PLANNING DEPARTMENT

P.O. Box 470 1142 Route 311 Patterson, NY 12563

> Sarah Mayes Mary Schartau Secretary

Richard Williams *Town Planner*

Telephone (845) 878-6500 *FAX* (845) 878-2019



TOWN OF PATTERSON PLANNING & ZONING OFFICE

ZONING BOARD OF APPEALS

Lars Olenius, Chairman Mary Bodor, Vice Chair Marianne Burdick Michael Carinha Stephanie Fox

PLANNING BOARD

Thomas E. McNulty, Chairman Ron Taylor, Vice Chair Michael Montesano Edward J. Brady Jr. Robert F. Ladau

SITE PLAN APPLICATION				
1.	Applicant's Name	Mailing Address		Telephone #
2.	Owner's Name	Mailing Address		Telephone #
3.	Engineer's Name	Mailing Address		Telephone #
4.	Attorney's Name	Mailing Address		Telephone #
5.	Surveyor's Name	Mailing Address		Telephone #
6.	TYPE OF SITE PLAN APPLICATION	ION	7. <u>Tax Map Data</u>	
	[] Concept Plan		Tax Map Sheet	
	[] Site Plan		Block No.	
	[] Site Plan Waiver		Lot No.	
	[] Amended Site Plan		Existing Zoning _	
8.	Site address and/or nearest inte	rsection		
9.	The Applicant is a: [] Corpore	ation [] Partnership	[] Individual [] O	ther (specify)

0.	Relationship of Applicant to the property in question is:		
	[] Owner [] Contract Vendee [] Lessee [] Other (Specify)		
1.	Total area of existing lot (acres).		
2.	Existing Use of the site		
3.	Proposed Use of the site		
4.	Required filing fee (Show basis for fee determination)		
	(Certified check made payable to the Town of Patterson)		
5.	Environmental Assessment Form (EAF) submitted with application? [] Yes [] No		
6.	Deed to the property is filed in the office of the County Clerk as: Liber Page		
7.	Are there any deed restrictions that apply to, or easements that exist over the tract?		
	[] Yes [] No		
	If yes, a complete description is necessary and copies of legal documents provided.		
8.	Does Site Plan meet Zoning Regulations? [] Yes [] No		
9.	If no, was a Zoning Board of Appeals Variance granted? [] Yes [] No		
	Date Granted:		
	Variance Granted:		
0.	Section 154-79 ("Site Plans – Required Information") fully complied with? [] Yes [] No		

21.	Waivers requested: (See Section 154-86)
22.	Is the property within 500 feet from any municipal boundary or any existing or proposed County or state park or other recreation area, or the right-of-way of any existing or proposed county or State road or highway, stream or drainage channel, or an existing or proposed boundary of any County or state owned land on which a public building or institution is located? [] Yes [] No
23.	List other Agency Approvals required:
	Local (Wetlands and Watercourses, Fill, etc.)
	County:
	State:
	City:
	Federal:
	undersigned Applicant hereby requests consideration and processing of approval by the Planning
	licant's Signature Date
Con (14)	npleted application, plans, and check must be submitted to the Planning Board at least fourteen days prior to the regularly scheduled meetings, (1 st Thursday of the month is meeting) in order to luly considered submitted on the date of the meeting.

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Authorization for filing application

This section must be executed if anyone other than the owner is making this application.			
		is hereby authorized	to make the within application.
Ву:		Dated:	
>>>	>>>>>>	· · · · · · · · · · · · · · · · · · ·	····
		Site Inspection Authoriza	ation Form
I hereby give permission for the Town of Patterson Municipal Agencies and their agents to come upon and inspect these premises with respect to this application for:			
On:	Мар	Block	Lot
Applic	ant's Signature: X		Date:

AFFIDAVIT OF OWNERSHIP

STATE OF NEW YORK : SS :	
COUNTY OF PUTNAM :	
of full age,	being duly sworn according to law or
oath deposes and says, that the deponent resides at	
in the municipality ofin the C	County of
and in the State of; that	is the
fee of all that certain lot, piece or parcel of land situated, ly Patterson,	ring, and being in the Town of
which is known and designated as	
	~ :
Sworn to and subscribed, before me,	Signature
Sworn to and subscribed, before me, this day of, 20	Signature
	Signature
this, 20	Signature of full age, being duly sworn
this, 20 Notary Public	
this, 20 Notary Public according to law on oath deposes and says, that is a corporation duly organized and existing under the laws	of full age, being duly sworn (Corporation Name) s of the State of New York or is
this, 20 Notary Public according to law on oath deposes and says, that is a corporation duly organized and existing under the laws	of full age, being duly sworn (Corporation Name) of the State of New York or is ate Corporation duly authorized to abmission of this Application; and
this, 20 Notary Public according to law on oath deposes and says, that is a corporation duly organized and existing under the laws State conduct business in the State of New York including the su	of full age, being duly sworn (Corporation Name) of the State of New York or is ate Corporation duly authorized to abmission of this Application; and

TOWN OF PATTERSON

DISCLOSURE OF INTERESTS

PART I	OWNER INF	ORMATION
Property Ta	x Map #:	Owner's Name:
Street Addre	ess:	
Nature of A	pplication, Petitio	n, or Request:
PART II	NATURE AN	D EXTENT OF INTEREST
Municipal L Town of Par a part has ar	Law §809, of any Sterson Officer or my interest in the p	ddress, nature and extent of interest, as defined by General State Officer or employee, Putnam County Officer or employee, or employee, or of any municipality of which the Town of Patterson is property identified above, or is a part of has any interest in the association making the above application, petition or request.
PART III	CERTIFICAT	ΓΙΟΝ
above certif of General M County Offi Town of Par above, or is	ies by signature of Municipal Law §8 icer or Town of Patterson is a part ha	Petitioner or Person (Firm), submitting an Application as identified in this Disclosure Statement that, in accordance with the provisions 09, except as stated in Part II above, no State Officer or employee, atterson Officer or employee, or of any municipality of which the is any interest, financial or otherwise, in the property identified interest in the person or firm (partnership or association making the request.
		Signed:(Applicant, petitioner or person (Firm) making request.) By:(Print Name and Title)
		Dated: