

Town of Brunswick

Planning Board

336 Town Office Road

Troy, New York 12180

Phone (518) 279-3461 Fax (518) 279-4352

www.townofbrunswick.org

Special Use Permit

If you request that a special use permit be granted, you are required to do the following:

1. Complete and file an application using the form provided to you by the Building Department
2. Provide the required number of copies of a plot plan of your premises showing the location of the improvements anticipated to be made and all setbacks, along with the required number of copies of all other required documentation
3. Pay the required fee: \$250.00 Residential/Agricultural Zoned Properties
\$500.00 All Others
4. Appear at the scheduled hearing before the Planning Board of Appeals and present evidence sufficient to satisfy the requirements of Section 7 of the Brunswick Zoning Law and Article 8: Special Use Permit Section 160-63 of the Zoning Law of the Town of Brunswick.

As an applicant, it is your obligation to present written and oral testimony and to call such witnesses as you may deem necessary in order to satisfy the Planning Board of Appeals that criteria for granting a special use permit are met.

Very truly yours,

Town of Brunswick Planning Board

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PLEASE READ BEFORE COMPLETING FORMS

INFORMATION AND PROCEDURES FOR SPECIAL USE PERMIT

NOTE: IF THE FOLLOWING INSTRUCTIONS ARE NOT COMPLIED WITH YOUR PAPERWORK FOR A SPECIAL USE PERMIT, IT CANNOT BE PROCESSED.

ALL FORMS MUST BE PRINTED NEATLY IN BLACK INK OR TYPEWRITTEN FOR LEGIBILITY. ATTACHMENTS CAN BE DONE AND MUST CONTAIN ADDRESS, INCLUDING ZIP CODE.

1. Complete and return one signed original and nine additional copies of the "Application for a Special Use Permit".
2. Complete and return one signed original and nine additional copies of the "Environmental Assessment Form".
3. Submit **10 copies of plot plan (11 copies if property is within 500 feet of a State or County roadway)** showing all dimensions of buildings, yard (front, side and rear setbacks of building(s) (proposed and existing)), lot size, and streets.
4. Submit application fee to process application. The fee is nonrefundable. **Make check payable to the Town of Brunswick.**
5. The Planning Board holds public hearings on the **1st and 3rd Thursdays of the month at 7 P.M. in the Brunswick Town Hall, 336 Town Office Road, Troy.**

APPLICANT MUST APPEAR AT THE PUBLIC HEARING

If you are going to submit anything to the PB at the hearing, 10 copies will be required.

6. **Please note:** If a special use permit is granted for a subdivision or site plan, a **Building and Zoning Permit must be obtained before any work is started.**

"SUCH APPEAL SHALL BE TAKEN WITHIN SIXTY DAYS AFTER THE FILING IN THE TOWN CLERK'S OFFICE OF ANY ORDER, REQUIREMENT, DECISION, INTERPRETATION OR DETERMINATION OF THE ADMINISTRATIVE OFFICIAL CHARGED WITH THE ENFORCEMENT OF SUCH ORDINANCE OR LOCAL LAW, FROM WHICH THE APPEAL IS TAKEN." (NEW YORK STATE TOWN LAW §267.a(5)).

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Application for a Special Use Permit

General Information

Applicant:

Name: _____

Company: _____

Address: _____

Phone: _____

Application Number _____

Date Application Received _____

Hearing Scheduled Date _____

Application Fee _____

Approved Date _____ Conditions (Y/N) _____

Denial Date _____ Withdrawn Date _____

Planning Board Chairperson _____

Property Owner:

Name: _____

Company: _____

Address: _____

Phone: _____

Applicant is: Owner ___ Builder ___ Lessee ___ Architect/Engineer ___ Agent ___ Other ___

If other, explain: _____

Lot Information

Street Address of Lot: _____

Parcel ID Number: _____ Zoning District _____

Irregular Shape of Lot (Y or N) _____ Corner Lot (Y or N) _____

Existing: Lot Area _____ Frontage _____ Depth _____

Setbacks: Front _____ Rear _____ Left _____ Front _____

Proposed: Lot Area _____ Frontage _____ Depth _____

Setbacks: Front _____ Rear _____ Left _____ Front _____

Type of Water Service: _____ Type of Sanitary Disposal: _____

Describe Existing Use: _____

Briefly describe the proposal: _____

Abutters-Adjacent Property Owners

List the name and addresses for each adjacent property owners. Use additional paper if needed.

	Name:	Address:	Property Use:
Front:	_____	_____	_____
Rear:	_____	_____	_____
Left:	_____	_____	_____
Right:	_____	_____	_____

Required Submittals

- _____ A plot plan showing all dimensions of buildings, yard (front, side and rear setbacks of building(s) (proposed and existing)), lot size, and streets.
- _____ Part 1 of the State Environmental Quality Review Act (SEQRA) Short Environmental Assessment Form
- _____ Application fee

**NOTE: Additional submittals may be required by the Planning Board.
Failure to submit all required documents may result in delay
in the processing or denial of the application.**

For Special Use Permit Applications, please complete the following:

Describe the requested use: _____

1. Explain why the proposed Special Use is reasonably necessary for the public health or general interest of welfare.

2. Explain how the proposed Special Use is appropriately located with respect to transportation facilities, water supply, fire and police protection, waste disposal and other similar facilities.

3. Explain how the proposed Special Use provides adequate parking spaces to handle expected public attendance.

4. Explain how the proposed Special Use provides reasonable safeguards for neighborhood character and surrounding property values.

5. Explain why granting the requested Special Use will not cause undue traffic congestion or create a traffic hazard.

6. Explain how the application for the Special Use Permit complies with standards prescribed in the Town of Brunswick Zoning Ordinance for _____ (use).

7. Explain whether the applicant for the Special Use Permit has also applied for all other necessary permits and/or approvals from other governmental authorities.

Certification and Authorization

I certify that the information contained in this application is true to the best of my knowledge and I authorize the Town of Brunswick to process this application as provided by law.

I also authorize the Town of Brunswick Building Department and Planning Board to enter the property that is the subject of this application for the purpose of inspection and consideration of the application documents.

Applicant:

Property Owner:

Name: _____

Signature: _____

Date: _____

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		_____ acres	
b. Total acreage to be physically disturbed?		_____ acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____			

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: _____ Date: _____

Signature: _____