



**TOWN OF  
GREENWICH  
PLANNING BOARD**

2 Academy Street Greenwich, NY 12834  
518-692-7611 ext. 106

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**SPECIAL USE PERMIT**

*Special Use Permit review shall be required for any use listed in Table 1, of the Town of Greenwich Zoning Ordinance, as requiring special use permit review, including any change in existing use or to construct, improve, remodel, renovate, demolish or convert any building or structure listed as requiring special use permit in Table 1, or for any amendment to an approved special use permit.*

Dear Special Use Permit Applicant,

Attached you will find the preliminary requirements for your application.

1. Application Form
2. Designated Agency Form, if applicable.
3. Short Environmental Assessment Form (**Complete Part 1 Only**)
4. Agricultural Data Statement, if applicable.
5. Checklist for Special Use Permit.
6. Checklist for Site Plan (May be required by Board)

Application fee \$75 due at submission.

***Please use this checklist to make sure you have as complete an application as possible before submitting it to the Planning Board for consideration.***

An informal conference between the applicant and the Planning Board is strongly encouraged prior to submission of a special use permit to review the proposed development in light of existing conditions and to generally determine the information to be required in the special use permit. This conference requires no fee but does require, however, that the applicant ask to be placed on the agenda ten (10) days in advance of the meeting.

NOTE: Board regulations require submission of applications ten (10) days in advance of the regular meeting which is held the third Thursday of each month. Applications may be submitted to the Town Clerk Elaine Kelly, during regular business hours or to the Planning Board Clerk Kellie Blake, any Thursday evening from 6:00 – 8:00 pm. For information, please call the Planning Board Clerk at the number above.

Sincerely,

Town of Greenwich Planning Board

**TOWN OF GREENWICH**  
**APPLICATION FOR SPECIAL USE PERMIT Page 1 of 2**

Date: \_\_\_\_\_

File No.: \_\_\_\_\_

**Applicant:**

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

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

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

(If more than one owner, provide information for each)

**Owner (if different than applicant):**

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

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

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

**Interest in property:** \_\_\_\_\_

**Designated Agent:**

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

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

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

**Location of Site:** \_\_\_\_\_

**Tax Map Description:** Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**Zoning District:** \_\_\_\_\_

**Present Use of the property:** \_\_\_\_\_

**Written general description of the proposed project:**

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**Number and size of buildings to be constructed or converted, their present and proposed uses and the number and type (resident, employee, etc.) of occupants anticipated to be accommodated by the project after completion:** \_\_\_\_\_

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**Written description of the uses of surrounding properties:**

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**AGENCY DESIGNATION FORM – SPECIAL USE PERMIT**

**The owner or his representative must be present at all meetings on this proposal.**

I, \_\_\_\_\_, the owner of property in the Town of Greenwich, Washington County, NY, hereby designate \_\_\_\_\_, to act as representative and agent in connection with any proceeding for a special use permit of real property in the Town of Greenwich, Washington County, NY and I grant to the said representative and agent the authority to fill applications, make representations and warranties as of they were my own, and in every respect act on my behalf. In making this designation I understand that the verbal and written comments, utterances or statements made by my representative and agent shall be treated and considered as if they were made by me, and shall be bound by such comments, utterances and statements as if I made them. I make this agency designation so that my personal appearance before any governmental entity or board for the Town of Greenwich is not necessary, and with the understanding that my designated representative and agent shall have total authority to represent my interests.

Signature: \_\_\_\_\_

Sworn to Before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public Signature: \_\_\_\_\_

**Appendix C**  
**State Environmental Quality Review**  
**SHORT ENVIRONMENTAL ASSESSMENT FORM**  
**For UNLISTED ACTIONS Only**

**PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)**

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION: Municipality _____ County _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres      Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No      If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____	

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment**

**PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)**

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF. <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No	
C. COULD ACTION RESULT IN <b>ANY</b> ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible) C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:  C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:  C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:  C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:  C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:  C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:  C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	

**PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)**

**INSTRUCTIONS:** For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

<input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which <b>MAY</b> occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action <b>WILL NOT</b> result in any significant adverse environmental impacts <b>AND</b> provide, on attachments as necessary, the reasons supporting this determination.	
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)

Reset

## **Ag & Markets Law:**

### **Article 25-AA (Agricultural Districts) Section 301**

Farm Operation: the land and on-farm buildings, equipment, manure processing and handling facilities, and practices which contribute to the production, preparation and marketing of crops, livestock and livestock products as a commercial enterprise, including a “commercial horse boarding operation” as defined in subdivision thirteen of this section. Such farm operation may consist of one or more parcels of owned or rented land, which parcels may be contiguous or noncontiguous to each other.

### **Agricultural Data Statements**

NYS Agriculture and Markets Law (Article 25 AA, Section 305), Town Law 283a and Village Law 7-739 requires applicants for subdivision approvals, site plan reviews and use variances to submit an [Agricultural Data Statement](#) if the project meets the following criteria:

- The proposed project is within an Agricultural District or;
- The boundary of the proposed project site is with 500 feet of a farm operation with in an Agricultural District.

The local municipal board must evaluate and consider the Agricultural Data Statement in its review and consider the potential impacts of the proposed project on the functioning of the farm operation.

Pursuant to Town Law 283a and Village Law 7-739, the clerk of the reviewing board must send notice to the owners identified in the Agricultural Data Statement upon receipt of the application. The cost of such mailing shall be borne by the applicant. In addition, the clerk must refer all applications (except for subdivisions, Washington County Planning Board is not authorized to review subdivisions) requiring an Agricultural Data Statement to the County Planning Board for review as required by General Municipal Law 239-m.

#### **The Agricultural Data Statement must contain the following information:**

- Name and address of applicant
- Description of the proposed project and its location
- Name and address of any owner of an active farm operation
- A tax map (or other map) showing the site of the proposed project relative to the location of the farm operation.

The clerk of the reviewing board must send notice to the owners identified in the Agricultural Data Statement upon receipt of the application.

Please note, a sample [Agricultural Data Statement](#) (pdf)

<http://www.co.washington.ny.us>

# TOWN /VILLAGE OF \_\_\_\_\_

Date \_\_\_\_\_

Application # \_\_\_\_\_

## **Agricultural Data Statement**

**Instructions:** This form must be completed for any application for a special use permit, site plan approval, use variance or subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant

Owner (if different from Applicant)

Name: _____ Address: _____ _____
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Name: _____ Address: _____ _____
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Type of Application: \_\_\_ Special Use Permit; \_\_\_ Site Plan Approval; \_\_\_ Use Variance;  
\_\_\_ Subdivision Approval

Description of proposed project: \_\_\_\_\_

Location of project: \_\_\_\_\_

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

Tax Map Number : \_\_\_\_\_

### **Check with your local assessor if you do not know the following:**

Is this parcel within an Agricultural District? \_\_\_ NO \_\_\_ YES

Agricultural District Number \_\_\_\_\_

Is this parcel actively farmed? \_\_\_ NO \_\_\_ YES

List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary.

Name: _____ Address: _____ _____
Is this parcel actively farmed? Yes/No

Name: _____ Address: _____ _____
Is this parcel actively farmed? Yes /No

Name: _____ Address: _____ _____
Is this parcel actively farmed? Yes/No

Name: _____ Address: _____ _____
Is this parcel actively farmed? Yes/No

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

\_\_\_\_\_  
Signature of Owner  
(If other than applicant)

Reviewed by: \_\_\_\_\_  
Signature of Municipal Official

\_\_\_\_\_  
Date

**NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Board.**

<http://www.co.washington.ny.us>

**TOWN OF GREENWICH PLANNING BOARD  
SPECIAL USE PERMIT CHECK LIST**

Special Use Permit # \_\_\_\_\_ (assigned by Board)      Date: \_\_\_\_\_

1. \_\_\_\_\_ Application completed, signed and dated, including name, address and phone number of the applicant **and the tax ID number.**
2. \_\_\_\_\_ Copy of Deed
3. \_\_\_\_\_ Zoning District – see Zoning Ordinance Table 1
4. \_\_\_\_\_ Zoning Use – refer to Zoning Ordinance – Table 1 & Table 2
5. \_\_\_\_\_ Names and **COMPLETE 911 OR PO BOX ADDRESSES WITH ZIP CODES** of adjoining landowners within 500 feet of the nearest boundary from the tax rolls; including across the road and water courses.
6. \_\_\_\_\_ Application Fee - \$75 **Due at submission**
7. \_\_\_\_\_ Written statement (description of proposed project)
8. \_\_\_\_\_ Number and size of buildings to be constructed or converted, their present uses and the number and type of occupants anticipated to be accommodated by the project after completion.
8. \_\_\_\_\_ Designated Agent Form signed, notarized and dated, if needed.
9. \_\_\_\_\_ Written description of the uses of surrounding properties.
10. \_\_\_\_\_ Short Environmental Assessment Form (SEQR) **Part 1 Only.**
11. \_\_\_\_\_ Agricultural Data Statement (if needed).

**TOWN OF GREENWICH PLANNING BOARD  
SITE PLAN REVIEW CHECKLIST – Pg. 1**

Site Plan Application # \_\_\_\_\_ (assigned by Board)      Date: \_\_\_\_\_

1. \_\_\_\_\_ Application completed, signed and dated, including name, address and phone number of the applicant **and the tax ID number identifying the parcel.**
2. \_\_\_\_\_ Copy of Deed
3. \_\_\_\_\_ Zoning District – see Zoning Ordinance Table 1
4. \_\_\_\_\_ Zoning Use – refer to Zoning Ordinance – Table 1 & Table 2
5. \_\_\_\_\_ Names and **COMPLETE 911 OR PO BOX ADDRESSES WITH ZIP CODES** of adjoining land owners from the tax rolls; including across the road and water courses.
6. \_\_\_\_\_ Application Fee - \$100 for a project under 10,000 square feet. \$300 for a project 10,000 square feet or over. **Due at submission.**
7. \_\_\_\_\_ Sketch Plan
  - a) \_\_\_\_\_ Written statement (description of proposed project)
  - b) \_\_\_\_\_ A USGS topographic map or tax map showing location of the building site and its relationship to the surrounding area.
  - c) \_\_\_\_\_ A rough sketch of the project.
8. \_\_\_\_\_ Designated Agent Form signed, notarized and dated, if needed.
9. \_\_\_\_\_ Short Environmental Assessment Form (SEQR) **Part 1 Only.**
10. \_\_\_\_\_ Site Map:

