



# Town of Ticonderoga

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132 Montcalm Street  
P.O. Box 471  
Ticonderoga, NY 12883  
(518) 585-6677  
Fax (518) 585-7211

## **SPECIAL USE PERMIT APPLICATION**

*(Clerk's Office Use Only)*

APPLICATION NO: \_\_\_\_\_ DATE : \_\_\_\_\_

FEE PAID: \_\_\_\_\_

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### **Requirements, Fees and Instructions** (Please use dark blue or black ink)

The application must be filled out completely and in every respect with ALL questions answered and ALL required attachments before the Town can officially accept the application for processing. If the application is incomplete, it will be returned to you for completion or inclusion of the deficient information.

Use this application for any project which is a permitted special use within a zoning district and requires a Special Use Permit by the Town of Ticonderoga Zoning Board.

**THIS APPLICATION IS SUBJECT TO REVIEW AND APPROVAL BEFORE ISSUANCE OF A VALID PERMIT FOR YOUR PROJECT. TO ENSURE TIMELY REVIEW OF YOUR APPLICATION PLEASE COMPLETE THIS FORM IN ITS ENTIRETY AND PROVIDE WITH THIS APPLICATION THE FOLLOWING DOCUMENTATION:**

- Copy of Deed
- Boundary & Topographic Survey
- Agricultural Data Statement (as applicable)
- Waiver Request Form (as applicable)
- Authorization of Agent (as applicable)
- Copy of Variance(s) or Special Use Permit Approvals
- Site Plan (include as much detail as possible and all existing or proposed conditions on the property must be shown) Must be detailed in accordance with the Town of Ticonderoga Site Plan Review Law.
- Floor plans and elevations of existing or proposed buildings (as applicable)
- SWPPP (Storm Water Pollution Prevention Plan (as applicable)
- Onsite Wastewater Disposal Plans (as applicable)
- EAF (NYSDEC Environmental Assessment Form, Short or Long Form, as applicable)
- Information related to the following; site layout and dimensions, parking, access (include site distance), vehicular maneuvering, traffic, noise, grading, drainage, lighting, erosion and sediment control, landscaping, screening or buffers, fencing, water, sewer, utilities, cultural resources, endangered species or habitat, wetlands, flood plains, emergency services, fire safety, signage, loading/unloading zones, ADA compliance, and etc.

**THE FOLLOWING SUBMISSIONS ARE REQUIRED:**

**ONE (1) ORIGINAL SIGNED SET OF APPLICATION MATERIALS AND SUPPORTING DOCUMENTATION.**

**SEVEN (7) COPIES OF THE APPLICATION MATERIALS AND ALL SUPPORTING DOCUMENTATION.**

**NOTE THAT ALL MAPS AND DRAWINGS MAY BE SUBMITTED ON 11X17 PAPER PROVIDED THAT ONE FULL SIZE SET OF PLANS IS SUBMITTED WITH THE ORIGINAL SET.**

**ONE (1) ELECTRONIC COPY VIA PDF EITHER ON A FLASH DRIVE OR EMAILED TO [buildinginspector@townofticonderoga.org](mailto:buildinginspector@townofticonderoga.org) IF YOU CANNOT SUBMIT ELECTRONICALLY CONTACT THE CODE ENFORCEMENT OFFICE BEFORE SUBMITTING YOUR APPLICATION.**

**ALL APPLICATION MATERIALS ARE DUE NO LATER THAN TWELVE NOON ON THE FIRST BUSINESS DAY OF THE MONTH PRIOR TO THE MEETING, I.E., APPLICATION MATERIALS FOR A DECEMBER MEETING ARE DUE NO LATER THAN THE FIRST BUSINESS DAY OF NOVEMBER, ETC.**

**IF YOUR APPLICATION IS TABLED FOR ANY REASON, PLEASE NOTE THAT ALL MATERIALS REQUESTED MUST BE SUBMITTED BY THE 15<sup>TH</sup> OF THE MONTH AT TWELVE NOON. IF THE 15<sup>TH</sup> FALLS ON A SATURDAY OR SUNDAY, THE DEADLINE IS THE NEXT FOLLOWING BUSINESS DAY AT TWELVE NOON.**

**THERE ARE NO EXCEPTIONS TO THE FILING DEADLINES.**

**GENERAL INFORMATION**

**Project Location and Information**

**Number and Street Address:** \_\_\_\_\_

**Zoning District:** \_\_\_\_\_

**Tax Map Number:** \_\_\_\_\_

**Current Use of the Property/Building:** \_\_\_\_\_

**Property Owner Identification**       **Owner is Applicant**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contractor/Builder Identification**     **Contractor is Applicant**     **TBD**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Agent Identification**                       **Agent is Applicant**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Description of proposed project:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What is the specific planned permitted special use for the parcel?**

