

### Town of New Paltz Planning Board

## \*\*\*\*SITE PLAN / SPECIAL USE APPLICATION\*\*\*\*

Date Received	Fee Paid _	Fi	le No. PB	
Eligible Meeting Date	Date Paid _	So	cheduled Meeting D	)ate
**************************************	USE ONLY – DO NO	OT WRITE ABOVE THIS L	INE***********	******
Owner/Applicant Information				
Owner of Record Name and Address				
Applicant's Name and Address			9	
Applicant's Telephone Nur	nber		E-Mail	
Professional Consultant's Name	and Address			
Professional Consultant's Name Consultant's Telephone Nu	ımber		E-Mail	
	7 -	1 .		
Property Information				
Property Location		2	1.1 (4)	
Tax Map SBL# Total Site Area	, S :	Curren	it Zoning	1 24 68 7
Total Site Area	acres	Property Fron	tage Length	feet
Describe current land use (i.e., v	acant, woodlan	nd, farmland, devel	oped, etc.)	
126 24 15 2	y , www grant	* ***		
Any easements or restrictions or	the land? (If	so, describe)		
Is the property located within 50	00 feet of an A	gricultural Distric		
Is the property located within 50				highway, or state or
county owned lands?   Yes   N		J	,	
to and on the lands. It is all				
Site Plan / Special Use Proposal Informa	ntion			
Type of development:   Business a	and/or professiona	l offices   Retail s	sales, restaurant	□ Accessory apartment
☐ Light industrial, warehouse ☐ Mixed U	Jse, Business park	c □ Commerci	al recreation   Mul	ltiple family residential
□ Hospitality establishment □ Place of pu	ublic assembly	Other		
Building area in sq. ft.	-			
Will a private road, public road,				
□ Yes □ No (If Yes, describ				
Environmental Setting Information				
Site affected by (check all that ap	nlv):			
☐ State or Federal wetland(s)		Watercourse(s)	□ Floodplain	1
☐ Steep Slopes (greater than		Archaeological or Hi		
□ Visual Resources		Potentially Significan		
□ Past Agricultural Pesticide				contiguous forest >200
acres, shrubland, or meadow			(, [	200
□ New Paltz Priority Biodive			/14iDLP) ¬ Hydric	Soils
***********				
I hereby certify the above informat				
Applicant's Signature		91	Date:	e e e e e e e e e e e e e e e e e e e



# Town of New Paltz Planning Board SITE PLAN / SPECIAL USE CHECKLIST

This Checklist includes the minimum information required before the Planning Board will consider the site plan application ready for its consideration. However, this Checklist should not be construed to imply that no additional information will be required to qualify for the Board's review consideration, since unique features of certain properties and certain land uses require more detailed investigation and disclosure than others. For full plan and report requirements, the applicant must refer to applicable regulations, specifications and standards, as detailed in the Town Zoning Code (Chapter 140).

If plans are being submitted for Conceptual Review or Sketch Plan Review, indicate which items are in compliance at time of submission. <u>Certain items may not be required at this time</u>. This determination will be made by the Building Department and/or the Planning Board Chairman.

Applicants or their professional consultants must fill out this Checklist, certifying that all of the items have been addressed, and attach a written explanation which provides the specific reason why a particular item might not be applicable due to site-specific circumstances. Until all Checklist items have been completed, along with specific explanations for all items not included, the application will not be eligible for the Board's consideration of Sketch Plan Review. This Checklist (and written explanation of omitted items, if applicable) must be submitted with the <u>original Site Plan / Special Use Application form</u> and twelve additional copies of the application and all documents before it can be scheduled for review by the Planning Board.

