

4052 Route 42, Monticello, NY 12701 | Phone: (845) 794-2500 | E-mail: Planning@townofthompson.com

SITE PLAN/SUBDIVISION APPLICATION

DATE STAMP		FEES DUE:		AMOUNT	STATUS	STATUS		
			An	plication Fee:		□ Paid □	Due	
		Prol	•	n Review Fee:			Due	
		1161	•	n Review Fee:			Due	
			Fillal Plai	-				
				Other Fees:		Paid 🗆	Due	
PROJECT INFORMAT	ION:							
Project Name/Title:								
Type of Review:	Review: SITE PLAN REVIEW LOT LINE CHANGE			SUBDIVISION OF LAND (# OF LOTS:) OTHER:				
Purpose of Review (de	scribe briefly)	:						
, , , , , , , , , , , , , , , , , , ,								
PROPERTY INFORMA	ATION:							
Physical Location/Add	ress:							
Zoning District(s):			S/B/L:			Acreage:		
Easements or other restrictions on property (describe briefly):								
CONTACTINEODAA	TION							
PROPERTY OWNED BY				PLANS PREPARI	FD RV·			
Individual:	•			Individual:	LU UI.			
Company:				Company:				
Address 1:				Address 1:				
Address 2:				Address 2:				
Phone:				Phone:				
E-mail:				E-mail:				
Name of person who w	vill annear hofe	ore the Pla	nning Board:					
Affiliation: Owner			_	ontract Vendee	□ Other:			
Anniation: 🗆 Owner	□ Agent/F	representa	itive 🗀 Co	ontract vendee	□ Other:			
CERTIFICATION/ACK	NOWLEDGE	MENT						
THE UNDERSIGNED HEREBY REQUESTS APPROVAL BY THE PLANNING BOARD ON THE ABOVE-IDENTIFIED APPLICATION. BY SIGNING THIS APPLICATION, THE UNDERSIGNED ACKNOWLEDGES RESPONSIBILITY FOR PAYMENT OF ALL FEES AND PROFESSIONAL SERVICES INCURRED BY THE PLANNING BOARD IN REVIEW OF THIS APPLICATION INCLUDING BUT NOT LIMITED TO PLANNER/CONSULTANT, ENGINEER, LEGAL, PUBLIC HEARING AND/OR SITE INSPECTION.								
Signature:			Title:					
				Date:				

Project Name/Title:	Applicant Name:						
SITE PLAN/SUI	BDIVISION APPLICATION CHECKLIST						
•							
	T BE SUBMITTED ALONG WITH THE SITE PLAN/SUBDIVISION APPLICATION. ST COULD DELAY PROCESSING OR RESULT IN REJECTION OF THE APPLICATION.						
	JIDE ONLY, AND ADDITIONAL ITEMS MAY BE REQUESTED BY THE BOARD OR STAFF.						
THIS CHECKLIST IS DESIGNED TO BE A G	SIDE ONET, AND ADDITIONAL TIENS WAT BE REQUESTED BY THE BOARD OR STAIT.						
ENVIRONMENTAL ASSESSMENT FORM (E.	AF): ☐ SHORT EAF ☐ FULL EAF						
	esource that can be used to pre-fill information for your site directly into the EAF Form.						
OWNER'S PROXY ATTACHED?	APPLICATION FEES PAID? YES NO						
THE FOLLOWING ITEMS SHALL BE INCORDODA	TED ON ANY SITE PLAN OR SUBDIVISION PLAT PRIOR TO CONSIDERATION FOR BEING						
	DO NOT LEAVE ANY BLANKS. PLACE AN "X" IN EACH BOX OR "N/A" IF NOT APPLICABLE.						
Name & Address of Applicant	TO NOT LEAVE AND DESIGNOTE DESIGNATION AND AND AND AND AND AND AND AND AND AN						
Name & Address of Owner (if different fr	om Applicant)						
Site/Subdivision Name & Location	отт принешти						
Tax ID (S/B/L)							
Location map at a scale of 1": 2,000' (ma	ximum)						
Zoning Compliance Table (what is require	ed vs. proposed for lot area, coverage, setbacks, parking, etc.)						
Zoning boundary if any portion of the pro	operty is within or adjacent to a different zoning district						
Date of Site Plan/Plat preparation and/or							
Plan scale (1" = 100' maximum) and nort	h arrow						
Name(s) of any adjoining owners							
Lot area in acres (lots less than 2 acres m							
	improvements (parking, drainage, water lines, sewer lines, wells, septic systems, etc.)						
Existing or proposed easements	dhaandaasiata haa asisisaasa af 25/ faanatha asatadiaa af tha abaath						
	d boundary is to be a minimum of 25' from the centerline of the street)						
Right-of-way width and rights of access a	num traveled surface - excluding shoulders - is to be 20' wide)						
Topographic contours at 2' intervals	Talli traveled surface - excluding shoulders - is to be 20 wide)						
Federal and/or NYSDEC wetlands with 10							
	c yards) of site preparation within 100 ' wetland buffer zone						
Flood plain boundaries							
Boundaries of any existing waterways/w	atercourses						
	c yards) of site preparation within 100-year floodplain or any watercourse						
Number of acres to be cleared or timber	harvested						
Amount of grading expected or known to	be required to bring the site to readiness.						
Estimated or known cubic yards of mater							
Estimated or known cubic yards of fill red	quired						
SUBDIVISIONS ONLY:							
Name and acreage of all lots (including re							
·	Final metes and bounds of all lots (including residual lot)						
Surveyor's Certification, Seal & Signature Certified sewage system design and place							
	ems on and within 200' of the parcel to be subdivided						
	ncurrence with plat together with owner's signature						
	e. filed map number, date and previous lot number)						
	[SEAL]						
Prepared by:							
Licensed Professional	Date						

Project Name/Title:		Applica	ant Name:						
	OWNER'S	PROXY STATI	EMENT						
(Owner)		hereby deposes and says that he/she resides at							
		in the county of and State or							
	and that he/she is the	owner of the premis	ses described in the	e foregoing application and					
that he/she has authorize	zed	to make the foregoing application as described therein.							
Date	Own and a Signature		osa/ Signatura						
Date	Owner's Signature	Witne	ess' Signature						
Every application, petitic from a plat or official of constituting the zoning of the interest of any state is part, in the person part to the extent known to separate to the extent known to separate to the extent known to separate the separate to the extent known to separate the separate that the se	on or request submitted for a vormap, license or permit, pursua and planning regulations of a multiple of a my officer or any officer or employ of the state of a policy of the state of th	ariance, amendment, int to the provisions unicipality shall state ee of such municipal such application, pe	s GENERAL MUNIC , change of zoning s of any ordinance the name, residen ity or of a municip tition or request (h	, approval of a plat, exemption e, local law, rule or regulation ce and the nature and extent of ality of which such municipality pereinafter called the applicant, □ County Planning Board					
TYPE OF APPLICATION:	☐ Variance ☐ Site Plan☐ Other:	☐ Subdivision	☐ Special Use	☐ Change of Zone					
	□ Other.			_					
NAME	RESIDENCE		NATURE & EXT	ENT OF INTEREST					
The above individuals ha	ave interest requiring disclosure	in accordance with s	section 809 of the	NYS General Municipal Law. If					
none, then so state.				·					
Date	Applicant Signature								