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)	

Project Name:		
Property Address/Location:		
Tax Parcel #(For example: 165.52-4-37)	Zoning District	
Narrative Summary of Project (use attach	ment):	
Please see attached project narrative.		
Date special use permit granted (if any): _	TBD	_
Date zoning variance granted (if any):		_
s property located within (check all that a	pply): Historic District	
	$\ \square$ 500' of a Village boundary, or	County/State Highway
Applicant(s)**	Owner(s) [if not applicant]	Attorney/Agent
Name		
Address		
Phone		
Email		ysl@lansingengineering.com
dentify primary contact person (check one):	□ Applicant □ Owner	□Agent

** 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.

	All required documents must be provided 2 weeks in advance of the meeting. See Village website for meeting dates. www.villageofballstonspa.org
General Municipal Law	er, employee or family member thereof have a financial interest (as defined by Section 809) in this application? Yes No closing the name, residence, nature, and extent of this interest must be filed

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:	Date:	 _
If applicant is not assument assumes assume must also since below		
If applicant is not current owner, owner must also sign below.		
Owner Signature:	Date:	