Additionally, the Applicant must submit a written **Project Description Narrative**, which concisely describes the proposed project, addressing: 1) its location; 2) a general description of existing adjacent and neighborhood uses; 3) the type and purpose of the proposed development; 4) the property's existing condition and use; 5) the zoning district in which it is located; 6) the scope of the proposed development (i.e., project acreage, number, size and use of buildings, parking facilities and expected traffic generation, hours of operation, total area of land disturbance); 7) any potential impact on the immediate area (i.e., aesthetics, drainage, natural resources, compatibility with neighboring uses, etc.), and 8) potential impacts on community services (i.e., school, traffic network, utilities, emergency services, etc.). This required Narrative should be limited to <u>one</u> typewritten page. The required Narrative must be submitted with the Site Plan / Special Use Checklist (including written explanation of <u>omitted items, if applicable</u>) and Site Plan / Special Use Application form before the project can be scheduled for review by the Planning Board.

NAME OF PROPOSED PROJECT:	Roy For Sharly with a latinguities of the
LOCATION OF PROPOSED PROJECT:	Mac/
NAME OF APPLICANT:	

#### 1. LAND USE INFORMATION

LAND USE DESCRIPTION	YES	NO	N/A
Access to Public Street provided?			
Land for proposed development lies totally within the Town?			
Variance(s) required □ and/or granted □ (check boxes that apply)			
Previous site plan approvals granted, approved map copy provided?			
County Planning Board referral required?			
Town Street, County or State Highway access approval required?			
Town Street, Private Road, Public Water or Sewer proposed?			

County Health Dept. approval required?			
NYSDEC Stormwater Discharge Permit required?			
NYSDEC Wastewater SPDES Discharge Permit required?			27/1
LAND USE DESCRIPTION (continued)	YES	NO	N/A
Property located within the designated floodplain area?			
Wetland (State or Federal) Disturbance Permit or Stream Disturbance Permit(s) or Water Quality			
Certification required?			

#### 2. ENVIRONMENTAL INFORMATION

(Check boxes which apply.)

	Type I	Type II	Unlisted	Exempt
SEQRA Classification	Maria Caranta de la compansión de la compa			
	Short EAF	Full EAF	Not Applicable	
Environmental Assessment	- 3 v 3	- i		ř
Form Submitted				

3. SKETCH PLAN CHECKLIST INFORMATION: (sheet size shall be 22" by 34", 30" by 42" or 36" by 48", folded to 8  $\frac{1}{2}$ " x 11"). All information to be shown at a scale not less than 1" = 100', or larger. When the plan consists of multiple sheets with match lines, a 1" = 200' overall plan must also be submitted.

If plans are being submitted for Conceptual Review or Sketch Plan Review, indicate which items are in compliance at time of submission. Certain items may not be required at this time. This determination will be made by the Building Department and/or the Planning Board Chairman.

Please submit a map created using the Ulster County Parcel Viewer (available at http://ulstercountyny.gov/maps/parcel-viewer/) showing the highlighted parcel with the following map layers turned on:

- FEMA Adopted Flood Hazards
- Freshwater Wetlands
- National Wetlands Inventory
- Hydric Soils
- Habitat Cores
- Biologically Important Areas

Note that on the basis of this information and the location and extent of the proposed project, the Planning Board may request a habitat assessment be completed following the Town's Habitat Assessment Guidelines, available on the Planning Board website.

Plans shall ultimately include the following:

	MAP INFORMATION (ITEM A-G MUST BE COMPLETED AT TIME OF SUBMISSION PER § 140-52 OF THE TOWN CODE)	YES	NO
A. The name and address of the owner of record of the property and the name, address and professional seal of the individual preparing the site plan.			
В.	The names of all owners of record of adjacent properties, including those across streets, roadways, rights of way and easements, including Tax Map SBL #s.	la He	
C.	The accurate location of the boundaries of the appliant's property and any existing lot lines, streets, easements or other reservations located within it.	2	10
D.	The location of all existing buildings, structures, sidewalks, landscaped areas and other manmade features of the site and related setback dimensions, as well as those on adjacent properties within 100 feet of the property bouindary. (Setback dimensions for structures on adjacent		

