

[FOR OFFICE USE]

(Application #)

(Date received)



CITY OF SARATOGA SPRINGS

PLANNING BOARD

_____ □ _____
 City Hall - 474 Broadway
 Saratoga Springs, New York 12866-2296
 Tel: 518-587-3550 fax: 518-580-9480
 http://www.saratoga-springs.org

APPLICATION FOR: SITE PLAN REVIEW (INCLUDING PUD)
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(Rev: 12/2015)

*****Application Check List - All submissions must include completed application check list and all required items.**

Project Name: _____

Property Address/Location: _____

Tax Parcel #: _____ Zoning District: _____
(for example: 165.52-4-37)

Proposed Use: _____

Date special use permit granted (if any): _____ Date zoning variance granted (if any): _____

Is property located within (check all that apply)?:

Historic District Architectural Review District

500' of a State Park, city boundary, or county/state highway

<u>APPLICANT(S)*</u>	<u>OWNER(S) (If not applicant)</u>	<u>ATTORNEY/AGENT</u>
Name _____	_____	_____
Address _____	_____	_____
_____	_____	_____
Phone _____	_____	_____
Email _____	_____	_____

Identify primary contact person: Applicant Owner Agent

* An applicant must be the property owner, lessee, or one with an option to lease or purchase the property in question.

Application Fee: A check for the total amount below payable to: "Commissioner of Finance" MUST accompany this application.

<input type="checkbox"/>	<u>Sketch Plan</u> -	\$250	\$ _____
<input type="checkbox"/>	<u>Final Site Plan Approval</u>		
	Residential -	\$250 plus \$150/unit	\$ _____
	Non-Residential -	\$500 plus \$100/1,000 SQ. FT.	\$ _____
<input type="checkbox"/>	<u>Modification</u>		
	Residential -	\$250	\$ _____
	Non-Residential -	\$500	\$ _____
			Total \$ _____

Submission Deadline – Check City’s website (www.saratoga-springs.org) for application deadlines and meeting dates.

Does any City officer, employee or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? YES ____ NO _____. If YES, a statement disclosing the name, residence, nature and extent of this interest must be filed with this application.

I, the undersigned owner, leasee or purchaser under contract for the property, hereby request Site Plan Review by the Planning Board for the identified property above. I agree to meet all requirements under Section 240-7.2 of the Zoning Ordinance of the City of Saratoga Springs.

Furthermore, I hereby authorize members of the Planning Board and designated City staff to enter the property associated with this application for purposes of conducting any necessary site inspections relating to this application.

Applicant Signature: _____ Date: _____

If applicant is not current owner, owner must also sign.

Owner Signature: _____ Date: _____