



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

[FOR OFFICE USE]

(Application #)

(Date received)

APPLICATION FOR:
SITE PLAN REVIEW
(INCLUDING PUD)

****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)

Project Description:

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> -	\$300	\$ _____
<input type="checkbox"/>	<u>Final Site Plan Approval</u>		
	Residential -	\$300 plus \$180/unit	\$ _____
	Non-Residential -	\$600 plus \$120/1,000 SQ. FT.	\$ _____
<input type="checkbox"/>	<u>Modification</u>		
	Residential -	\$300	\$ _____
	Non-Residential -	\$600	\$ _____
			Total \$ _____

Submission Deadline – Check City’s website (www.saratoga-springs.org) for 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: _____