	Town of New Faitz Flaiming Board			
	properties need not be shown if unavailable.)			
E.	The proposed location, use, floor area and design of all buildings and structures with proposed		14	
	setback dimensions.	1 1		
F.	A tabular analysis of the proposed use of all floor space, clearly indicating the proposed type of			
	use by floor level and the proposed division of buildings into units of separate occupancy.	-		
G.	The location and design of all driveways and parking and loading areas, including improvements			
	to adjoining streets designed to facilitate the safe and convenient flow of traffic to and from the			
- in	site.	et xX		
H.	The location and design of the proposed water supply and sewage disposal and stormwater			
	drainage systems, along with an analysis of the impact of the proposed site development upon			
	them.			
I.	The location and design of all other proposed improvements, including signs, exterior lighting,			0
	recreational facilities, fences, walls, refuse enclosure, buffer screening and landscaping.			
J.	The proposed nature and location of any uses which will not be located within a building or			
	structure including storage and display areas, if any.			
K.	Existing and proposed contours, with vertical intervals of not more than two feet, unless waived			
12.	by the Planning Board, extending at least 50 feet beyond the site boundaries, and reference to the			
	United States Geological Survey datum or other approved benchmark.			
L.	The nature and location of all other existing site features including water bodies, streams,			
D.	watercourses, wetlands, floodplain boundaries, wooded areas, rock outcrops and single trees	4 -		
	with a diameter at breast height (dbh) of 12 or more inches with any and all regulated buffer			
	areas. The plan shall clearly indicated which site features are to be retained and which will be	Towns	1	
	removed or altered.	× 65		
M.	Appropriate plans for the protection of the site's environment during the course of construction,	X 54 1 1		
171.	including soil erosion and sedimentation control, protection of existing vegetation, noise control,	l lar		
	limits on hours of operation, access routes for construction vehicles and other similar measures			
	as may be appropriate in each individual case.			
N.	The name and address of the developer, if other than the owner	1971		The l
O.	A vicinity map at a scale of not less than 1" = 2000' and an area (tax) map showing the tax		1	
0.	parcels within 500' of the site			
P.	North arrow and graphic map scale			
Q.	Existing zoning district, with district boundaries on or within 300' of the site		$\top$	
R.	The location of all utilities (water, sewer, electric, telephone and gas) on or nearby the property		$\top$	
S.	The location of all culverts and drainage facilities on or nearby the property, with pipe sizes,		+	
S.	materials and grades		1 67	
T.	Approximate limits of proposed clearing and grading			
U.	Bulk Standards Schedule, indicating zoning district dimensional standards compliance, listed as		+	
υ.	both "required" and "provided"			
V.	Schematic rendering of building elevation, including general architectural style, dimensions,	1	+	
٧.				
337	construction materials, color, etc.		-	
W.	Sight distance dimensions at intersections with existing streets and roadways, location of		1	
37	proposed highway improvements		+	
X.	Proposed utilities (water, sewer, electric, telephone, etc.) and schematic drainage analysis with			
	the approximate size and location of proposed stormwater management facilities, location of			
37	proposed utility and drainage easements		-	
Y.	Location of proposed open spaces and recreation areas, location of buffer areas and screening		Ť.	
	devices	1313	_	
Z.	Location of proposed pedestrian trails and sidewalks			
AA.	Location of proposed outdoor storage and refuse handling provisions		_	
BB.	Location and detail of all proposed site signage (including size, color, illumination, etc.)	L. C.		
CC.	Location, type, wattage and type of shielded site lighting			*

DD.	Proposed landscaping, including species type, size and spacing	
EE.	Proposed grading, indicating a minimum 2 feet contour intervals	
FF.	Stamp and signature of licensed engineer or architect	
GG.	Any other information that is clearly necessary to determine compliance with the provisions of	
	this law	

****	ADDITICANT'S SURMITTAL	INFORMATION COMPLETENESS	CERTIFICATION ****
	APPLICANT'S SUBVILLEAL	IIN BUJE IVIA LIUJIN UUJIVIE LIBILIBINISS	CENTIFICATION

I hereby certify that I have carefully reviewed the above-listed Town's requirements for the review of	
site plan / special use applications, including each of the checklist items listed above, have accurately addressed the	se
requirements and certify to the best of my knowledge and belief that all requirements have been met. I further	
understand that any required item that is determined by the Town Planning Board to have been inadequately address	
will delay the processing of the attached original application with twelve copies and will result in additional review	
expense.	

