



City of Rochester, NY

ADMINISTRATIVE ADJUSTMENT

(Section 120-191A)

DIVISION OF ZONING

CITY HALL, 30 CHURCH STREET, ROOM 125-B

ROCHESTER, NEW YORK 14614

APPLICATION

APPLICATIONS ARE ACCEPTED BY APPOINTMENT ONLY. To schedule an appointment, please contact Nicholas (Nick) Cook by phone at (585)-428-7761 or email at Nicholas.Cook@cityofrochester.gov

Office Use	Application Requirements:
<input type="checkbox"/>	1. Fee: \$100.00. Fee can be paid for online (credit card) with a link provided by staff <i>or</i> by check made payable to the 'City of Rochester'.
<input type="checkbox"/>	2. One (1) copy of the Denied Certificate of Zoning Compliance (CZC).
<input type="checkbox"/>	3. One (1) copy of the completed Administrative Adjustment Application and Standards.
<input type="checkbox"/>	4. One (1) copy of an Instrument Survey Map.
<input type="checkbox"/>	5. One (1) copy of a Site Plan showing the location of the proposed work.
<input type="checkbox"/>	6. One (1) copy of scaled elevations of the proposed structure or a sample photograph.
<input type="checkbox"/>	7. One (1) copy of the site plan, survey map, or elevation drawings no larger than 8-1/2" x 11".
	8. Photographs of the subject site, structures on the site, and surrounding properties.

Which of the following Administrative Adjustments is being requested?

- 1)___ Ten (10%) percent or less of a numerical standard set forth in Chapter 120 of the Zoning Code.
- 2)___ An Alternative Parking Plan for five (5) or fewer parking spaces.
- 3)___ A parking area for a residential use in a residential district which:
 - A. Is located in the side yard due to the location of the principal building on the property.
 - B. Is within the front yard and is limited to one (1) parking space, when new curbs are being installed and the parking area existed before the project was identified in the City=s Capital Plan.
 - C. Does not have a detrimental impact on the streetscape relative to neighborhood character, impacts to available on-street parking, trees and other vegetation or on the historic and/or architectural integrity of the streetscape.
- 4)___ A parking area or parking lot for commercial uses in a commercial district which:
 - A. Has a pre-existing curb cut; and
 - B. Has insufficient space behind the building to accommodate required parking when new curbs are being installed and the parking lot or parking area existing before the project was identified in the City=s Capital Improvement Plan; and
 - C. Can accommodate a parking stall length of eighteen (18) feet; and
 - D. Accommodates defined pedestrian access to the building.
 - E. Does not have a detrimental impact on the streetscape according to the evaluation criteria set forth in 3C above.
- 5)___ A chain-link fence in the front yard in a residential district, provided:
 - A. A substantial number of similar fencing exists on the street frontage (proof of this must be provided by the applicant); and
 - B. The existing fencing has been legally installed.
- 6)___ Central air-conditioning units in the side yard.
- 7)___ An addition to an existing structure which does not meet the side yard setback requirement.
- 8)___ To review signs in the Center City District, except for signs associated with a project undergoing site plan review.
- 9)___ Other _____.

[FOR OFFICE USE ONLY]

ADDRESS: _____ **FILE NUMBER:** _____

DATE FILED: _____ **FEE:** _____

**ADMINISTRATIVE ADJUSTMENT
STANDARDS**

An Administrative Adjustment will be granted only if evidence is presented establishing conformance with each of the following standards. Explain how the application conforms to **each** of these requirements (attach additional sheets if necessary):

A. The benefits to the applicant of the approval outweigh any detriments to the health, safety and welfare of the neighborhood.

B. There is no means other than the requested Administrative Adjustment by which the difficulty can be avoided or remedied to a degree sufficient to permit a reasonable use of the subject lot or parcel.

PROJECT INFORMATION

PLEASE TYPE OR PRINT

1. PROJECT ADDRESS(ES): _____

2. APPLICANT: _____ COMPANY NAME: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

E-MAIL ADDRESS _____

INTEREST IN PROPERTY: Owner _____ Lessee _____ Other _____

3. PLAN PREPARER: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

4. ATTORNEY: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

E-MAIL ADDRESS _____

5. ZONING DISTRICT: _____

6. DETAILED PROJECT DESCRIPTION (additional information can be attached): _____

7. LENGTH OF TIME TO COMPLETE PROJECT (Attach schedule if phased:) _____

APPLICANT: I certify that the information supplied on this application is complete and accurate, and that the project described, if approved, will be completed in accordance with the conditions and terms of that approval.

SIGNATURE: _____ **DATE:** _____

OWNER (if other than above): I have read and familiarized myself with the contents of this application and do hereby consent to its submission and processing.

SIGNATURE: _____ **DATE:** _____