



application for

APPROVAL OF SITE PLAN

Application date: _____

APPLICANT IDENTIFICATION

Applicant name: _____ telephone: _____
address: _____

Owner's name: _____ telephone: _____
address: _____

Plan Designer's name: _____ telephone: _____
address: _____

PROPOSED SITE PLAN REVIEW

[] PRELIMINARY [] FINAL [] COMBINED*

*At the discretion and risk of applicant, the PRELIMINARY and FINAL site plans may be COMBINED in application for approval. In such a situation the Planning Commission may waive the portion of the review process concerning preliminary site plan application and review. However, the Planning Commission has the authority to require a PRELIMINARY site plan separate from the FINAL site plan where the complexity and/or scale of the site for the proposed development so warrant. Also, PRELIMINARY and FINAL site plans cannot be combined for a development consisting of two or more phases.

A copy of the City of Hudson's code pertaining to site plan review is included with this application.

A site plan review also requires an application of zoning compliance. The fee for zoning approval is included in the site plan review fee.

PLEASE NOTE: Engineering, Legal and Planning Consultant Costs will be extra, if incurred.

APPLICANT'S STATEMENT

I hereby state that the information I have provided in this application is true and correct to the best of my knowledge. I also acknowledge that I have received a copy of the Certificate of Zoning Compliance and a copy of the City of Hudson's code pertaining to site plan review with this application. By signing this application, I grant permission to city personnel to enter upon property as described for review purposes.

Applicant's signature: _____ date: _____

for Hudson City Office Use Only

FEE SCHEDULE

PRELIMINARY \$ 200.00 **FINAL** \$ 250.00 **COMBINED** \$ 450.00

date paid: _____ received by: _____

- | | |
|--|---|
| <input type="checkbox"/> Application and Drawings received | <input type="checkbox"/> Hudson DPW / WWTP opinion received |
| <input type="checkbox"/> Zoning Compliance application received | <input type="checkbox"/> Hudson Fire Chief opinion received |
| <input type="checkbox"/> Engineering Consultant opinion received | <input type="checkbox"/> Other: _____ |

COMMENTS

Initial Review of Planning Commission: date: _____

FINDINGS & RECOMMENDATIONS TO HUDSON CITY COUNCIL

Final Review of Planning Commission: **APPROVED** **DENIED** date: _____

FINDINGS

Initial Review of Hudson City Council: date: _____

Final Review of Hudson City Council: **APPROVED** **DENIED** date: _____

FINDINGS

Notification Sent to:

<input type="checkbox"/> Owner	date: _____
<input type="checkbox"/> City Council Files	date: _____
<input type="checkbox"/> Building Inspector	date: _____
<input type="checkbox"/> Planning Commission	date: _____