SETTLED IN 1771 INCORPORATED IN 1807



## Village of Ballston Spa

**Planning Board** 

66 FRONT STREET

## Ballston Spa, NY 12020 518-885-5711

Application for: SITE PLAN REVIEW

[For Office Use]	
(Application #)	
(Date Received)	

Projec	et Name: 303 Milton Ave			
Prope	rty Address/Location:303 Milton	Ave		
Tax P	arcel #203.8-1-45 (For example: 165.52-4-37	Zonin	g District	Central Business District
Narrat	tive Summary of Project (use attach See attached	iment):		
Date s	special use permit granted (if any): _			
Date z	zoning variance granted (if any): _			
Is pro	perty located within (check all that a	pply): □ Historic Di	istrict	
		x 500° of a ∿	Village bound	lary, or County/State Highway
	Applicant(s)**	Owner(s) [if not ap	oplicant]	Attorney/Agent
Name _	One Love Cures LLC/Sachmarie Crowley	Russell Shapiro		Saratoga Associates/Alison Yovin
Address	2 Franklin Square, Suite F1	3 Brittany Terrace		21 Congress Street, Suite 201
	Saratoga Springs, NY 12866	Gansevoort, NY 128	31	Saratoga Springs, NY 12866
Phone	 518-229-2225			518-249-5466
	crowleyfnp@gmail.com	russellsdeli1@gmail	.com	ayovine@saratogaassociates.com
Identify	y primary contact person (check one):	□ Applicant	□ <b>C</b>	Dwner x₁Agent

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

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Application Fee: A check payable to "Village of Ballston Spa" <u>MUST</u> accompany this application.

Fees noted on Village website at www.villageofballstonspa.org - Rates and Forms Municipal

**NOTE:** In accordance with the Village Code – *Chapter 178, Article III, Section 178-8*, the Village may elect to use expert consultation in reviewing this application. In such an event, an estimate of those initial fees will be provided before the review proceeds and the applicant must post those funds in escrow with the Village Clerk. If the estimated fees are expended before the review is complete, the escrow must be replenished before review can continue.

Submission Deadline: All required documents must be provided *2 weeks in advance* of the meeting. See Village website for meeting dates. www.villageofballstonspa.org

Does any Village officer, employee or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application?  $\Box$  **Yes**  $\nabla$  **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, lessee, or purchaser under contract for the property, hereby request a Site Plan Review by the Village of Ballston Spa Planning Board for the identified property above. I agree to meet all the requirements under Village zoning codes.

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

Applicant Signature: Sachmarie Roberta Crowley Date: 5/28/2024

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

Owner Signature: