



Town of Halfmoon
2 Halfmoon Town Plaza
Halfmoon, NY 12065
371-7410 ext. 2266
Fax: 371-0304
Department of Building,
Planning & Development

Planned Development District Recommendation Application

(Must first be referred by the Town Board)

Project #: _____

Fee Paid: \$ _____

I. PROJECT INFORMATION:

Business/Project Name: _____

Business/Project Address: _____

Applicant Name: _____ Date of Birth or Employer ID# (EIN): _____

Mailing Address: _____

Telephone #: _____ Fax #: _____ Email: _____

Property Owner (If different than Applicant AND the Owner does not sign below, please submit an original,
notarized "Owner Authorization" form - attached):

Name: _____ Date of Birth or Employer ID# (EIN): _____

If a corporation, please name a responsible party/designated officer: _____

Mailing Address: _____

Telephone #: _____ Fax #: _____ Email: _____

Business Representative Name/Company (if different from above): _____

Address: _____

Telephone #: _____ Fax #: _____ Email: _____

II. PLANNED DEVELOPMENT DISTRICT INFORMATION:

New PDD ☐ Amendment ☐ If an amendment, PDD name: _____

Date of Referral to the Planning Board by the Town Board: _____

Parcel Identification Number (SBL#) of existing lots included: _____

Current underlying Zoning District(s): _____

Size of existing lot(s): _____ acres (If multiple lots, please indicate acreage of each lot)

Proposed Use: Single Family ☐ Two-Family (Duplex) ☐ Multi-Family ☐ Commercial ☐ Other: _____

Proposed water service: _____ public _____ private (well) _____ n/a Is this existing? yes/no

Proposed sanitary sewer: _____ public _____ private (septic) _____ n/a Is this existing? yes/no

Date property acquired by applicant: _____

Describe any easements or other restrictions on this property: _____

Applicant/Owner Signature: _____ Date: _____

(For Department Use Only)

Planning Board Recommendation: Positive ☐ Negative ☐ Reason for Negative Recommendation: _____



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OWNER AUTHORIZATION - PLANNED DEVELOPMENT DISTRICT (PDD)

The undersigned, who is the owner of the premises known as
....., identified as Tax Map #.....hereby authorizes
.....to bring a Planned Development District
application before the Town of Halfmoon for consideration. The undersigned further permits the Town or its
authorized representative access to the property to review existing site conditions during the review process.

STATE OF NEW YORK)
COUNTY OF SARATOGA)SS.

On thisday of,Two Thousand and, before me,
the subscriber, personally appeared to me
personally known and known to me to be the same person described in and who executed
the within Instrument, andhe.....acknowledged to me thathe.....executed the same.

Owner

Notary Public

Town of Halfmoon

Applicant Ethics Disclosure Form

(General Municipal Law Section 809)

Any person who submits an application, petition, bid or request to the Town of Halfmoon must fill out this form and submit to the Town with the application being filed. Please answer all questions.

Name of Applicant, Petitioner, or Bidder: _____

Address: _____

Name of Application, Petition, or Bid: _____

1. Is there any Town officer or employee who both:
 - a. Is required, individually or in a group, to take any kind of action (other than a ministerial act*) on your application: and
 - b. Has an interest** in your application? If so, list the Town employee's or officer's name(s):

2. If you filled in any names for question 2 above, please fully describe in what way and to what extent each Town employee you named "has an interest":

Signed: _____

Dated: _____

* "Ministerial Act" means an action performed in a prescribed manner imposed by law without the exercise of judgement or discretion as to the propriety of the action.

** "Has an Interest" means that the Town employee or officer or his/her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them (a) is the applicant, or (b) is an officer, director, partner or employee of the applicant, or (c) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or (d) is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable the favorable approval of such application, petition, bid or request.



Planned Development District Recommendation APPLICATION Instructions & Checklist (Must Submit with application)

Pre-Application Meeting:

A Pre-Application meeting with the Planning Department is strongly recommended. A concept plan and/or map will be needed at this time to allow discussion of plan requirements. ***Failure to conduct a Pre-Application meeting may delay consideration of the application by the Planning Board.***

- Date of Pre-Application Meeting: _____

Planned Development District Recommendation Requirements:

For Planning Board review of a proposed PDD, the PDD must first be referred to the Planning Board by the Halfmoon Town Board. Also, the following items must be included as part of the submittal to the Planning Board: **(Please check and note the number of copies required)**

- _____ Completed Planning Board "Planned Development District Recommendation" Application (1 copy)
- _____ Application Fee with check made payable to: "Town of Halfmoon"
- _____ Owner Authorization Form, if necessary (at least one must be an original, signed copy). This form must be submitted if the Applicant is not the Owner AND the Application is not signed by the Owner.
- _____ Ethics Disclosure Form
- _____ Narrative describing the request, the proposed public benefit and all activities proposed for the site. (3 copies)
- _____ Preliminary/Conceptual plan **folded** at a scale of one inch equals 50' or a scale less to the inch of the entire site prepared and signed/stamped by a licensed design professional (engineer, architect or surveyor) **prepared within the last five (5) years.** (5 copies)
- _____ 11" x 17" copies of the conceptual plan (if not part of the Town Board submittal) (3 copies)

Agency Review: The Planning Department may circulate one (1) full packet to the following agencies for review and comment, as necessary. Applicants are encouraged to contact these departments directly:

Town: Halfmoon Water Dept., Halfmoon Highway Dept., Halfmoon Building Dept.

County: Saratoga County Planning Dept., Saratoga County Sewer District #1, Saratoga County Highway Dept.

Fire: Hillcrest Fire Dist., Clifton Park/Halfmoon Fire Dist., Waterford/Halfmoon Fire Dist., West Crescent Fire Dist.

Ambulance: Clifton Park/Halfmoon Emergency Corps.

State & Federal: You may be required to contact state and federal agencies directly

Town Engineer Review: PDD Recommendations may require review by the Town Engineer. An escrow account will be required to defray the costs of this review. An estimate of the costs will be provided to the applicant and a check must be received prior to further consideration by the Planning Board.

Public Informational Meeting: Prior to a recommendation by the Planning Board, a public information meeting may be held. The applicant is responsible for all associated public notice and postage fees.

Incomplete applications will not be accepted for review: Applications submitted by the deadline will be placed on the agenda at the discretion of the Planning Board. Once a determination has been made that an application is complete, the Planning Board will continue its review until either a positive or negative recommendation is made or the applicant withdraws the application upon written notification to the Planning Department. The Planning Board normally convenes the second and fourth Monday of the month at 7 p.m.; please verify the upcoming meeting dates.

I have read the above instructions and checklist and fully understand and accept the requirements of the Town of Halfmoon.

Signature of Applicant: _____ Date: _____