By:			
	Applicant or Agent for the Applicant		
Date: _	The transfer of the second	<u>. 188 S</u>	
			 _

NAME OF PROPOSED PROJECT:	
LOCATION OF PROPOSED PROJECT:	The first of the control of the second of the control of the contr
NAME OF APPLICANT:	
NAME OF PROPOSED PROJECT:	u Nilong Joyde Amerika Marina manggan penggan panggan banggan banggan banggan banggan banggan banggan banggan Banggan banggan bangga
LOCATION OF PROPOSED PROJECT:	with we special them hope the major for the control of the control
NAME OF APPLICANT:	

## \*\*\*\* FOR PLANNING BOARD USE ONLY \*\*\*\*

Date SITE PLAN / SPECIAL USE REVIEW CHECKLIST, EAF, LETTER OF AGENT and PROJECT DESCRIPTION NARRATIVE Submitted:

Date CHECKLIST Checked: \_\_\_\_\_ Checked By: \_\_\_\_\_

#### Site Plan / Special Use Application Submittal Review Completion Status

SUBMISSION ITEM	YES	NO	DATE ACCEPTED	COMMENTS
Site Plan/Special Use Application Form complete	2.00	7.01.02	S 2 20 70 1	
Letter of Agent attached (if required)				
Project Description Narrative	Part L	1 1		
Environmental Assessment Form (from DEC Mapper)				
Site Plan / Special Use Checklist complete				
Application review fee paid				

#### OWNER'S AFFIDAVIT

The undersigned states and declare(s) that:
1. I am the owner of property ("the Property") located at
Street address: Tax Map S/B/L:
Tax Map S/B/L:
2. I have attached a copy of the deed giving me a fee title interest in the Property, which is recorded in the Office of the Ulster County Clerk at
3. I am making, or if I am not the applicant, have agreed and consented to allow
4. I have the legal right to make or authorize the making of said application.
5. To the best of my knowledge and belief, the statements made in that application are true and correct.
6. I hereby authorize to act as my representative in all matters regarding said application(s).
7. I expressly grant permission to the Planning Board and its authorized representatives to enter upon the Property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I acknowledge and agree that I may revoke this grant of permission in writing, but that such revocation will constitute an immediate withdrawal of my land use applications and no further action will be taken until or unless a new application is submitted to, and accepted by, the Town Building Department
8. I acknowledge and agree that the Town of New Paltz may incur substantial costs in review of any land use application, and that the applicant and the property owner are jointly and severally responsible for the payment of all application fees, application review fees, and inspection fees incurred by the Town during the review of this application, including all reasonable engineering, legal and consultant review fees and related costs, that are necessary for the complete and proper review of this application, including environmental review fees.
9. I acknowledge and agree that while the Town will endeavor to have the person or entity who made the land application reimburse the Town for those fees, costs, or other expenses, in the event that they are not promptly paid, the owner is responsible if they are not promptly paid by the applicant, and if they are not promptly paid by the Owner, the Town Board may determine that the fees, costs, or other expenses paid by the Town for which the Town has not been reimbursed shall be assessed, levied and collected as provided in Article VIII of Chapter 127 of the Town Code, and impose such costs upon the Property in the same manner as a Town tax.
10. Under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.
Date:
Date:
Applicant/Owner Applicant/Owner
STATE OF NEW YORK)
)ss.:
COUNTY OF ULSTER)
On, 20, before me, the undersigned, a Notary Public in and for said State, personally appeared, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity, and that
by his/her/their signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.
VI. D.W. O. C. CVI. VI. I
Notary Public, State of New York

Please attach the completed

## Short Environmental Assessment Form Part 1 - Project Information

found at this website www.dec.ny.gov/eafmapper

If you do not have internet access, please see Planning and Zoning Board of Appeals Secretary for hardcopy of this form.

