



**CITY OF SCHENECTADY
NEW YORK
CITY PLANNING COMMISSION**

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SPECIAL USE PERMIT

Application Filing Requirements:

Please provide 10 sets of your application. Each packet should include the following:

- 1. One copy of the Special Use Permit application**
- 2. One copy of the Short Environmental Assessment Form**
(Go online to www.dec.ny.gov/docs/permits_ej_operations_pdf/seaf.pdf)
- 3. One copy of the site plan drawing**
- 4. One copy of the drawing showing the proposed sign**
- 5. Owner Consent Form**

The filing fee is due at the time you submit your application to be placed on the agenda.

Do not leave anything blank on the application. Call 382-5147 if you need help filling out the forms.

All packets must be folded to fit in an 8 1/2" x 11" envelope. Rolls of drawings are not accepted.

City of Schenectady
Application for a Special Use Permit
under Chapter 264 of the Zoning Code

TO THE PLANNING COMMISSION:

I, _____ the owner of the property located at, _____, Tax map number, Sec. ____ Block ____ Lot ____, Hereby petition the Planning Commission of the City of Schenectady to grant a Special Use Permit under Article XIV of the Zoning Code, Section(s) 264-96 through 99, to allow the following as described below and shown on the accompanying drawings.

Special permit uses are those uses having some special impact or unique form which require a case by case review of their location, design, configuration and impact, to determine against fixed standards, the desirability of permitting their establishment on any particular site. Please answer the following questions with as much detail as possible to assist the Planning Commission with their review. Attach additional sheets as necessary.

1. What is the present zoning classification of the parcel?

2. What are the surrounding parcels used for? (i.e. one family, commercial, parkland)

North	_____	South	_____
East	_____	West	_____

3. Describe the proposed use: (include information as is pertinent to your application about building size, hours of operation, number of employees, number of off-street parking spaces, area to be enclosed, etc.)

4. Provide evidence and information which demonstrates that the proposed use will not substantially impact on the nature and character of the surrounding neighborhood.

5. Explain how the proposed use will not have a substantial or undue adverse effect upon adjacent property, the character of the neighborhood, traffic conditions, parking, utility facilities, and other matters affecting the public health, safety, and general welfare.

6. Explain why your proposed use will not be more objectionable than would a use permitted by the Zoning Code. Specifically, will your proposed use create any nuisances by generating noise, odors/fumes, glare from lighting.

7. Demonstrate to the Commission that the proposed use will be adequately served by storm drainage structures, water, sanitary sewers, off-street parking, access to city streets to handle projected traffic volumes, fire and police protection, schools, and refuse disposal, as these services may be relevant to your project.

8. Explain how your proposal will avoid the loss, destruction, or damage to any natural, scenic, architectural, or historic feature of significant importance, if applicable to your proposal.

9. Demonstrate by the submission of drawings and a narrative that your proposal complies with all zoning regulations which apply.

Date: _____ Signed: _____

Please
Print: _____

Address: _____

City: _____

State: _____

Phone: _____

Email: _____



Owner Consent Form

City of Schenectady – Department of Development

Room 206, City Hall, 105 Jay Street, Schenectady, NY 12305

For further information, please call 518-382-5147

Application Notes _____

The Owner Consent Form is required for the following Applicants:

1. The Applicant is not the owner of record for the subject parcel(s);
2. The property has multiple owners (requires signature from each owner of record); or
3. The Applicant is a corporation or other entity (requires a signatory).

Property Address: _____ Tax Map ID: _____

Property Address: _____ Tax Map ID: _____

Property Address: _____ Tax Map ID: _____

AGENT/APPLICANT INFORMATION

Name: _____ Address: _____

City, State, Zip: _____

OWNER AUTHORIZATION

I, _____ (name), as _____ (owner/title), of (company/property), _____ swear or affirm under penalty of perjury, that I am the owner or authorized representative of the owner(s) of the property and that:

I hereby give consent to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents, and to attend and represent me at all meetings and public hearings pertaining to the attached application.

Furthermore, I hereby give consent to the above referenced party to agree to all terms and conditions which may arise as part of the approval related to this application.

I hereby certify that I have the authority to execute this consent form and any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

Name (Print): _____

Title: _____

Signature: _____

Notarization

SUBSCRIBED AND SWORN TO (or affirmed) before me this ____ day of _____ 20 ____ by _____ .

He/she is personally known to me or has presented identification.

Notary Public/Commissioner of Deeds