

TOWN OF MOREAU
NEW YORK

351 REYNOLDS ROAD • MOREAU, NY

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JUN 27 2025

APPLICATION FOR SPECIAL USE PERMIT

TOWN OF MOREAU
BUILDING DEPARTMENT

FOR INTERNAL USE ONLY

APPLICANT:

APPLICATION #: _____
ZONING DISTRICT: _____
DATE SUBMITTED: _____
DATE ACCEPTED: _____
HEARING DATE: _____

APPLICANT INFORMATION:

1. Applicant(s):

Shawna Breault
Street Address: 6 Pheasant Way
City, State, Zip: South Glens Falls, NY 12803
Telephone #: 518-932-3695 Fax #: _____
E-mail Address: tandfriendsdaycare@gmail.com

2. Agent:

Street Address: _____
City, State, Zip: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

3. Owner:

Street Address: _____
City, State, Zip: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

RELATIONSHIP TO THE PROPERTY:

OWNER: ☒ Yes ☐ No

LESSEE: ☐ Yes ☐ No

AGENT: ☐ Yes ☐ No

If an agent, please attach an Agent Authorization Form.

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QUESTIONNAIRE:

1. What is the specific provision of the Zoning Law involved?

Special Use permit

2. What is the Special Use involved?

Daycare center (group family home daycare)
licensed via NYS

3. What is the name and address of the zoned lot effected (if different from "Applicant")?

R-1 zone 6 Pheasant Way, South Glens Falls NY 12803

4. Please provide a brief description and location of said lot.

Residential lot that I am looking to continue
using for a small home daycare business.

5. What is the present zoning classification of said lot, the improvements thereon, and the present use thereof?

The present zoning classification is R-1. A
residential lot that I am looking for approval
in dual use for a small already successful
home daycare business.

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DESCRIPTION:

1. Please provide an accurate description of the improvements, additions or changes intended to be made, indicating the size of such proposed improvements, materials, and general construction thereof.

N/A - no improvements or changes have been made.

2. Please explain why the proposed use is in the public interest.

The lack of childcare in moreau/SGF is detrimental to parents in the workforce. The proposed daycare serves the public interest by addressing a critical and growing need for accessible, high-quality childcare within the community. I have been successfully running this daycare for 2 years with NYS with no issues or violations.

CHECKLIST OF SPECIAL USE PERMIT APPLICATION COMPLETENESS:

As per §149-30 of the Town Code, the applicant shall provide the Zoning Board of Appeals with all of the following documentation attached to each copy of this application:

- ☐ 1. A plot plan of said lot, drawn to scale, indicating the location and size of the lot, the location and size of any improvements thereon, and the location and size of any improvements proposed to be erected thereon.
- ☐ 2. Additional information requested by the Zoning Board of Appeals (please check all that apply):
 - ☐ Topographic and boundary surveys.
 - ☐ Soils test and information.
 - ☐ Location of watercourses, wetlands and floodplains.
 - ☐ Grading and drainage plan.
 - ☐ Location, use and height of all buildings.
 - ☐ Location, design and construction materials of all parking and truck-loading areas, with access and egress drives thereto.
 - ☐ Provisions for pedestrian access.
 - ☐ Location of any outdoor storage, if any.
 - ☐ Location, design and construction materials of all existing or proposed site improvements, including drains, culverts, retaining walls and fences.
 - ☐ Description of the method of sewage disposal and location design and construction materials of such facilities.
 - ☐ Description of the method of securing water and location, design and construction materials of such facilities.
 - ☐ Location of fire and other emergency zones, including the location of fire hydrants.
 - ☐ Location, size, design and construction materials of all proposed signage.
 - ☐ Location and design of outdoor lighting facilities.
 - ☐ Designation of the amount of building area proposed for retail sales or similar commercial activity.
 - ☐ General landscaping plan and planting schedule.
 - ☐ Other.

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Please return the original application, with all pages intact, along with ten (10) paper copies and an electronic copy, including required information and documentation. The electronic copy may be submitted on a flash drive or emailed to biclerk@townofmoreau.org.

NOTE: The application will not be scheduled on the Zoning Board of Appeals agenda until all paper and electronic copies have been received by the Town Building Department.

Also note that the information to be provided is not limited to the space on this form. If additional space is needed, please use separate sheets and indicate the enclosure number or page number for the attached sheets in the related space provided on this application.

The undersigned hereby applies for a Special Use Permit for which the Zoning Law of the Town of Moreau entitled, The Zoning Law of the Town of Moreau," requires the obtaining of such a permit from the Zoning Board of Appeals.

Signature

Shawna Breault

Applicant (print)

6/26/25

Date

Shawna R Breault

Agent (sign)

6/26/25

Date