

Village of Haverstraw Planning Board
40 New Main Street
Haverstraw, NY 10927
T:(845)429-0300 F:(845)429-1739

Date: _____, 20_____

Application# _____

Please check all that apply:

<input type="checkbox"/> Subdivision	<input type="checkbox"/> Amended	<input type="checkbox"/> Pre-preliminary /Sketch
<input type="checkbox"/> Major Subdivision		<input type="checkbox"/> Preliminary
<input type="checkbox"/> Minor Subdivision		<input type="checkbox"/> Final
<input type="checkbox"/> Number of Lots		<input type="checkbox"/> Village Board
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Amended	<input type="checkbox"/> Lot Line Change
		<input type="checkbox"/> Conditional Use

Project Name: _____

Tax Map Designation:

Section _____ Block _____ Lot _____

Section _____ Block _____ Lot _____

Location: _____

Acreeage of Parcel: _____ **Zoning District :** _____

Sewer District: _____ **Public-** _____

Water: _____ **Public-** _____

IF SUBDIVISION:

- 1) Are any waivers being requested from the Subdivision Regulations? _____
- 2.) Is any variance from the subdivision regulations required? _____
If so, describe _____
- 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:

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

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

Are there **wetlands** on the site? _____

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. _____

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) _____

Village of Haverstraw Planning Board

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Applicant: _____

Address: _____
(Post Office) State __ Zip Code _____

Property owner: _____ Phone # _____

Address: _____
(Post Office) State __ Zip code _____

Phone # _____

Engineer:

Address: _____
(Post Office) State Zip code _____

Architect: _____
Address: _____ Phone # _____

Surveyor: _____
Address: _____

Attorney: _____ Phone # _____

Address: _____

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

Contact Person: _____

Address: _____

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 will have informed Orange and Rockland after preliminary approval
(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.

- | | |
|---|---|
| <input type="checkbox"/> State or County Road | <input type="checkbox"/> State or County Park |
| <input type="checkbox"/> Long Path | <input type="checkbox"/> County Stream |
| <input type="checkbox"/> Municipal Boundary | <input type="checkbox"/> County Facility |

List name(s) of facility checked above. **NYS Road- Route 9W**

Referral Agencies: If property is directly adjacent to or within 500 feet

- | | |
|--|--|
| <input type="checkbox"/> RC Highway Department | <input type="checkbox"/> RC Park Commission |
| <input type="checkbox"/> RC Drainage Agency | <input type="checkbox"/> RC Environmental Management Council |
| <input type="checkbox"/> RC Soil and Water Cons. Dist. | <input type="checkbox"/> RC Dept. of Environmental Health |
| <input type="checkbox"/> NYS Dept. of Transportation | <input type="checkbox"/> NYS Dept. of Environmental Conservation |
| <input type="checkbox"/> NYS Thruway Authority | <input type="checkbox"/> Palisades Interstate Park Comm. |
| <input type="checkbox"/> Adjacent Municipality | |

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 _____, 2013

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 _____, 2013

Notary Public

(To be completed by Applicant)

Affidavit of Ownership/Owner's Consent

State of New York)
County of Rockland) SS.:
Village of Haverstraw)

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 Town 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

INTEREST STATEMENT

(To be completed by Applicant)

If any State, County or Village of Haverstraw or employee has any interest in this property, state that persons' name and address, and nature and extent of interest (if none, state such: _____

STATE OF NEW YORK)
)
COUNTY OF ROCKLAND)

Sworn to before me this _____ day of _____, 20 _____.

Notary Public

Applicants Signature

AFFIDAVIT OF OWNERSHIP AND TRUTHFULNESS

(To be completed by PROPERTY OWNER)

_____ being duly sworn, deposes and says that he/she resided at _____, in _____ in the County of _____, State of _____, that he/she is owner in fee of all that certain lot, piece or parcel of land subject of this application, which land is situated, lying and being in the Village of Haverstraw and that the statements of fact contained in this application are true, and also authorize applicant to file this application (If Applicable)

STATE OF NEW YORK)
) SS:
COUNTY OF ROCKLAND)

Sworn to before me this _____ day of _____, 20 _____.

Notary Public

Owners Signature

*** NOTE: FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW***

Affidavit Pursuant to Section 809 of the General Municipal Law

State of New York)
County of Rockland) SS.:
Village of Haverstraw

I, _____, being duly sworn, hereby depose and say that all the following statements and the statements contained in the papers submitted herewith are true and that the nature and extent of any interests set forth are disclosed to the extent that they are known to the applicant.

1. Print or type full name and post office address

certifies that he is owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner that he has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application for the relief below set forth:

2. To the _____ of the Village of Haverstraw
(Board, Commission or Agency)

Rockland County, New York:

Application, petition or request is hereby submitted for:

- Variance or modification from the requirement of Section
- Special permit per the requirements of Section
- Review and approval of proposed subdivision plat;
- Exemption from a plat or official map;
- An order to issue a certificate, permit or license;
- An amendment to the Zoning Ordinance or Official Map or change thereof;
- Other (*explain*)

To permit construction, maintenance and use of _____

3. Premises affected are in _____ zone and from the town of _____ tax map, the property is known as Section _____ Block, _____, Lot(s) _____.

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 Village of Haverstraw 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

PART II

APPLICATION BEFORE THE ZONING BOARD OF APPEALS

Application, petition or request is hereby submitted for:

- Variance from the requirement of Section;
- Special permit per the requirements of Section;
- Review of an administrative decision of the Building Inspector;
- An order to issue a Certificate of Occupancy;
- An order to issue a Building Permit;
- An interpretation of the Zoning Ordinance or Map;
- Certification of an existing non-conforming structure or use;
- Other (explain);

To permit construction, maintenance and use of

If an area variance is required, please fill out below:

This application seeks a variance from the provisions of Article
Section(s)

Specifically, the applicant seeks a
(side yard, lot area, height, etc) of
(feet, height, f.a.r., etc)