TOWN OF COLONIE

PLANNING BOARD

PLANNING & ECONOMIC DEVELOPMENT DEPARTMENT

PUBLIC OPERATIONS CENTER
347 OLD NISKAYUNA ROAD
LATHAM, NEW YORK 12110-2289
PHONE (518) 783-2741 FAX (518) 783-2888
Planning Board Agenda (518) 783-1511

Approval # _____

MAJOR SITE PLAN APPLICATION

An approved "Application for Zoning Verification" and all attachments thereto, including any approved plan, must be submitted with this form.

ADDRESS OF SITE: _____ _____
Number Street Name Of Business/Tenant

APPLICANT*: _____

Address _____
Number Street City State Zip

Email: _____ PhoneNo. during business hours: _____ Fax #: _____

CONTACT PERSON: _____

Address _____
Number Street City State Zip

Email: _____ PhoneNo. during business hours: _____ Fax #: _____

NAME OF PRESENT PROPERTY OWNER: _____

Address _____
Number Street City State Zip

DESIGN PROFESSIONAL (NYS Licensed) _____
Check One Engineer ____ Surveyor ____ Architect ____ Landscape Architect ____

Address _____
Number Street City State Zip

Email: _____ PhoneNo. during business hours: _____ Fax #: _____

PROPOSED USE (Check where applicable and provide floor area for each use)

USE	GROSS FLOOR AREA	USE	GROSS FLOOR AREA
____ Office	_____ sq. ft.	____Wholesale Business	_____ sq. ft.
____ Retail Sales	_____ sq. ft.	____Warehouse/Distribution	_____ sq. ft.
____ Food Establishment	_____seats _____sq. ft.	____Manufacturer	_____ sq. ft.
____ Multi-Family	_____ units _____ sq. ft.	____Basement	_____ sq. ft.
____ Motel, Hotel	_____rooms _____ sq. ft.	____Other (specify)	_____ sq. ft.
		Total:	_____sq. ft.

Area of Parcel _____ Acres _____ Sq. Ft. _____Stories

Disposition of Parcel (in square feet)	Existing	Proposed to be added (or deleted)	Total	Total (as % of site)
Building Area	_____	_____	_____	_____
Paved Area (including walks, gravel, etc.)	_____	_____	_____	_____
Green Area	_____	_____	_____	_____
Number of Parking Spaces	_____	_____	_____	

Does Site Have Town Water? Yes _____ No _____ Town Sewer? Yes _____ No _____
Is extension of Town sewer, water, or street proposed? Yes _____ No _____

Access to Town Highway? Yes _____No _____ County Highway? Yes _____No _____ State Highway? Yes _____No _____

Number of Employees Presently in Maximum Shift _____Proposed _____

APPLICANT'S SIGNATURE*: _____

PRINT OR TYPE NAME SIGNED: _____ DATE: _____

* Applicant must be either the owner of the property to be developed or used, or be a party with a purchase agreement for the property. A copy of the purchase agreement must be attached.

OFFICIAL USE ONLY

Fee Amount: _____ Date Paid: _____ Receipt #: _____

___ **APPROVED** ___ **DENIED** pursuant to the decision of the Planning Board on _____
Approval shall be valid until _____

Signature of P.E.D.D. Official _____ Date _____