

Town of Cobleskill  
P.O. Box 327  
Cobleskill, NY 12043  
Phone (518) 234-1719  
[www.schohariecounty-ny.gov](http://www.schohariecounty-ny.gov)

**PETITION FOR ZONING AMENDMENT**

• **Name of Petitioner:** \_\_\_\_\_

*(Contact Information)*

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Site Location (911 address): \_\_\_\_\_  
\_\_\_\_\_

Tax Parcel(s) Number: \_\_\_\_\_

Current Zoning District: \_\_\_\_\_

• **Type of Amendment:** (check one)

**Map Amendment (complete form ZA-Map and attach)**

Reason for Amendment: \_\_\_\_\_  
\_\_\_\_\_

**Text Amendment (complete form ZA-Text and attach)**

Article and Section to be amended: \_\_\_\_\_

Reason for Amendment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Zoning Map Amendment (Form ZA-Map)**

- General description for boundaries of area for which the zone change is requested:

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- Total project area (sq. ft. or acres): \_\_\_\_\_

- Present use(s): \_\_\_\_\_

- Adjoining zoning district(s): \_\_\_\_\_

- Adjoining zoning use(s): \_\_\_\_\_

- Proposed zoning classification: \_\_\_\_\_

- Proposed use(s): \_\_\_\_\_

- Supporting statement for request: \_\_\_\_\_

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I, the undersigned owner, hereby request zoning amendment approval by the Cobleskill Town Board for the above petition. I AGREE TO MEET ALL REQUIREMENTS OF THE ZONING CODE FOR THE TOWN OF COBLESKILL.

\_\_\_\_\_  
Signature of Petitioner: \_\_\_\_\_  
Date:

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**Zoning Text Amendment (Form ZA-Text)**

- Existing section(s) is not adequate because:

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- The proposed change will clarify or improve the code because:

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- Proposed wording of text amendment (attach additional sheet if necessary):

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- Supporting Statement for Request:

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I, the undersigned owner, hereby request zoning amendment approval by the Cobleskill Town Board for above petition. I AGREE TO MEET ALL REQUIRMENTS OF THE ZONING CODE FOR THE TOWN OF COBLESKILL.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

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**Petition for Zoning Amendment: Instructions**

- Submit completed Petition for Zoning Amendment
- Submit completed Full Environmental Assessment Form (FEAF Part 1) SEQR ([www.dec.ny.gov/permits/6191.html](http://www.dec.ny.gov/permits/6191.html))
- Submit in full, the appropriate given Zoning Amendment (ZA) form(s)
- Write “NA” when “non-applicable”
- Submit 1 original and 15 copies of completed petition and all attachments; which includes the tax map(s) showing area for which the zone change is requested, including surrounding parcels.
- **Petition Fee:** \$100. A check for the total amount payable to Town of Cobleskill shall accompany every petition.
- **Submission deadline:** Petition, attachments and fees shall be filed in the Town Clerks Office a minimum of 5 business days prior to the town board meeting where the application will be introduced.
- Refer to Article 7 of the Town of Cobleskill Zoning law for details of the amendment and review process. Please contact the Town Zoning/Codes Officer, Town Clerks office or online at the above website, clicking on the (Town of Cobleskill) icon for that referral.

**Note:** maps shall be in not less than 1:400 scale and shall be minimum paper size of 8 1/2” x 11”