This page left blank for attachment of Short EAF Part 1

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	1   1   1   1   1   1   1   1   1   1		1111
1,	Will the proposed action create a material conflict with an adopted land use plan or zoning	No, or small impact may occur	Moderate to large impact may occur
	regulations?		
2.	Will the proposed action result in a change in the use or intensity of use of land?	87	- 11
3.	Will the proposed action impair the character or quality of the existing community?		
4.	Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5.	Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6.	Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7.	Will the proposed action impact existing: a, public / private water supplies?	7.	,
	b. public / private wastewater treatment utilities?		
8,	Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		ī
9.	Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No, 01	Moderate
1	small	to large
	impact	inapact
	may	ากลy
	occur	occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

а	that the proposed action may result in one or more pote	
a	Check this box if you have determined, based on the inforthat the proposed action will not result in any significant	mation and analysis above, and any supporting documentation, adverse environmental impacts.
	Name of Lead Agency	Dato
Pr	int or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
	Signature of Responsible Officer in Load Agency	Signature of Preparer (if different from Responsible Officer)



## Town of New Paltz Planning Board **Application Review and Administrative Fees**

Effective January 2019 (adopted 1/03/2019)

Per Article IX - Planning and Zoning Fees of Town of New Paltz Code Planning Board fees are non-refundable and subject to other requirements per §140-59 to §140-62; §140-63; §140-66 to 140-69 Planning Board escrow deposits are subject to §140-60.1

Foo Typo	Details
Fee Type	<u>Details</u>
Conceptual Review (not requiring consultants)	One conceptual review with the Planning Board will be granted at no charge.
Conceptual Review with Consultants	At the discretion of the Planning Board Chair, a conceptual review requiring consultants may be granted. The fee of \$300.00 per consultant will be collected prior to the review. The conceptual review will not exceed 1 hour.
Clearing and Grading	\$250.00 base fee, plus \$125.00 for each additional meeting after the first two meetings, plus \$150.00 for each site visit required by the Planning Board Engineer.
Sign related application review (separate from Building Department Permit fees)	A) Individual sign application review - \$150.00 B) Master Sign Plan application review - \$150.00 base fee plus \$50.00 per sign. C) Simplified Sign Plan (request for waiver of Sign Plan review by Planning Board) \$50.00
Site Plan Review	A) Residential - \$500.00 base fee, plus \$150 per dwelling unit.  B) Non-residential - \$150.00 base fee plus, fee per square foot (see below).  Up to 1,000 sf - \$250 1,001-10,000 sf - \$2,500 10,001-20,000 sf - \$5,000 20,001 sf and above - \$7,500 C) Non-residential site changes only - \$500.00  D) Farm/Agriculture Site Plan - \$450.00
Simplified Site Plan Review (waiver of site plan review)	\$450.00 – Application must be in accordance with §140-51.3 and §140-51.4 of the Zoning Code.
Wetland Permit Fee	\$250.00
Steep Slope Fee	\$250.00

Fee Type	<b>Details</b> (Continued from page 1)		
Special Use Permit Applications	A) Accessory Apartment: \$500.00  B) Accessory Use: As defined in the Town of New Paltz Zoning Code - \$300.00  C.) Special Use Permit Annual Renewal for Acc. Apt.: \$50.00		
Subdivision Review	A) <u>Subdivision</u> application with <u>no net gain of lots</u> - \$600.00 B) <u>Subdivision</u> application creating <u>one (1) or more lots</u> - \$750.00 plus \$200.00 for each additional lot.		
Wireless Communications Facility	A) Minor Facility: \$575.00 base fee for the first three meetings and \$185.00 for each additional meeting.  B) Major Facility: \$1400 for the first three meetings and \$300.00 for each additional meeting.		
	eag Styles a		
Other fees	Dormant Application Fee – after 12 months of no activity on behalf of the applicant, an application will be considered dormant. In order for the review process to begin again, a reinstatement fee of one half of the initial application fee will be charged.  90 Day Extension Fee – 75.00		
Escrow Deposits	Escrow deposits will be determined upon initial application review. (As defined in Town Code Section 140-60.1)		
Recreation Trust Fund Fees (in lieu of parkland set- aside)	\$5500.00 for each additional lot created by subdivision or each dwelling unit created by site plan, with the exception of Accessory apartments which shall be \$1000, unless otherwise determined by the Town Board		



