TOWN OF STILLWATER

BUILDING, PLANNING & DEVELOPMENT DEPARTMENT 881 HUDSON AVE, STILLWATER, NY 12170 (518) 664-6148, ext. 215



Special Use Permit Application

(To be submitted concurrent with Site Plan Application)

Planning Board

Fee: \$325.00

OFFICE USE ONLY		
Project #:	Total Fee Paid: \$	
Rec'd by:	Date:	

PROJECT INFORMATION						
Project Name:						
Address/Location:						
APPLICANT/REPRESENTITIVE INFORMATION *ALL INFORMATION IN THIS SECTION IS REQUIRED FOR A COMPLETE APPLICATION						
Name:						
Phone:		Email:				
Address:	City:		State:	Zip:		
Owner (if owner is different from applicant, owner authorization section must be completed and signed)						
Name:						
Phone:		Email:				
Address:	City:		State:	Zip:		
SITE INFORMATION						
Parcel Identification (SBL) # of all lots included:						
Number of proposed lots:		Zoning District:				
Size of existing lot(s):	_acres,acre	es,acres,	acres			
Size of proposed lots:acres,acres,acres,acres,acres						
Proposed Use: Commercial Other						
Type of Special Use Permit: Permanent Temporary Renewable						
Has the Applicant reviewed the Special Requirement for Special Use Permits in the Town Code: 🗌 Yes 🗌 No						

Any applicant who receives a temporary or renewable special use permit and who decides to proceed with the special use does so realizing that the temporary special use permit has a fixed duration, and that all rights to continue that use terminate upon the expiration of the specified time, and that the renewable special use permit may not be extended beyond its original term without approval pursuant to this section. The applicant, in accepting a temporary or renewable special use permit, acknowledges and agrees that such special use permit confers no rights or privileges other than those specifically contained therein.

SIGNATURES

I, the undersigned, have thoroughly read and understand the application and the list of items to be shown on the plans and documents for review and I consent to all the requirements as set forth in the application.

Signature:

Date_

Date

AUTHORIZATION TO ACT AS AGENT (OWNER AUTHORIZATION)

In the event that the owner of the property desires to have another individual act as his/her authorized representative in support of this application the following statement must be completed and signed:

I, _____, owner of the above referenced lot(s) hereby designates______as my agent regarding this application for review.

Signature: _____

APPLICATION PREPARATION CHECKLIST

*Applications must be submitted along with the Application Fee and deemed complete by the department to be considered for placement on an agenda. Incomplete applications will not be accepted and will be returned to the applicant. Exclusion of any required materials will result in the delay of project review.

<u>COPIES</u>: The following materials are required:

Applicant Contact the Planning Department for the number of printed copies of materials required Initials **APPLICATION FORM** NARRATIVE: While recognizing that certain types of uses may be desirable or necessary in the Town, their nature can cause certain problems or difficulties. Consequently, particular uses are controlled by a special use permit procedure which requires additional regulations designed for each use in order to mitigate such problems or difficulties and to minimize the impact of these upon the zoning district in which such use is located. The narrative should describe such mitigation strategies. Site Plan Application: A complete Site Plan Application must be submitted concurrently with all Special **Use Permit Applications.** LONG ENVIRONMENTAL ASSESSMENT FORM: Pursuant to the N.Y.S. State Environmental Quality Review Act (SEQRA). AGRICULTURAL DATA STATEMENT: (If Required) For all projects within Saratoga County Ag District 1 Available at: https://www.stillwaterny.org/building-planning-developement/planningdepartment/planning-board-forms-and-application/

 MAPS:

 Size of 22x34 inch maximum should be used when practical *Printed maps must be folded

 See Map requirements below

 DIGITAL COPIES:

 Digital copies are mandatory. Any applications submitted without digital copies shall be deemed incomplete.

 *Must be on USB Drive or downloadable email format

AGENCY MATERIALS

FIRE DEPARTMENT: One full set of materials (printed or digital) mailed directly to: Arvin Hart Fire Company PO Box 288, Stillwater, NY 12170

<u>USPS:</u> A layout plan must be submitted to the appropriate Post Office for approval of the mailbox (mail receptacle) locations. Contact the post office that will be providing service for their preferred contact information

OFFICE USE ONLY

PUBLIC NOTICE FEE:

The cost of this fee will be determined by the Planning Board based on the number of notifications required and must be submitted no later than 14 days prior to the meeting

ENGINEER ESCROW AND LEGAL ESCROW FEES:

To be determined following initial review of the application. This fee must be paid prior to placement on an agenda

Additional copies of any and all materials MAY BE REQUESTED AT ANY TIME

MAP/PLAN REQUIREMENTS

MAP MUST INCLUDE: **Special Use Permits Applications may submit one set of maps for both the Special Use Permit and Site Plan Applications	Applicant initials
Site plan drawn to scale at one-inch equals 50 feet or larger.	
All existing and proposed boundary lines	
Size in acres of existing and proposed lots	
Include one sheet showing the overall plan	
All existing and proposed easements and Rights of Way	
Existing Zoning Districts and boundaries	
Names and owners of all adjacent properties	
Street names for any existing or proposed roadways	
Federal or State regulated wetland delineations	
Location and design of all proposed site improvements including drainage, retaining walls, berms,	
fencing, etc.	
Location of existing or proposed waste water treatment	
Location of existing or proposed water supply	
Location of the various uses and their areas	

Topog North	Il drainage system raphic map with intervals of 10ft arrow and site location map	
Wheth	g Plan if the development is to be phased a general indication of how the phasing is to proceed. her or not the development is to be phased, the sketch plan of this section shall show the ed total project.	
Total a	area of proposed disturbance	
	MAP/PLAN REQUIREMENTS	
		Applicant initials
Standa	ard notes as detailed below*	
1. 2.	Residents should be aware that farmers have the right to undertake farm practices which may generate dust, odor, smoke, noise and vibration.	
	Min lot width @ bldg line: ft Setbacks: Front: ft Side: ft Rear: ft	
3. 4. 5.	Parcel is identified as tax parcel [insert tax ID number] , Town of Stillwater, Saratoga County, New York. The average lot size is [insert size] sq. ft. Describe any easements or other restrictions on this property	
pe nec Plannii	ard Notes: The following notes are the minimum requirement on all plats. Additional notes may essary as defined in the Town Subdivision Design Standards, Section 1.12 or as requested by the ng Board.	
יסיקקר		
	TOWN OF STILLWATER PLANNING BOARD APPROVAL APPROVED BY RESOLUTION OF THE PLANNING BOARD OF THE TOWN OF STILLWATER, NEW YORK, ON THE DAY OF, 20 SUBJECT TO ALL REQUIREMENTS AND CONDITIONS OF SAID RESOLUTION. ANY CHANGES, ERASURES, MODIFICATIONS OR REVISIONS OF THIS PLAT, AS APPROVED, SHALL VOID THIS APPROVAL SIGNED THE DAY OF PLANNING BOARD CHAIRMAN	