

Dutchess County Department of Planning and Development	To	Date <u>5/29</u>	# pgs <u>1</u>
	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 Chapter 195 Lot Lines & Subdivision

Applicant: City Council

Address of Property: _____

Please fill in this section

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

Exempt Action submitted for informal review

Date Response Requested (if less than 30 days): 6/18/18

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

No Comments:	Comments Attached:
<input checked="" type="checkbox"/> Matter of Local Concern	<input type="checkbox"/> Local Concern with Comments
<input type="checkbox"/> No Jurisdiction	<input type="checkbox"/> Conditional
<input type="checkbox"/> No Authority	<input type="checkbox"/> Denial
<input type="checkbox"/> Project Withdrawn	<input type="checkbox"/> Incomplete — municipality must resubmit to County
<input type="checkbox"/> Exempt from 239 Review	<input type="checkbox"/> Incomplete with Comments — municipality must resubmit to County
	<input type="checkbox"/> Informal Comments Only (Action Exempt from 239 Review)

Date Submitted: <u>5/25/18</u>	Notes:	<input type="checkbox"/> Major Project
Date Received: <u>5/25/18</u>		
Date Requested: <u>6/18/18</u>		
Date Required: <u>6/22/18</u>	<input type="checkbox"/> Also mailed hard copy	Referral #: <u>ZR/18-167</u>
Date Response Faxed: <u>5/29/18</u>		Reviewer: <u>Jennifer F. Cozzano</u>