#### Town of New Paltz Planning Board Meeting Dates for 2019

(Meetings are held the 2<sup>nd</sup> Monday of most months; Planning workshops are held the 4<sup>th</sup> Monday of most months)

Meeting Date 7:00 PM Conceptuals & Briefings 7:30 PM – Application Reviews	Subdivision & Site Plan Submission Date <u>Noon Deadline</u>	Accessory Apartment & Sign Plan Submission Date Noon Deadline
January 14	January 2 *	January 7
January 28 - workshop		
February 11	January 28	February 4
February 25 - workshop		
March 11	February 25	March 4
March 25 - workshop		
April 8	March 25	April 1
April 22 - workshop		
May 13	April 29	May 6
May 30 – workshop (Thursday)*		
June 10	May 27	June 3
June 24 - workshop		
July 8	June 24	July 1
July 22 - workshop		
August 12	July 22	August 5
August 26 - workshop		
September 9	August 26	September 2
September 23 - workshop		
Oct. 15 (Tuesday)*	September 23	September 30
October 28 - workshop		
November 14 (Thursday) *	October 28	November 7
November 25 - workshop		
December 9	November 25	December 2b

<sup>\*</sup>Alternate date due to holiday

Note: Submission of materials by a certain date <u>qualifies</u> an applicant for inclusion on an agenda but <u>does not guarantee</u> inclusion on a given agenda. The Planning Board Chairman will schedule applicants for any given meeting date.



#### Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

interna	1 Name (as shown on your income tax return). Name is required on this line; or		The state of the s				
	2 Business name/disregarded entity name, if different from above						
e. ns on page 3.				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)			
Print or type. See Specific Instructions on page	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership)  Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.			Exemption from FATCA reporting code (if any)			
ecif	Other (see instructions)						
See Sp	5 Address (number, street, and apt. or suite no.) See instructions.			nd address (optional)			
0,	6 City, state, and ZIP code						
	7 List account number(s) here (optional)						
Par	Taxpayer Identification Number (TIN)						
Enter backu reside	Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>						
Note: Numb	If the account is in more than one name, see the instructions for line 1 er To Give the Requester for guidelines on whose number to enter.	. Also see What Name	and Employer	identification number			
Par	Certification						
Under	penalties of perjury, I certify that:						
2. I an Ser	number shown on this form is my correct taxpayer identification num n not subject to backup withholding because: (a) I am exempt from ba- vice (IRS) that I am subject to backup withholding as a result of a failu- longer subject to backup withholding; and	ckup withholding, or (b	I have not been no	otified by the Internal Revenue			
	n a U.S. citizen or other U.S. person (defined below); and						
4. The	FATCA code(s) entered on this form (if any) indicating that I am exem	pt from FATCA reportin	ig is correct.				
you ha	cation instructions. You must cross out item 2 above if you have been not be failed to report all interest and dividends on your tax return. For real essition or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification, but	tate transactions, item 2 ions to an individual retir	does not apply. For ement arrangement	r mortgage interest paid, (IRA), and generally, payments			
Sign Here	Signature of U.S. person		Date ►				
Gei	neral Instructions	• Form 1099-DIV (di funds)	vidends, including t	those from stocks or mutual			
noted		• Form 1099-MISC (proceeds)	various types of inc	come, prizes, awards, or gross			
related	e developments. For the latest information about developments d to Form W-9 and its instructions, such as legislation enacted	<ul> <li>Form 1099-B (stock transactions by broken</li> </ul>		ales and certain other			
	hey were published, go to www.irs.gov/FormW9.	• Form 1099-S (prod		and the second of the second o			
An inc	pose of Form  lividual or entity (Form W-9 requester) who is required to file an	• Form 1098 (home		d party network transactions) 1098-E (student loan interest),			
inform	nation return with the IRS must obtain your correct taxpayer rication number (TIN) which may be your social security number	1098-T (tuition)	relad deht\				
(SSN)	individual taxpayer identification number (ITIN), adoption	• Form 1099-C (can		nent of secured propertyl			
taxpay	yer identification number (ATIN), or employer identification number to report on an information return the amount paid to you, or other nt reportable on an information return. Examples of information		uisition or abandonment of secured property) nly if you are a U.S. person (including a resident ur correct TIN.				
arrioui	Topological of all morning of testing to the fell and a		- F 14/ 0 / - ''	TIME TIME			

