SARATOGA COUNTY PLANNING BOARD
PLANNING AND ZONING ACTION REFERRAL FORM

This form constitutes an official referral to the Saratoga County Planning Board under GML §239-l, -m, and -n (see page 2). Please note that failure to provide complete information may delay the County Planning Board's ability to render a decision.

Municipality: ☐City ☐Town ☐ Village of _____

Referring Agency: ☐ Legislative Board ☐ Planning Board ☐ Zoning Board of Appeals

Project Name: _____ Project Address: _____

Applicant Name: _____ Property Owner Name: _____

Parcel Size: _____ Tax Parcel #: _____ Current Zoning District: _____

Primary Road Frontage: _____ Length _____

Project Description: (attach additional pages if necessary)

Type of Action

☐ Area Variance ☐ Area Variance (Sign) ☐ Use Variance ☐ Site Plan Review

☐ Subdivision Review ☐ Special Use Permit ☐ Adoption/Amendment of Comprehensive Plan

☐ Adoption/Amendment of Zoning Ordinance or Local Law (☐Text OR ☐Map) ☐ Moratorium ☐ PDD

☐Response to SCPB Request for Additional Information - SCPB Referral # _____

Jurisdictional Determinant

☐ Project is located in ☐ Ag. District 1 or ☐ Ag. District 2 (please attach Ag Data Statement and Control Form) **OR**

Location of project boundary is **within 500 feet** of the existing or proposed facilities:

☐ Municipal boundary shared with: _____

☐ State, County, or Interstate Road _____

☐ State or County Park / Recreational Facility _____

☐ State or County Property / Facility _____

☐ Farm operation in a designated Ag. District (please attach Ag Data Statement and Control Form)

State Environmental Quality Review (SEQR) Review required? ☐Not yet determined ☐No ☐Yes (submit EAF)

Other Involved agencies (with permitting authority): ☐SCDPW ☐NYSDOT ☐NYS/SC DOH ☐NYSDEC

☐ Adirondack Park Agency ☐ Other (please specify) _____

Has Lead Agency been designated? ☐No ☐Yes If yes, Lead Agency _____

Status of Local Approval: Preliminary Approval Issued: ☐ No ☐ Yes, Date _____

Date of Public Hearing: _____ Date Referring Agency proposes to act on application: _____

Check off all required supporting documents that are attached to this referral (see page 2 for requirements)**:**

☐ Municipal Application ☐ Project Narrative ☐ Site Plan / Map ☐ Subdivision Plat ☐ Municipal/Advisory Review

☐ Environmental Assessment Form ☐ Text of Proposed Legislation ☐ Ag Data Statement ☐ Other _____

Submitted by Name: _____ Title: _____

Department or Agency: _____ Phone #: _____

Address: _____ Email address: _____

Signature: _____ Date: _____

SUBMIT COMPLETED FORM AND SUPPORTING DOCUMENTATION TO SCPBreferrals@saratogacountyny.gov OR MAIL TO: Saratoga County Planning Board, 50 W. High St, Ballston Spa, NY 12020. For more information, call 518-884-4705.

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As required by the New York State General Municipal Law, Section 239-l, -m and -n, applications are subject to the referral requirements if it applies to real property within **five hundred feet** of the following:

(i) the boundary of any city, village or town; or

(ii) the boundary of any existing or proposed county or state park or any other recreation area; or

(iii) the right-of-way of any existing or proposed county or state parkway, thruway, expressway, road or highway; or

(iv) the existing or proposed right-of-way of any stream or drainage channel owned by the county or for which the county has established channel lines; or

(v) the existing or proposed boundary of any county or state owned land on which a public building or institution is situated; or

(vi) the boundary of a farm operation located in an agricultural district, as defined by article twenty-five-AA of the agriculture and markets law, except this subparagraph shall not apply to the granting of area variances.

The following documents are required with each submission:

- Municipal Application Form
- Project Narrative
- Environmental Assessment Form
- Municipal/Advisory Review documents (include any prior Referral response letters)
- Map/Plan, as appropriate

The following documents may be required depending on the type of referral:

- If the **project is in Ag District 1 or 2**, or the project is **within 500' of a farm operation in an Ag District**, an Ag Data Statement and Control Form is required.
- If the **referral is for a variance, special permit, subdivision or site plan review**, the submitted map/site plan should include the following if applicable:
    a) location, setback, height and use of all existing and/or proposed buildings on subject and adjacent lot or parcel
    b) adjacent land uses and current zoning designation
    c) location of existing and proposed streets, driveways and off-street parking facilities
    d) location and type of water supply and sewage disposal
    e) existing and proposed contours as per preliminary submission
    f) drainage-ways
    g) location of existing watercourses, wetlands, and floodplains
    h) location, size and construction materials of all proposed signage
    i) location, size and construction materials of all outdoor storage
- If **referral is for an amendment to the zoning map or comprehensive plan map**, enclose a map of the area proposed to be rezoned.
- If **referral is for amendment to the zoning ordinance or comprehensive plan**, including PDDs, enclose the text of the proposed changes (with additions and deletions denoted).
- A copy of any report or recommendation to the legislative body from the municipal planning board should be provided along with any initial statement of intent and purpose.

PLEASE NOTE THAT INCOMPLETE REFERRALS WILL NOT BE ACCEPTED FOR REVIEW.