

Village Of Williamsville



APPLICATION FOR SITE PLAN AND/OR ARCHITECTURAL REVIEW

For Official Use Only

Project #: _____ **Zoning District:** _____ **Date Received:** _____

Planning Board HPC

Application Review Fee Schedule (Check all that apply)

- | | | |
|---|------------|--------------------------|
| <input type="checkbox"/> Sketch Plan Review | \$250.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Architectural Review – New Construction | \$1,000.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Architectural Review – Building Modification | \$500.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Site Plan Review – New Construction | \$1,000.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Site Plan Review – Site Modification | \$500.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Sign Review | \$0.00 | <input type="checkbox"/> |
| <input type="checkbox"/> Engineering Review Fee* | \$2,000.00 | <input type="checkbox"/> |

* Engineering Review fees are required for most large projects and for projects triggering SWPPP. The amount of the fee can be increased by the Village of Williamsville to cover costs incurred by the Village in excess of \$2,000. Where costs are under \$2,000, the balance will be refunded to the applicant.

Does Certificate of Appropriateness apply? **

**If yes, see separate application to Historic Preservation Commission.

Completed By Applicant

Project Location (Address):

SBL(s) #: _____

Project Description: (Please describe the proposed scope of work below, or attach a description.)

Estimated Cost: _____

Parcel Size: _____

Number of Parking Spaces: Existing _____ Proposed _____ Total _____

Gross Floor Area: Existing _____ Proposed _____ Total _____

APPLICANT:

Name: _____

Address: _____

Phone: _____

Email: _____

**If applicant is not the property owner, provide a signed letter of authorization from the property owner as an attachment to this application.*

REPRESENTATIVE:

Name: _____

Address: _____

Phone: _____

Email: _____

OWNER:

Name: _____

Address: _____

Phone: _____

Email: _____

Signature of Preparer: _____

Title of Preparer: _____

Date: _____