

Village of Haverstraw Planning Board
40 New Main Street
Haverstraw, NY 10927
(845)429-0300 fax (845-429-0353)

Date _____, 2001

Application Number: _____

Please check all that apply:

_____ Subdivision	_____ Amended	_____ Pre-preliminary/Sketch
_____ Major Subdivision		_____ Preliminary
_____ Minor Subdivision		_____ Final
_____ Number of Lots		_____ Lot Line Change
_____ Site Plan	_____ Amended	_____ Conditional Use

Project Name: _____

Tax Map Designation:

_____ Section _____ Block _____ Lot(s)
_____ Section _____ Block _____ Lot(s)

Location: On the _____ (direction) side _____, feet
_____ (street) of _____ (street).

Acreage of Parcel _____

Zoning District _____

Sewer District _____ **Public** _____ **Private** _____

Water _____ **Public** _____ **Private** _____

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IF SUBDIVISION:

- 1) Are any waivers being requested from the Subdivision Regulations?
- 2.) Is any variance from the subdivision regulations required? _____
If so, describe _____ Requested _____
- 3.) is any open space being offered? _____ If so, what amount? _____
- 4.) Is this a standard or average density subdivision? _____
- 5.) Will Average Density be requested? _____

IF SITE PLAN:

- 1) Are any waivers being requested from the Site Plan Regulations?
- 2.) Total size of building(s) in square feet _____
- 3.) Proposed addition - _____ sq. ft.
- 4.) Number of Stories _____
- 5.) Number of dwelling units _____

Will a **special permit** be required and what will the property be used for _____

If so, has an application be submitted to the Town Board? _____

Are there **slopes greater than 25%**? _____. If yes, please indicate the amount and show the gross and net area on maps.

Are there **streams** on the site? _____ If yes, please provide the names;

Are there **wetlands** on the site? _____ If yes, please provide the name, type, and size on maps;

Are there any variances required? _____

Project History: Has this project ever been reviewed before? _____

If so, provide a narrative, including the case number, Section, Block and Lot number, name, date, and the Board (s) you appeared before.

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List all contiguous holdings in the same ownership as the owner of record: (use tax Map Designation- Section, Block and Lot #)

List all contiguous holdings in the same ownership as the applicant: (use tax map designation) _____

Applicant: _____ Phone # _____

Address: _____
Street Name & Number (Post Office) State Zip Code

Property owner: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Engineer: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Architect: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Surveyor: _____

Address _____
Street Name & Number (Post Office) State Zip code

Attorney: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

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I wish that all correspondence, meeting notices, decision, etc. from your office relative to the above application be sent to:

Contact Person _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

APPLICANT'S SIGNATURE

Date _____

Note to Applicant: It will be the responsibility of the contact person designated on this form to notify all other interested parties (for example, attorney, architect, engineer, surveyor, applicant etc.)

TO ALL APPLICANTS - YOU MUST SEND COPIES OF APPLICATIONS AND PLANS TO:

Mr. Joseph Nash
Regional Manager
Orange and Rockland Utilities
75 West Route 59
Spring Valley, NY 10977

I have informed Orange and Rockland on _____
(Date)

Signature

Date

FOR OFFICE USE ONLY

This property is within 500 feet of:
(Check all that apply)

IF ANY ITEM IS CHECKED, A REVIEW MUST BE DONE BY THE ROCKLAND COUNTY
COMMISSIONER OF PLANNING UNDER THE STATE GENERAL MUNICIPAL LAW, SECTIONS
239 K, L, M, AND N.

_____ State or County Road
_____ Long Path
_____ Municipal Boundary

_____ State or County Park
_____ County Stream
_____ County Facility

List name(s) of facility checked above. _____

Referral Agencies:

If property is directly adjacent to or within 500 feet

- RC Highway Department
- RC Drainage Agency
- RC Soil and Water Cons. Dist.
- NYS Dept. of Transportation
- NYS Thruway Authority
- Adjacent Municipality

- RC Park Commission
- RC Environmental Management Council
- RC Dept. of Environmental Health
- NYS Dept. of Environmental Conservation
- Palisades Interstate Park Comm.

