

**Special Use**



**VILLAGE OF COBLESKILL – PLANNING, ENVIRONMENT & CODES DEPT.**

378 Mineral Springs Road, Cobleskill, NY 12043

Phone: 518-234-4661 Fax: 518-234-4075

**SPECIAL USE PERMIT REVIEW APPLICATION**

Mike Piccolo: cell: 518-706-0404  
email:pecceo@midtel.net

Brian Robson: cell: 518-948-6196  
email:pecsec@midtel.net

Application Fee: \$25.00

Office Use Only

File # \_\_\_\_\_ Permit # \_\_\_\_\_ Date: \_\_\_\_\_  
District: \_\_\_\_\_ SBL # \_\_\_\_\_ Floodplain? Y / N

**Project Information**

Project Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Property Owner's Name (if different): \_\_\_\_\_

Property Owner's Address (if different): \_\_\_\_\_

Property Owner's Phone Number (if different): \_\_\_\_\_

Property Owner's Email (if different): \_\_\_\_\_

**Project Details**

Brief Description of Work:

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

Total Estimated Project Cost: \_\_\_\_\_

**Note: Detailed application instructions are included with this application.**

\_\_\_\_\_, **BEING DULY SWORN**, deposes and says that they are the applicant above named, and that they are the  **OWNER** or  **OWNER'S AGENT/REPRESENTATIVE**, and are duly authorized to perform or have performed the proposed work, and to make and file this application; that all statements contained in this application package are true to the best of their knowledge and belief, and that the work will be performed in the manner set forth in the application and specifications filed therewith, and in accordance with applicable laws, ordinances, rules and regulations.

**THE APPLICANT RECOGNIZES THAT** it may be necessary for Village Staff or members of the planning Board, the Historic District Review Commission, the Zoning Board of Appeals, and/or the Street Tree Committee to conduct an on-site visit of the exterior and/or interior of the property that is the subject of the application.

**THE APPLICANT HEREBY AGREES THAT** such on-site visit(s) may be conducted as deemed necessary. Whether a site visit is necessary for the purpose of reviewing the application shall be within the sole discretion of the Village Staff and/or Boards/Commission members.

**The Applicant Further Agrees**, that by submitting this application, the applicant shall hold harmless the Village of Cobleskill, the Village Staff and/or Boards/Commission and their members and agents in their official and individual capacities for any damage or injury alleged to have been caused as a result of any site visit made pursuant to this application.

**SWORN TO BEFORE ME THIS** \_\_\_\_\_ **DAY OF** \_\_\_\_\_ **IN THE YEAR** \_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Notary Public

## Special Use Review Instructions



### VILLAGE OF COBLESKILL – PLANNING, ENVIRONMENT & CODES DEPT.

378 Mineral Springs Road, Cobleskill, NY 12043

Phone: 518-234-4661 Fax: 518-234-4075

# SPECIAL USE PERMIT REVIEW APPLICATION INSTRUCTIONS

*(For Applicant's reference only. Do not return to the PEC office)*

Mike Piccolo: cell: 518-706-0404  
email:pecceo@midtel.net

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These are the minimum submission requirements as set forth in Chapter 160, Code of the Village of Cobleskill, for any Special Use Permit Application. The Village reserves the right to request additional information to support an application. If these minimum requirements are not met, the Village reserves the right to reject the application. Applicants for Special Use Permits are encouraged to meet informally with the Planning Board prior to formal application.

## General Overview

Your application must include a \$25.00 money order or check payable to the Village of Cobleskill, and an original plus two (2) collated copies of the following:

- A basic application form, attached.
- A Site Plan (as described in Article VII of the Zoning Law of the Village of Cobleskill).
- An area map showing the parcel under consideration for Special Use Permit and all properties, subdivisions, streets, and easements within 200 feet of the boundaries thereof. Such area map shall be oriented to the nearest highway intersection.
- The general slope of the parcel under consideration and a notation giving the estimated percentage of slope on the parcel.
- Such additional information as needed for other reviews or submittals required under State, Federal, or Local Laws and Regulations.
- A narrative report describing how the proposed use will fit into the character of the surrounding area.
- Completed Part I of an Environmental Assessment Form (EAF) or Draft Environmental Impact Statement (DEIS).
- A completed Affidavit of Mailing Notice, stating that Notice of Submission of the Special Use Permit application has been mailed to owners of all properties within two hundred feet (200') of the proposed use (blank forms attached).

**Affadavit of Mailing**  
**Notice of Special Use Permit Application**  
**Submitted to the Village of Cobleskill**

*STATE OF NEW YORK*     )  
  )  
*COUNTY OF SCHOHARIE*   )  
  )     **SS.:**

\_\_\_\_\_, residing at \_\_\_\_\_, being duly sworn, says that they are over the age of 18 years, that on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, they deposited in the post office or in a post office box regularly maintained by the government of the United States in \_\_\_\_\_, State of New York, a copy of the attached notice of submission of application for Special Use Permit contained in a securely closed postpaid wrapper directed to each of the persons named on the attached sheets at the places set opposite their respective names.

Sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Notary Public Signature

Commission Expires:

(Affix Notary Stamp or Seal)

# Notice of Submission

**Special Use Permit Application – File #** \_\_\_\_\_

Submitted to:

Village of Cobleskill Planning, Environment, and Codes Department, 378-1A Mineral Springs Road, Cobleskill, NY 12043

Telephone 518-234-4661, Fax 518-234-4075

Date this notice mailed: \_\_\_\_\_

To: \_\_\_\_\_,

As owner of (location) \_\_\_\_\_ SBL # \_\_\_\_\_

I have submitted an **Application for Special Use Permit** for

(use) \_\_\_\_\_ to be

established at (*address*) \_\_\_\_\_ .

In compliance with Village Code § 160-6.2., I am notifying you because you own property within 200 feet of the proposed use.

The Village Planning Board reviews applications for Special Use Permits, as detailed in Village Code Chapter 160 – Zoning.

Applicant's Name, printed: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date

## Neighboring Properties

All Neighboring properties within 200 feet of the subject property. List the owner, mailing address of owner, and the Tax Map Parcel Number. *(Attach additional sheets if necessary)*

Owner(s): \_\_\_\_\_  
Mailing Address(es): \_\_\_\_\_  
Tax Map Parcel #: \_\_\_\_\_

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Mailing Address(es): \_\_\_\_\_  
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