\_\_\_\_\_

**Total Parcel Area:** \_\_\_\_\_ ac or sf

**Are there any zoning violations or existing non-conforming conditions on the property?**

**Yes**    **No**

**If yes, please explain:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is the lot or parcel for the project within 500 feet of a County or State Highway, Right-of-Way or Park, or Municipal Boundary?**

Yes  No

**If yes, please explain:**

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**Is the lot or parcel for the project within a designated flood plain?**

Yes  No

**Is the lot or parcel for the project within the TOT Grassland Boundary?**

Yes  No

**Is the lot or parcel for the project within an area known to contain threatened and/or endangered species to include plants or animals?**

Yes  No

**Does the lot or parcel for the project consist of or contain designated wetlands?**

Yes  No

**Is the lot or parcel for the project within close proximity to any designated or important historic properties or cultural resources?**

Yes  No

**Describe the current condition of the site [buildings, brush, woods, vacant, etc.]:**

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## ZONING INFORMATION

**Site Development Data**

Acres       Sq. Ft.

	Area/Type	Existing	Proposed	Total
<b>A.</b>	Building Footprint			
<b>B.</b>	Detached Garage			
<b>C.</b>	Accessory Structure(s)			
<b>D.</b>	Paved, gravel or other hard surfaced areas			
<b>E.</b>	Porches/Decks/Patios			
<b>F.</b>	Lawn or Landscape Areas			
<b>G.</b>	Forested/Woods/Brush/Vegetated			
<b>H.</b>	Other: _____			
<b>I.</b>	Other: _____			
<b>TOTAL</b>				

**Lot, Yard and Height Regulations (Bulk Requirements)**

Item	Required	Existing	Proposed
Lot Size (acres)			
Lot Width (ft)			
Lot Depth (ft)			
Front Yard (ft)			
Side Yard - One (ft)			
Side Yard - Both (ft)			
Rear Yard (ft)			
Max. Building Coverage			
Max. Building Height			
No. of Parking Spaces			
No. Loading Berths			

**PROJECT DETAILS**

Commercial Project     Residential Project

- Type of Project:**
- New Construction
  - Building Addition
  - Attached Garage
  - Conversion/Change of Use
  - Alteration/Modifications
  - Repairs/Maintenance
  - Misc./Equipment/Other: \_\_\_\_\_

**What is/are the existing or proposed use(s) for the site?**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Group A – Assembly</b>    | <input type="checkbox"/> <b>Group B - Business</b>            |
| <input type="checkbox"/> <b>Group E – Educational</b> | <input type="checkbox"/> <b>Group F – Factory/Industrial</b>  |
| <input type="checkbox"/> <b>Group H – High Hazard</b> | <input type="checkbox"/> <b>Group I – Institutional</b>       |
| <input type="checkbox"/> <b>Group M – Mercantile</b>  | <input type="checkbox"/> <b>R – Residential</b>               |
| <input type="checkbox"/> <b>Group S – Storage</b>     | <input type="checkbox"/> <b>U – Utility and Miscellaneous</b> |

**Estimated Project**

**Cost:** \_\_\_\_\_

**Estimated start date of project:** \_\_\_\_\_

**Estimated time to completion:** \_\_\_\_\_ months

**UTILITIES**

- |                         |   |  |   |  |
|-------------------------|---|--|---|--|
| <b>Electrical:</b>      | <input type="checkbox"/> <b>Underground</b>   | <input type="checkbox"/> <b>Overhead _____ amp service</b>         |   |  |
| <b>Sewage Disposal:</b> | <input type="checkbox"/> <b>Onsite Septic</b> | <input type="checkbox"/> <b>Municipal Sewer (provide approval)</b> |   |  |
| <b>Potable Water:</b>   | <input type="checkbox"/> <b>Private Well</b>  | <input type="checkbox"/> <b>Municipal Water (provide approval)</b> |   |  |
| <b>Combustion Fuel:</b> | <input type="checkbox"/> <b>Fuel Oil</b>      | <input type="checkbox"/> <b>Propane</b>                            | <input type="checkbox"/> <b>Natural Gas</b> | <input type="checkbox"/> <b>Other: _____</b> |

**PERMITS/APPROVALS**

**Please specify what other permits are being applied for as a result of the proposed work:**

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Accessory Structure</b>        | <input type="checkbox"/> <b>Swimming Pool</b>   |
| <input type="checkbox"/> <b>Onsite Wastewater Disposal</b> | <input type="checkbox"/> <b>Sign Permit</b>     |
| <input type="checkbox"/> <b>Demolition</b>                 | <input type="checkbox"/> <b>Building Permit</b> |
| <input type="checkbox"/> <b>Driveway</b>                   | <input type="checkbox"/> <b>Other: _____</b>    |

