

Dutchess County Department of Planning and Development		To	Date 9/8	# pgs 1
		Dept	From	
		Fax #	Phone #	

239 Planning/Zoning Referral - Exemption Communities

Municipality: **City of Beacon**

Referring Agency: ☐ Planning Board ☐ Zoning Board of Appeals ☒ Municipal Board

Tax Parcel Number(s):

Project Name: **LL Moratorium on Residential Development**

Applicant: **City of Beacon**

Address of Property:

Parcel(s) within 500 feet of:

- ☐ State Road _____
- ☐ County Road _____
- ☐ State Property (w/public building or recreation area)
- ☐ County Property (w/public building or recreation area)
- ☐ Municipal Boundary
- ☐ Farm operation in an Agricultural District

Actions Requiring 239 Review

- ☐ Comprehensive/Master Plans
- ☐ Zoning Amendments (standards, uses, definitions, district regulations, etc.)
- ☐ Rezoning involving all map changes
- ☒ Other Local Laws associated with zoning (wetlands, historic preservation, affordable housing, architectural review, etc.)
- ☐ Site Plans (all)
- ☐ Special Permits for all non-residential uses
- ☐ Use Variances for all non-residential uses
- ☐ Area Variances for all non-residential uses

Exempt Actions:*
239 Review is NOT Required

- Administrative Amendments (fees, procedures, penalties, etc.)
- Special Permits for residential uses (accessory apts, home occupations; etc.)
- Use Variances for residential uses
- Area Variances for residential uses
- Renewals/Extension of Site Plans or Special Permits that have no changes from previous approvals
- Subdivisions / Lot Line Adjustments
- Interpretations

9/17/17

Date Response Requested (if less than 30 days):

If subject of a previous referral, please note County referral number(s):

* These actions are only exempt in municipalities that signed an intermunicipal agreement with Dutchess County to that effect.

FOR COUNTY OFFICE USE ONLY			
Response from Dutchess County Department of Planning and Development			
<p>No Comments:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Matter of Local Concern <input type="checkbox"/> No Jurisdiction <input type="checkbox"/> No Authority <input type="checkbox"/> Project Withdrawn <input type="checkbox"/> Exempt from 239 Review 		<p>Comments Attached:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Local Concern with Comments <input type="checkbox"/> Conditional <input type="checkbox"/> Denial <input type="checkbox"/> Incomplete — municipality must resubmit to County <input type="checkbox"/> Incomplete with Comments — municipality must resubmit to County <input type="checkbox"/> Informal Comments Only (Action Exempt from 239 Review) 	
Date Submitted: 9/5/17	Date Received: 9/5/17	Date Requested: 9/17/17	Date Required: 10/4/17
Notes:		<input type="checkbox"/> Major Project Referral #: ZR 17-327	
Date Response Faxed: 9/8/17	<input type="checkbox"/> Also mailed hard copy	Reviewer: [Signature]	

Print Form

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