Prior to filing any application for subdivision approval, the applicant shall request in writing that the zoning administrator schedule a pre-application conference for a determination of completeness.

APPLICATION TO THE PLANNING BOARD
TOWN OF HYDE PARK, NEW YORK
4383 Albany Post Road, Hyde Park, N.Y. 12538
Phone (845) 229-5111 X 2 Fax (845) 229-0349
www.hydeparkny.us

To be completed by the Town

Project Name. ______________________________________ Date Stamp:

Name of Primary Contact Person: ______________________

Phone # ____________________ Email address: ______________

Date Planning Board Accepted for Sketch: ____________

Received by: _______________ Application Fee: _____________

Escrow Deposit: ______________ EAF: _____________________

Number of copies (15): ______ 15 days prior to workshop: ______

Plat conforms to Preliminary plus other Planning Board Requirements: ______ Review Date ______

Incomplete and additional information required, check list sent: ______________________________

Eleven sets of revised applications received: __________________________________________

Date of SEQRA Declaration: _______________________________________________________

Complete and regular meeting scheduled (min. 15 days hence): __________________________
Representative must attend the meeting.

Planning Board determines incomplete: ______________

Planning Board accepts as complete for filing: ____________
and the Preliminary Plat public hearing is set (within 62 days) for _______________

Referrals by Planning Board:
____ DCDPW (w/l 500 ft of CO Rd):
____ NYS Regional DOT (w/l 500 ft of State Rd):
____ DCDPD: (w/l 500 ft of County or State road, drainage easement, institution or park, or municipal boundary)
To be completed by the applicant

Part I – Information

I. PROPERTY ADDRESS: _____________________________________________________________
   TAX GRID NO.: _______________________________________________________________
   ZONING DISTRICT: ____________________________________________________________
   NAME OF PRIOR SUBDIVISION_________________________________________________
   RECORDING DATE OF PREVIOUSLY FILED MAP: _________________________________

II. PROPERTY OWNERSHIP:
   NAME OF OWNER(s)___________________________________________________________
   ADDRESS: ___________________________________________________________________
   NAME OF CONTACT PERSON: _________________________________________________
   PHONE NUMBER: ___________________ EMAIL: ________________________________

III. APPLICANT INFORMATION:
   APPLICANT NAME: __________________________________________________________
   ADDRESS: ___________________________________________________________________
   ________________________________
   PHONE NUMBER: ___________________ Email: ________________________________

IV. PROJECT INFORMATION:
   Use proposed/Classification per Chapter 108, Article 5: ___________________________
   The Applicant requests a Subdivision for the use of the above described property as
   provided under
   ____ Section 96.9 Average Density Subdivision, or
   ____ Section 96.9 Average Density with Clustering, or
   ____ Section 96.10 Conservation Design Subdivision
   ____ PUD
of the Code of the Town of Hyde Park for the following purposes and uses:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Average Density Calculation:

Provide a calculation establishing the maximum number of dwelling units that can be
developed per the Schedule of Bulk Regulations and Chapter 108 Article 5.

Does a variance application accompany this application: __________________________

Identify the proposed method of legal assurances to prevent further subdivision of any lot
if such subdivision would reduce the average density below the permitted density.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Identify the proposed method of legal assurances to permanently set aside open space as

V ADDITIONAL INFORMATION TO ACCOMPANY THE APPLICATION

SEQRA Long Form Part I

All the information required for Sketch Plan Approval as found in 96.18
Sketch Pan Map
Context Map
Existing Resources Map
Waivers requested

If clustering, all information per 96.9.F.

If Conservation Design Subdivision, supply all information per 96.10.

Major Subdivision Preliminary Plat (map 96.20.A)

Accompanying Data
Entire holdings 96.20.B
Covenants or deed restrictions 96.20.C
Temporary Markers 96.20.D
Waivers 96.20.E
VI SIGNATURE AND VERIFICATION

*Please be advised that no application can be deemed complete unless signed below.*

I hereby certify that the information enclosed herewith and on the application is accurate and factual:

Signature of Applicant: ___________________________ Date: _______________

I the record owner do hereby authorize __________________________________ to represent me before the Planning Board during the Subdivision Approval process:

Signature of Owner: ___________________________ Date: _______________

NOTE: Expiration of Approval. 96.14.A.8

Planning Board approval of a preliminary plat shall expire six months after the date of such formal action. No Planning Board action will be taken after such expiration until a new application and filing fees are submitted. A waiver for a reasonable period of time of up to six months may be given in cases of hardship upon petition to the Planning Board prior to expiration of the preliminary approval.

For all applications that have been deemed withdrawn/closed/expired, payment of new fees are required if the applications are resubmitted.
Upon initial application to the Planning Board, an applicant or his/her agent is responsible to deposit with the Town an escrow or combination escrow amount as established by the Town Board or by the Chair or his/her designee in advance of the review of the application.

Upon receipt of your escrow, an account will be set up specifically for your project. The funds will be placed in a non-interest bearing account maintained by the Town of Hyde Park and will be used by the Planning Board for consultation with professional review services provided by engineers, lawyers, architects, landscape designers, surveyors, appraisers, planners and related professionals. Professional review expenses are billed at an hourly rate and you will be responsible for these bills as it pertains to your project. For instance, as the Town receives bills for work performed on your project from its consultants (i.e., Attorney, Engineer, Planner, etc.), your escrow will be used to pay these bills. The Chair or his/her designee prior to approval verifies bills by the Town Board for payment. At anytime, you may request, in writing, copies of the bills processed against your escrow directly from project Consultants. Please contact the ZBA or Planning Board Secretaries for the email address for the project consultant.

Before receiving the final decision by the Planning Board regarding your application, any bills submitted by the consultants used by the Planning Board will be fully paid by your escrow.

If at anytime there are insufficient funds in your account to cover the bills, there will be a delay in your application being placed on the agenda, review of your project, and delay in your project being considered for final decision. In the event that you fail to deposit the requested review fees into an escrow account, any application review, approval, permit or certificates of occupancy shall be withheld or suspended by the reviewing board, officer or employee of the Town until such monies are deposited. In addition, no application to the Town Board, Planning Board or Zoning Board of Appeals shall be accepted, nor shall any building permit or Certificate of Occupancy be issued, if said applicant has outstanding any fees due the Town from any previous applications.

The Town may invoke any and all legal remedies provided to it under applicable laws including Article 36 of the Hyde Park Zoning Code, including charging such sums against the real property subject to the permit application and adding that charge to and making it a part of the next real property tax bill associated with the subject property.

After all bills are paid in full, the Board will authorize release of any escrow balances to you or your designee.

Please sign below as agreement to the terms of the escrow procedures.

_________________________  ______________________
Signature of Primary Applicant  Date
Kindly print the name of the person whom any refund check will be made payable to upon completion of your application. This person will receive any escrow balance remaining, if any, upon approval of the Town Board.

Name: ______________________________________________________

Mailing Address: ______________________________________________

Telephone: _______________________________
96-20 Major Subdivision preliminary plat

Plat prepared by PE, RA, or LLS
Plat to contain:
Uniform size no larger than 36” x 48”
If more than one sheet, must have match line and key map
Title block:
   Name of Subdivision (S/D) and words Town of Hyde Park, Dutchess County, New York
   Name and address of subdivider and record owner
   Name and address, license number and seal and signature of PE and/or LLS
   Total acreage for entire tract and each zone-district within the tract
   Total number of proposed lots, acreage and square footage of each.
Other notations:
Date of original preparation and of each subsequent revision.