TOWN OF YORKTOWN
PLANNING BOARD

Yorktown Community and Cultural Center, 1974 Commerce Street, Yorktown Heights, New York 10598, Phone (914) 962-6565, Fax (914) 962-3986

APPLICATION FOR SITE PLAN APPROVAL

Date _____

1. **Name of Project:** _____

2. **Tax Map Designation (Section, Block, Lot)** _____

   _____

3. **Zone:** _____ **Total Acreage:** _____

4. **Is a statement of easements relating to property attached?** ☐ Yes ☐ None exist

5. **Project narrative (brief description of proposed development):**

   _____

   _____

6. **Contact Person - CHOOSE ONLY ONE:**

   ☐ Applicant ☐ Owner ☐ Architect ☐ Wetland Scientist
   ☐ Attorney ☐ Engineer ☐ Surveyor ☐ Landscape Architect

7. **Applicant**

   Name _____

   Firm _____

   Address _____

   Phone _____

   Fax _____

   Email _____

8. **Owner of Record**

   Name _____

   Firm _____

   Address _____

   Phone _____

   Fax _____

   Email _____

9. Attorney

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

10. Engineer

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

Lic. No. _____

11. Surveyor

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

Lic. No. _____

12. Architect

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

Lic. No. _____

13. Wetland Scientist/Specialist

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

14. Landscape Architect

Name _____

Firm _____

Address _____

Phone _____

Fax _____

Email _____

Lic. No. _____

15. Is this project within 500 feet of the Town line? ☐ Yes ☐ No

16. Is this project within 500 feet of the Putnam County line? ☐ Yes ☐ No

17. Is this project within the Sustainable Development Study Area? ☐ Yes ☐ No

18. Is this project within 500 feet of:

The right-of-way of any existing or proposed state or county road? ☐ Yes ☐ No

The boundary of an existing or proposed state or county park or any state or county recreation area? ☐ Yes ☐ No

The boundary of state or county-owned land on which a public building/ institution is located? ☐ Yes ☐ No

An existing or proposed county drainage line? ☐ Yes ☐ No

The boundary of a farm located in an agricultural district? ☐ Yes ☐ No

19. Does the entire development plan for this project propose the disturbance of more than 5,000 SF of land? Note: If project is phased, include all phases in determination. ☐ Yes ☐ No

20. This project requires the following permits or approvals from the Town of Yorktown:

☐ Wetland Permit

☐ Stormwater Permit

☐ Tree Permit

☐ Planning Board special permit: _____

☐ Town Board variance or approval: _____

☐ Zoning Board of Appeals variance or special permit: _____

21. This project requires the following permits or approvals from other outside agencies:

- ☐ Westchester County Board of Health
- ☐ NYC DEP
- ☐ NYS DEC
- ☐ Other: _____

22. This parcel is in the following districts:

School District _____ Water District _____

Fire District _____ Sewer District _____

A Long Form/Full EAF with the original signature of the applicant must be attached to this application when submitted. The signature of the applicant's design professional or attorney is not acceptable.

The applicant agrees to comply with the requirements of the Road Specifications, the Land Use Regulations, Zoning Ordinance, Tree Removal and Excavation ordinance, and any additions or amendments thereto.

The applicant agrees to execution and delivery of deeds and required documents for reserved parks/recreation/open space/drainage control, roads and road widening strips and descriptions of easements at the time of the public hearing. Such execution and delivery shall not operate to vest title of said property in the Town of Yorktown until such dedication is accepted in the form of a resolution adopted by the Town Board at a regular meeting of said Board.

The execution and delivery of the deeds to the roads in the proposed subdivision as provided for by the terms of the deeds to the roads in the proposed subdivision as provided for by the terms of the approving resolution shall not operate to vest title of said roads in the Town of Yorktown until such deed is accepted in the form of a resolution adopted by the Town Board at regular meeting of said Board.

This application shall be considered complete when all plans and data required by Town of Yorktown Town Code Chapter 195: Land Development Regulations, including final reports from the Director of Planning and Town Engineer, are received by the Board.

Applicant	**Owner of Record**
_____	_____
NAME (PLEASE PRINT)	NAME (PLEASE PRINT)
_____	_____
SIGNATURE	SIGNATURE
_____	_____
DATE	DATE

Note: If the property owner is not the applicant for this application, in addition to the signature above, the owner of the property must also complete and have notarized one of the owner affidavits on the following page.

Note: By signing this document the owner of the subject property grants permission for Town Officials to enter the property for the purpose of reviewing this application.

REFER TO AFFIDAVITS ON THE FOLLOWING PAGES

ONE OF THE FOLLOWING AFFIDAVITS MUST BE COMPLETED

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AFFIDAVIT TO BE COMPLETED BY OWNER, OTHER THAN CORPORATION

STATE OF NEW YORK; COUNTY OF WESTCHESTER SS. :

_____, being duly sworn, deposes and says that he is the owner in fee of the property described in the foregoing application for consideration of preliminary plat, and that the statements contained therein are true to the best of his knowledge and belief.

_____

Sworn before me this
_____ date of _____, 20 __

_____
Notary Public

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AFFIDAVIT TO BE COMPLETED BY CORPORATION OWNER

STATE OF NEW YORK; COUNTY OF WESTCHESTER SS. :

_____, being duly sworn, deposes and says that he resides at _____ in the County of _____ and State of _____. That he is the _____ of _____ the corporation which is owner in fee of the property described in the foregoing application for _____ and that the statements contained therein are true to the best of his knowledge and belief.

_____

Sworn before me this
_____ date of _____, 20 __

_____
Notary Public

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AFFIDAVIT TO BE COMPLETED BY AGENT OF OWNER

STATE OF NEW YORK; COUNTY OF WESTCHESTER SS. :

_____, being duly sworn, deposes and says that he is the agent named in the foregoing application for _____ and that he has been duly authorized by the owner in fee to make such application and that foregoing statements are true to the best of his knowledge and belief.

_____

Sworn before me this
_____ date of _____, 20 __

_____
Notary Public

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Last updated: December 2011