |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> SEPTIC SYSTEM <input type="checkbox"/> WELL | |
| | <input type="checkbox"/> OTHER: _____ | |

- COMMERCIAL OCCUPANCY (WITH NO RENOVATIONS) INSPECTION ONLY.
- DEMOLITION
 - COMMERCIAL OR RESIDENTIAL (CHECK ONE)
 - METHOD OF DEMOLITION: _____
 - PLACE OF DEBRIS DISPOSAL: N/A
 - DISCONNECTION DATE OF UTILITIES: _____

4.) THE FOLLOWING DESCRIPTION OF THE USE FOR THIS PROPERTY, FOR WHICH APPLICATION IS MADE HEREWITH, IS SUBMITTED: parcel does not meet current minimum lot size of 65,000 sq ft of area it is 1.40 acres with 148' frntge

- 5.) SITE INFORMATION (THE FOLLOWING INFORMATION MUST BE PROVIDED ALONG WITH DETAILED PLOT PLAN)
- A.) DIMENSIONS OF LOT: FRONTAGE 148' REAR 160' RIGHT SIDE 360.9' LEFT SIDE 360.9'
ACREAGE 1.40 acres
- 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 148' REAR _____ RIGHT SIDE _____ LEFT SIDE _____

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: _____ DAY PHONE: (____) _____

MAILING ADDRESS: _____

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

8.) ESTIMATED VALUE OF ALL WORK (LABOR & MATERIALS): \$ _____

9.) SIGNATURE OF PROPERTY OWNER: *Thomas E. Tesiero*

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: 2/2/24
[Signature]

SIGNATURE: _____
(ZONING OFFICER)

PERMIT EXPIRES: _____

- DENIED AND REFERRED TO PLANNING BOARD
- DENIED AND REFERRED TO ZONING BOARD OF APPEALS

NOTES OR COMMENTS:

Zoning schedule "A", minimum lot size is 65,000 square feet with 200 ft road frontage. Must apply for area variance - Zoning Schedule A minimum lot size.

** meeting scheduled for 2-14-2024*

1/8/98

Application #: ZBA-02-2024
Date: 1-22-2024

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: sale of 1.40 acre parcel with 148' frintge
 - b) explain: town changed minimum lot to 65,000 sq Ft
 - c) explain: 1.48 acres with 200' frintge.
 - d) explain: _____
 - e) explain: _____

2/10/2011

Application #: ZBA-02-2024
Date: 02-02-2024

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: Thomas E Tesiero Property Owner: _____
 (if different)
 Address: 202 Golf Course Rd Address: _____
Amsterdam NY 12006
 Phone: (518) 448 2592 Phone: () _____
 Professional Advisor: Judith Ann Realty Other : _____
 (if appropriate)
 Address: 316 Mahawk Drive Address: _____
Tribes Hill NY 12177
 Phone: () 518 829-17250 Phone: () _____

1.) Property Location

Address: Golf Course Road
 General Location: Golf Course Road 6th hole
Fairway
 Zoning District: R1
 Tax Parcel ID # (SBL) 39-1-13

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 - min lot size

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: Parcel is 1.40 acres with 148' frontage
town changed minimum lot to 200' frontage with 1.48 acres
65,000 sq ft of area

C. Use Variance: _____

D. Temporary Permit: _____

E. Extension of a Temporary Permit: _____

F. Other _____ :

State of New York
County of MONTGOMERY

Sworn to this 26th day of JANUARY, year of 2024.

Thomas E. Jesiers
Signature of ~~Applicant~~ **PROPERTY OWNER**

Elizabeth Ritter Chovit
Notary Public

ELIZABETH RITTER CHOVIT
Notary Public, State of New York

Qualified in Montgomery County
Commission Expires May 15, 2024

State of New York
County of _____

Sworn to this 26th day of January, year of 2024.

Thomas E. Jesiers
Signature of ~~Property Owner~~
(if different) **Applicant**

Notary Public

For Office Use Only

Applicant#: 2024-00p

Other fees: _____

Application Fee: \$ 25/75 - due

Description: _____

(if applicable)

\$ _____

\$ _____

Total Amount Received: \$ 100
Date Received: 02-02-2024
Check # 1724

Received by: _____

For Zoning Board of Appeals Use Only:

The Zoning Board of Appeals held a Public Hearing on _____ (day) of _____ (date),
_____ (year) in consideration of this application.

The Application is hereby:

: approved

: approved with modifications

: disapproved

Modifications and comments: _____

Secretary, Town of Amsterdam
Zoning Board of Appeals

Chairperson, Town of Amsterdam
Zoning Board of Appeals

Date

Date



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: Tesiero single lot variance application			
Project Location (describe, and attach a location map): Golf Course Road Town Amsterdam			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor: Thomas E. Tesiero		Telephone: 518 448-2592	
Address: 202 Golf Course Rd		E-Mail:	
City/PO: Amsterdam NY 12010		State: NY	Zip Code: 12010
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
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
3.a. Total acreage of the site of the proposed action? <u>1.40</u> 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			

Agency Use Only [If applicable]

Project:

Date:

Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
<u>Town of Amsterdam</u> Name of Lead Agency	<u>1-26-2024</u> Date
_____ Print or Type Name of Responsible Officer in Lead Agency	_____ Title of Responsible Officer
_____ Signature of Responsible Officer in Lead Agency	_____ Signature of Preparer (if different from Responsible Officer)

PRINT FORM

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	
	<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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<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: _____	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 checked="" type="checkbox"/>	<input 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?	NO	YES	
	<input 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: _____	NO	YES	
	<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: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	

Agency Use Only [If applicable]

Project:

Date:

**Short Environmental Assessment Form
Part 2 - Impact Assessment**

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<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>Thomas E. Jesiers</u> Date: <u>1/26/24</u></p> <p>Signature: <u>Thomas E. Jesiers</u></p>		