Applicant's Signature and Certification

State of New York)
County of Rockland) SS.:
Town of _____)

I, _____, hereby depose and say that all the above statements contained in the papers submitted herewith are true.

Mailing Address

SWORN to before this
_____ day of _____, 2001

Notary Public

Owner/Applicant's Consent Form to Visit Property

I, _____, owner/applicant of the property described in application submitted to the Planning Board do hereby give permission to members of said board to visit the property in question at a reasonable time during the day.

Owner/Applicant

SWORN to before this
_____ day of _____, 2001

Notary Public

(To be completed by Applicant)

Affidavit of Ownership/Owner's Consent

State of New York)
County of Rockland) SS.:
Town of _____)

I _____ being duly sworn, hereby depose and say that I
reside at _____
in the county of _____ in the state of _____

I am the (* _____) owner in fee simple of premises located at:

described in a certain deed of said premises recorded in the Rockland County Clerk's
Office in Liber _____ of conveyances, page _____.

Said premises have been in my/its possession since, Date: _____. Said premises are
also known and designated on the Town of _____ Tax Map as:

Section _____ Block _____ Lot(s) _____

I hereby authorize the within application on my behalf, and that the statements of fact
contained in said application are true, and agree to be bound by the determination of the
Board.

Owner Signature _____

Mailing Address _____

SWORN to before this
_____ day of _____, 20_____

Notary Public

* If owner is a corporation, fill in the office held by deponent and name of corporation, and
provide a list of all directors, officers and stockholders owning more than 5% of any class of
stock. _____

Reimbursement for Professional Consulting Services

The Planning Board in the review of any application described above, may refer any such application presented to it to such engineering, planning, environmental or other technical consultant as such Board shall deem reasonably necessary to enable it to review such application as required by law. The charges made by such consultants shall be in accord with charges usually made for such services in the metropolitan New York region or pursuant to an existing contractual agreement between the Village for the cost of such consultant services upon receipt of the bill. Such reimbursement shall be made prior to final action on the application.

Site Plan or Subdivision Mylars will not be signed until bills are paid in full.

Applicant

SWORN to before this

_____ day of _____, 20____

Notary Public

4. There is no state officer, Rockland County Officer or employee or town/village officer or employee nor his or her spouse, brother, sister, parent, child or grandchild, or a spouse of any of these relatives who is the applicant or who has an interest in the person, partnership or association making this application, petition or request, or is an officer, director, partner or employee of the applicant, or that such officer or employee, if this applicant is a corporation, legally or beneficially owns or controls any stock of the applicant in excess of 5% of the total of the corporation if its stock is listed on the New York or American Stock Exchanges; or is a member or partner of the applicant, if the applicant is an association or a partnership; nor that such town/village officer or employee nor any member of his family in any of the foregoing classes is a party to an agreement with the applicant, express or implied, whereby such officer or employee may receive any payment or other benefit, whether or not for service rendered, which is dependent or contingent upon the favorable approval of this application, petition or request.

5. That to the extent that the same is known to your applicant, and to the owner of the subject premises there is disclosed herewith the interest of the following officer or employee of the State of New York or the County of Rockland or of the Town/Village of _____ in the petition, request or application or in the property or subject matter to which it relates:
(if none, so state)

- a. Name and address of officer or employee _____
- b. Nature of interest
- c. If stockholder, number of shares
- d. If officer or partner, nature of office and name of partnership

e. If a spouse or brother, sister, parent, child, grandchild or the spouse of any of these blood relatives of such state, county or town/village officer or employee, state name and address of such relative and nature of relationship to officer and employee and nature and extent of office, interest or participation or association having an interest in such ownership or in any business entity sharing in such ownership.

f. In the event of corporate ownership: A list of all directors, officers and stockholders of each corporation owning more than five (5%) percent of any class of stock, must be attached, if any of these are officers or employees of the State of New York, or of the County of Rockland, or of the Town/Village of _____

I, _____, do hereby depose and say that all the above statements and statements contained in the papers submitted herewith are true, knowing that a person who knowingly and intentionally violates this section is guilty of a misdemeanor.

Mailing Address: _____

SWORN to before this _____ day of _____, 20____.

Notary