



# VILLAGE OF TIVOLI

HISTORIC WATTS DEPEYSTER HALL ~ TIVOLI, NY 12583

- **Planning Department**

Office: 845.757.2021 ~ Fax: 845.757.5416

Email: [villagehall@tivoliny.org](mailto:villagehall@tivoliny.org) ~ Web: [www.tivoliny.org](http://www.tivoliny.org)

## **Application For Site Plan Review and Approval and/or Special Permit**

**Note:** Please refer to the site plan and/or special permit checklists for a description of the submission requirements and to the fee schedule for a list of applicable fees and required escrow deposits. *Incomplete applications will not be processed.*

Planning Board review will require a **minimum** of two Planning Board meetings and a public hearing.

In order to be considered as an agenda item, a complete submission must be received not less than ten (10) calendar days prior to a scheduled Planning Board meeting.

Prior to submitting an initial application, prospective applicants should contact the Planning Board staff at (845) 757-2021 or via e-mail at [villagehall@tivoliny.org](mailto:villagehall@tivoliny.org). The Planning Board encourages pre-submission conceptual presentations, where appropriate.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



# VILLAGE OF TIVOLI

HISTORIC WATTS DEPEYSTER HALL ~ TIVOLI, NY 12583

• **Planning Board**

Office: 845.757.2021 ~ Fax: 845.757.5416  
Email: [villagehall@tivolinyny.org](mailto:villagehall@tivolinyny.org) ~ Web: [www.tivolinyny.org](http://www.tivolinyny.org)

Date Rec'd _____
Application # _____
App Fees Pd _____

## Application For Site Plan Review and Approval and/or Special Permit Please Type or Print

### Type of Approval(s) Sought:

Site Plan     Amended Site Plan     Special Permit     Amended Special Permit

**1 Name of Project** (if any) \_\_\_\_\_

**2 Name of Applicant** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_ Daytime Phone \_\_\_\_\_

**3 Owner of Property, if not applicant** \_\_\_\_\_ Phone \_\_\_\_\_

Mailing address \_\_\_\_\_

(If the answer is no, consent of authorization to act is required)

**4 Person or Firm representing applicant** \_\_\_\_\_ (architect, engineer, attorney, etc)

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

### 5 Property

Location of Proposed Site \_\_\_\_\_

Total Site Acreage \_\_\_\_\_

Tax Map Parcel No. \_\_\_\_\_

Zoning District \_\_\_\_\_

Current Use of Site \_\_\_\_\_

Proposed Use of Site \_\_\_\_\_

#### Nature of Proposal

- New project site, including new buildings and site improvements
- Modification of an existing building
- Modification of an existing developed site
- Change of use of an existing building or site

Is the Land or any part thereof in

- Regulated Wetlands
- Flood Plain
- Town Environmental Overlay District
- Town Local Waterfront Revitalization Area
- State or National Historic District

Is the Land in, or within 500 feet of, a Certified Agricultural District?  Yes  No

**Zoning Enforcement Officer Determination** (identify zoning section #) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_