**Please specify what approvals or permits have been/will be obtained as a result of the project:**

- |  |  |
|--|--|
| <input type="checkbox"/> <b>TOT Special Use Permit</b> | <input type="checkbox"/> <b>NYSDEC SPDES Permit-Stormwater</b> |
| <input type="checkbox"/> <b>TOT Subdivision</b>        | <input type="checkbox"/> <b>NYSDEC SPDES Permit-Wastewater</b> |
| <input type="checkbox"/> <b>TOT Area Variance</b>      | <input type="checkbox"/> <b>NYSDOH Potable Water Well</b>      |
| <input type="checkbox"/> <b>TOT Use Variance</b>       | <input type="checkbox"/> <b>NYSDOH Wastewater System</b>       |
| <input type="checkbox"/> <b>TOT Water Permit</b>       | <input type="checkbox"/> <b>TOT Sewer Permit</b>               |
| <input type="checkbox"/> <b>Other: _____</b>           | <input type="checkbox"/> <b>NYSDOH Realty Subdivision</b>      |

Other: \_\_\_\_\_  Other: \_\_\_\_\_

**SITE PLAN REQUIREMENTS**

Will the proposed project include or alter or change site conditions related to the following (check all that apply)?

- Traffic
- Runoff/Drainage
- Grading
- Impervious
- Building Coverage
- Signage
- Roads/R.O.W.
- Screening/Buffers/Fences
- Lighting
- Noise
- Utilities (electric, gas, water, sewage, etc)
- Site Access
- Parking
- Landscaping
- Easements
- Pedestrian Accommodations/Sidewalks

**Additional Comments:**

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**Character/Uses of surrounding or adjacent lands:**

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Does your project include design elements that allow the facility to be operated or to exist in its location such that the neighborhood, public health, safety, welfare, and convenience of the Town citizens will be protected?  Yes  No

Please explain:

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Will the project cause any substantial injury to the value of other property in the neighborhood where it is to be located (attached additional information as necessary)?

Yes  No

Please explain:

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**Will the proposed special use be compatible with adjoining development and the proposed character of the zoning district in which it is located?  Yes  No**

**Please explain:**

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**Does the project as designed include provisions for landscaping and screening or buffers to mitigate any impact on adjacent properties or the general public?  Yes  No**

**Please explain:**

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**Has adequate off-street parking and loading been provided along with proper ingress and egress from the site such that it will result in minimal interference with traffic on abutting streets or roads ?  Yes  No**

**Please explain:**

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**Will the proposed special use permit result in a use which will or could cause an excessive or burdensome use of existing streets, transportation facilities, utilities, or other services?**

Yes  No

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**Is the proposed special use permit in conformance with the general policy and intent of the Town's Master Plan and/or Comprehensive Plan (if enacted)?  Yes  No**

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**Are there other existing or changing conditions affecting the use and development of the property which give supporting grounds for either approval or disapproval of the proposed special use permit?  Yes  No**

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**Additional Comments:**

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**SIGNATURE PAGE**

**To the best of my knowledge, the statements contained in this application, together with the plans and specifications and other supporting documentation submitted are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the Building Codes, the Zoning Ordinance, and all other local, state, and federal laws pertaining to the proposed work shall be complied with, whether specified or not.**

**Further, unless specified or extended by the Planning Board, a decision on any site plan review shall expire if the Applicant fails to undertake the proposed action or project, to obtain the necessary building permits to construct any proposed new building(s) or change any existing building(s) or to comply with the conditions of said authorization within one year from the filing date of such decision thereof.**

**The Planning Board may employ consultants, legal counsel, professional engineers, and/or inspection services for their assistance and advice in the review of any application before it and for such purposes as the Planning Board may require therefor, including but not limited to; on site investigation, evaluation and inspection, verification of the accuracy of information submitted, evaluation of the adequacy of plans, of the sufficiency of submitted reports; flood hazard evaluation; study of the impact of proposals upon the resources and environment of the Town; preparation and/or review of any environmental impact statements; review of the design and layout of improvements; inspection of installed improvements; and such other services or technical assistance as the Planning Board shall deem necessary for its review of such application, and for the administration of the Town, County, State, and Federal regulations in relation thereto. The Applicant authorizes the Planning Board, as it deems necessary, to employ such assistance and agrees to reimburse the Town for the costs and fees associated with any requested consultants to assist them in their review and consideration of the application, whether it be for either technical or legal purposes. When appropriate the Planning Board shall have the authority to request a deposit from the Applicant for the cost and fees associated with consultants in advance of the review.**

**It is understood that the Applicant shall satisfy all requirements of the site plan approval or decision and conditions applicable to such prior to a Certificate of Occupancy or Certificate of Compliance being issued.**

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Signed:** \_\_\_\_\_