



4949 Lake Shore Dr. | P.O. Box 355 | Bolton Landing NY 12814

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Planning Office

## APPLICANT AUTHORIZATIONS FORM

**INSTRUCTIONS:** Please complete and sign this form with an application to the Zoning Board of Appeals or Planning Board. An application will not be reviewed until this form is completed, signed, and submitted to the Town Zoning Administrator.

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### **AUTHORIZATION TO ACT AS AGENT:**

*Complete the following if the Owner of the property is authorizing an Agent to appear on their behalf to present the application and speak on behalf of the proposed project.*

**Owner:** \_\_\_\_\_

**Designated Agent:** \_\_\_\_\_

### **Project Description:**

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

### **Property:**

Parcel ID #: \_\_\_\_\_ Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

### **Agent Authorizations:**

- Variances  Subdivision  Septic  All Permits  
 Site Plan  Certificate of Completion  Storm Water



**PROFESSIONAL REVIEW FEES:**

For applicants seeking a **stormwater control permit** or approval for a **subdivision of land**, under §125-13D and §150-13B respectively, the Town, Zoning Administrator or Planning Board may charge an additional fee to the applicant reflecting the actual costs of any required, reasonable and necessary legal and technical assistance. No permits shall be issued, or subdivision plats signed, until all fees are paid in full.

The applicant shall pay in full all fees pertaining to this parcel.

**AUTHORIZATION FOR SITE VISITS:**

The applicant hereby authorizes members of the Zoning Board of Appeals, Planning Board, and employees of the Town of Bolton, and their agents, to enter the subject properties at reasonable times for the purpose of reviewing the application submitted.

**OFFICIAL MEETING MINUTES DISCLOSURE:**

Proceedings of meetings in review of an application upon acceptance by the Board as its official minutes shall constitute the official record of Board proceedings. Any claimed discrepancy between the official minutes shall be deemed the official, accurate record.

**FURTHER PERMITS:**

Each applicant is advised that construction, alteration and activities related to approvals reviewed and granted by the Town of Bolton may require additional approvals of other jurisdictions, which may include the Lake George Park Commission, Warren County Planning Board, Adirondack Park Agency, New York State Department of Health, and other boards of review. The applicant has the responsibility to obtain all such permits.

**Signature**

\_\_\_\_\_

Applicant

\_\_\_\_\_

Date

\_\_\_\_\_

Agent

\_\_\_\_\_

Date