Five (5) copies of the Site Plan Map measuring 11" x 17", showing in addition to the above Sketch:

  - a) \_\_\_\_\_ Title of the site plan, including name and address of the applicant and person responsible for preparing such drawing.
  - b) \_\_\_\_\_ North arrow, scale and date.
  - c) \_\_\_\_\_ Boundaries of property plotted to scale.
  - d) \_\_\_\_\_ Location, size and existing use of buildings and other structures on premises.
  - e) \_\_\_\_\_ Location and ownership identification of all adjacent lands including across roadways.
  - f) \_\_\_\_\_ Location, width and identification of all existing adjacent roads.
  - g) \_\_\_\_\_ Location, width and identification of all existing and proposed rights of way, easements, setbacks, reservations and areas dedicated to public use on or adjoining the property.
  - h) \_\_\_\_\_ Location of slopes in excess 15%, wetlands, flood and erosion-prone areas, watercourses and natural drainage patterns.
  - i) \_\_\_\_\_ Location of significant trees, shrubs and/or edge of wooded areas.
  - j) \_\_\_\_\_ Location of all structures, significant environmental features and utilities within 500 feet of the property line.
  - k) \_\_\_\_\_ Location of bedrock outcrops and other significant geological features.
  - l) \_\_\_\_\_ Setbacks – see Zoning Table 1 & 2
  - m) \_\_\_\_\_ Battenkill/Hudson River 100 foot setback.
11. \_\_\_\_\_ Development Plan Map:
  - a) \_\_\_\_\_ Grading and drainage plan, showing existing and proposed contour intervals of not more than 5 feet and watercourses if a change in topography is proposed.
  - b) \_\_\_\_\_ Locations, type of construction and exterior dimensions of all buildings and other structures.
  - c) \_\_\_\_\_ Identification of the amount of gross floor area proposed for retail sales and services, offices and other commercial or industrial facilities.

**TOWN OF GREENWICH PLANNING BOARD  
SITE PLAN REVIEW CHECKLIST – Pg. 2**

- d) \_\_\_\_\_ Location, type of construction and area of all parking and truck loading areas, showing access and egress points to the site.
- e) \_\_\_\_\_ Provision for pedestrian access, including public and private sidewalks, if applicable.
- f) \_\_\_\_\_ Location and intended use of outdoor storage, if any.
- g) \_\_\_\_\_ Location and construction material of all existing or proposed site improvements including drains, culverts, berms, retaining walls, fences, patios, paved areas and decks.
- h) \_\_\_\_\_ Description of the method of sewage disposal and the location of such facilities.
- i) \_\_\_\_\_ Location of waste storage container, including proposed solid waste and hazardous waste collection, storage and staging areas.
- j) \_\_\_\_\_ Description of the method of securing water, location of such facilities, and approximate quantity of water required.
- k) \_\_\_\_\_ Location of fire lanes and other emergency zones, including the location of fire hydrants, if required.
- l) \_\_\_\_\_ Location, design, and construction materials of all energy generation and distribution facilities, including electrical, gas, hydro and solar.
- m) \_\_\_\_\_ Location, size design and type of all proposed temporary and permanent signs.
- n) \_\_\_\_\_ Location and development of all proposed buffer areas, including indication of existing and proposed vegetative cover.
- o) \_\_\_\_\_ Location and design of existing and proposed outdoor lighting, including height, type, bulb type/style, and hours of operation.
- p) \_\_\_\_\_ Proposed planting plan including screening and buffer areas with the planting and general landscaping schedule.
- q) \_\_\_\_\_ Record of applications and approval status of all necessary permits from federal, state, county and local offices including driveways and curb cuts.
- r) \_\_\_\_\_ Estimated project construction schedule.
- s) \_\_\_\_\_ Other elements integral to the proposed development as may be specified by the Planning Board at the sketch plan conference, such as contour intervals or licensed survey, etc.
- t) \_\_\_\_\_ Elevations or cross-sections of proposed buildings.
- u) \_\_\_\_\_ Height of proposed building(s)
- v) \_\_\_\_\_ Vertical break, if required
- w) \_\_\_\_\_ Planning Board approval box (4" x 5") and Planning Board approval statement within the box, to read as follows:  
"Approval of Site Plan Application # \_\_\_\_\_ by the Town of Greenwich Planning Board is herewith granted on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ and is subject to all requirements and conditions of said motion. Any change, erasure, modification or revision of the plat as approved, shall void this approval." Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ Chairman or \_\_\_\_\_, Clerk.
- x) \_\_\_\_\_ Plat Note: Setbacks required at time of approval of this Site Plan per Town of Greenwich Zoning Ordinance adopted on May 29, 1007.