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

#### **OWNER'S AFFIDAVIT**

The undersigned states and declare(s) that:

1. I am the owner of property ("the Property") located at  Street address:
Tax Map S/B/L:
2. I have attached a copy of the deed giving me a fee title interest in the Property, which is recorded in the Office of the Ulster County Clerk at
·
3. I am making, or if I am not the applicant, have agreed and consented to allow to make, an application to the Town of New Paltz
for land use approval(s) from the Town of New Paltz Planning Board and/or Zoning Board of Appeals that will, if granted, benefit the Property.
4. I have the legal right to make or authorize the making of said application.
5. To the best of my knowledge and belief, the statements made in that application are true and correct.
6. I hereby authorize to act as my representative in all matters regarding said application(s).
7. I expressly grant permission to the Planning Board and its authorized representatives to enter upon the Property, at all reasonable times, for the purpose of conducting inspections and

- 7. I expressly grant permission to the Planning Board and its authorized representatives to enter upon the Property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I acknowledge and agree that I may revoke this grant of permission in writing, but that such revocation will constitute an immediate withdrawal of my land use applications and no further action will be taken until or unless a new application is submitted to, and accepted by, the Town Building Department..
- 8. I acknowledge and agree that the Town of New Paltz may incur substantial costs in review of any land use application, and that the applicant and the property owner are jointly and severally responsible for the payment of all application fees, application review fees, and inspection fees incurred by the Town during the review of this application, including all reasonable engineering, legal and consultant review fees and related costs, that are necessary for the complete and proper review of this application, including environmental review fees.
- 9. I acknowledge and agree that while the Town will endeavor to have the person or entity who made the land application reimburse the Town for those fees, costs, or other expenses, in the event that they are not promptly paid, the owner is responsible if they are not promptly paid by the applicant, and if they are not promptly paid by the owner, the Town Board may determine

reimbursed shall be assessed, levied and collected as provided in Article VIII of Chapter 127 of the Town Code, and impose such costs upon the Property in the same manner as a Town tax. 10. Under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct. Date: Applicant/Owner Applicant/Owner STATE OF NEW YORK) )ss.: COUNTY OF ULSTER) \_\_\_\_\_, 20\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity, and that by his/her/their signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument. Notary Public, State of New York

that the fees, costs, or other expenses paid by the Town for which the Town has not been



# Town of New Patz Planning Board

## PROJECT SUMMARY FORM (TO ESTABLISH ESCROW ACCOUNT)

PB#				
Date Received:	Fee Paid:			
Escrow Initial Deposit:				
Office use only –	do not write above this line			
0	8			
Name of Project				
Property Address				
Tax Map SBL#				
Applicant				
Applicant's Address				
Applicant's Telephone Number	m at al			
Signature of Applicant (or authorized agent) _				

(\* This form is used for bookkeeping purposes only. It is not part of the public record of the Planning Board Application file.
This information will be used for monthly escrow billing only.)