



TOWN OF KENT
ZONING BOARD OF APPEALS
531 Route 52
Kent Lakes, New York 10512

Building Department
(845) 225-3900
Town Hall
(845) 225-3943

TOWN OF KENT
SPECIAL PERMIT: ACCESSORY APARTMENT

1. Age of Dwelling _____
Date present owner purchased property _____
Date of Last addition to property _____
Description of addition _____
2. Zoning District in which dwelling is located _____
3. Copies of all Certificate of Occupancies on the dwelling (attached)
4. Survey of property (3 copies) (attached).
5. Layout of apartment drawn to scale (attached).

 ***Layout of apartment should specify size of rooms and square footage of apartment.***

6. Layout of complete dwelling (attached) including:
Layout for parking spaces to be provided: 2 for main dwelling and 2 for apartment
7. Date Building Inspector visited site _____
Date Fire Inspector visited site _____
8. Affidavit of owner-occupancy signed and notarized by the owner(s). (3 copies, one of which is to be filed with your deed at the Putnam County offices)
9. The lot on which your residence is situated must comply with the minimum lot area, yard and coverage requirements for the zoning district in which it is located. (Under some special circumstances these requirements can be modified slightly by the ZBA. Check with the Building Inspector if think you may have a problem.)

After the ZBA has reviewed the following information, the applicant will be referred to Putnam County Department of Health and will be required to obtain approval for the existing SSDS, or approval for a design to upgrade the existing SSDS.

Complete requirements for the Special Permit for Accessory Apartments are set forth in §77-70 of the Town of Kent Zoning Code.

(to be filled in by the Building Inspector:)

According to records maintained by the Town of Kent, the dwelling
IS _____ IS NOT _____ in compliance with Town Code, and the
total number of bedrooms on record is _____.

This information has been obtained from:

BUILDING APPLICATION _____;

OTHER (please specify) _____

NOTE: PERMIT MUST BE RENEWED (5) YEARS AFTER THE DATE OF ITS APPROVAL. PERMIT MAY BE REVOKED IF ANY REQUIREMENTS ARE NOT MAINTAINED.

 ***PLEASE ATTACH THIS SHEET AND ALL REQUESTED MATERIAL TO YOUR APPLICATION.***