



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: LOT LINE ADJUSTMENT

Submission Requirements:

Please submit (check boxes):

One (1) hard copy AND one (1) digital copy of the completed application and one (1) copy of the revised plat for review. If approved, the City will require the submission of two (2) mylars (one for City records and one for the applicant to file with Saratoga County Real Property Services) and two (2) paper copies of the approved revised plat.

****HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED****

Application Fee: Total \$300. A check for the total amount made payable to: "Commissioner of Finance" MUST accompany this application.

Part I: General Information

Applicant *

Surveyor/Engineer

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

E-mail: _____

E-mail: _____

Property #1:

Property #2:

Tax Parcel #: _____

Tax Parcel #: _____

Address: _____

Address: _____

Owner's Name: _____

Owner's Name: _____

Phone: _____

Phone: _____

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.

Yes No Will any additional lots be created?

Yes No Will the newly configured lots meet all minimum zoning requirements?

Yes No Will the proposed lot line adjustment comply with the Zoning Ordinance and Subdivision Regulations?

- Yes No Will the proposed lot line adjustment impede (existing or future) access or utility service to the lots?

Part II: Revised Final Plat and Documents Checklist

The revised Final Plat must provide the following in accordance with the following checklist.

- Sheet size: not to exceed 24" x 36"
- Horizontal scale: not to exceed 1"=100'
- Title Block: Include existing subdivision name, identifying title, the words "City of Saratoga Springs, Saratoga County, New York", submission date, names and addresses of applicants and/or property owners, engineers, planners, and surveyors.
- Signature Block should read:

"Approved under authority of the Chairman of the Planning Board of the City of Saratoga Springs per the Subdivision Regulations, Article V.

Chairperson _____ Date Signed _____"

- Site location map
- Location/type of property corners
- Zoning requirements, area and bulk schedule, setbacks
- Tax map numbers
- Names of all adjacent property owners
- Location of all existing/proposed utilities: water, sanitary sewer, storm water
- Location of all existing/proposed water and sewer services
- Any existing/proposed easements
- Any existing/proposed covenants
- Existing boundaries/area
- Proposed boundaries/area
- Seal and signature by licensed land surveyor

Part III: Property Owner(s) Signature

I, the undersigned, have thoroughly read and understand the Application for Lot Line Adjustment and the list of items to be shown on the Plats and Documents for Final Review and I consent to all the requirements as set forth in this application. To the best of my knowledge the information provided in this application and on the attached proposed plat and accompanying documentation is true and accurate.

Property #1:

Property #2:

Printed Name: _____

Printed Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

To be completed by City of Saratoga Springs

- Approved
- Not approved by Chair

Reasons: _____

Note: If the requested lot line adjustment is not approved by the Planning Board Chair as a minor amendment, the applicant may seek approval by appearing before the full Planning Board.

Signature – Planning Board Chair

Date