

**PLANNING DEPARTMENT**

P.O. Box 470  
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Patterson, NY 12563

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**TOWN OF PATTERSON  
PLANNING & ZONING OFFICE**

**ZONING BOARD OF APPEALS**

Robert Schmitt, Chairman  
Stephanie Fox, Vice Chair  
Marianne Burdick  
Christopher Gonch  
Ginny Nacerino

**PLANNING BOARD**

Ron Taylor, Chairman  
Adam B. Stiebeling, Vice Chair  
Joseph Downey  
Thomas Girard  
Steven Tociidowski

**SUBDIVISION 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 SUBDIVISION APPLICATION**

☐ Concept Plan

☐ Minor Subdivision: Final Plat

☐ Major Subdivision: Preliminary Plat

☐ Major Subdivision: Final Plat

7. **Tax Map Data**

**Tax Map Sheet** \_\_\_\_\_

**Block No.** \_\_\_\_\_

**Lot No.** \_\_\_\_\_

**Existing Zoning** \_\_\_\_\_

8. **Site address and/or nearest intersection:** \_\_\_\_\_

9. **The Applicant is a:**    ☐ Corporation    ☐ Partnership    ☐ Individual    ☐ Other (specify)

\_\_\_\_\_

10. Relationship of Applicant to the property in question is:

☐ Owner      ☐ Contract Vendee      ☐ Lessee      ☐ Other (Specify) \_\_\_\_\_

11. Total area of existing lot: \_\_\_\_\_ (acres)

12. Average new lot size: \_\_\_\_\_ (acres)

13. Total number of lots (including remainder): \_\_\_\_\_

14. Required filing fee (certified check made payable to the Town of Patterson): \$ \_\_\_\_\_

Show basis for fee determination: \_\_\_\_\_

15. Environmental Assessment Form (EAF) submitted with application? ☐ Yes    ☐ No

16. Deed to the property is filed in the office of the County Clerk as: Liber: \_\_\_\_\_ Page: \_\_\_\_\_

17. 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 must be provided.

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18. Does subdivision meet Zoning Regulations? ☐ Yes    ☐ No

19. If no, was a Zoning Board of Appeals Variance granted? ☐ Yes    ☐ No

Date Granted: \_\_\_\_\_

Variance Granted: \_\_\_\_\_

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20. Chapter 138, Article V ("Specifications of Plans & Plats") fully complied with? ☐ Yes    ☐ No

21. Waivers requested: \_\_\_\_\_

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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: \_\_\_\_\_

\_\_\_\_\_



The undersigned Applicant hereby requests consideration and processing of approval by the Planning Board.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Completed application, plans, and check must be submitted to the Planning Board at least fourteen (14) days prior to the regularly scheduled meetings (held on the first Thursday of each month) in order to be duly considered submitted on the date of the meeting.*

**\*In addition to 12 paper copies of all forms/documents, 4 – full-size paper copies of plans, and 8 – 11” x 17” paper copies of plans, all submissions MUST include electronic versions of ALL plans.\***



**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.

By: \_\_\_\_\_  
Property Owner

Dated: \_\_\_\_\_



**Site Inspection Authorization 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: \_\_\_\_\_ Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Affidavit of Ownership**

STATE OF NEW YORK :  
SS :  
COUNTY OF PUTNAM :

\_\_\_\_\_ of full age, being duly sworn according to law on oath  
*Property Owner Name*  
deposes and says, that the deponent resides at \_\_\_\_\_  
*Property Owner Street Address*  
in the municipality of \_\_\_\_\_ in the County of \_\_\_\_\_ and in the  
*Town/City* *County*  
State of \_\_\_\_\_; \_\_\_\_\_ is the owner in  
*State* *Property Owner Name*  
fee of all that certain lot, piece, or parcel of land situated, lying, and being in the Town of Patterson, which is  
known and designated as \_\_\_\_\_.  
*Property Address for Which Application is Being Made*

\_\_\_\_\_  
**Signature** (Notarization required)

Sworn to and subscribed, before me,

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

***If you are submitting an application as a corporation, you must also complete the bottom portion of this page. A list of all principals and officers of the corporation MUST BE ATTACHED to this application.***

\_\_\_\_\_ of full age, being duly sworn according to law on  
*Property Owner Name*  
oath deposes and says, that \_\_\_\_\_  
*Corporation Name*  
is a corporation duly organized and existing under the laws of the State of New York or is a \_\_\_\_\_  
*State*

State Corporation duly authorized to conduct business in the State of New York including the submission of this Application; and further that the attached list of individuals are Principals and/or Officers of the aforementioned Corporation.

\_\_\_\_\_  
**Signature** (Notarization required)

Sworn to and subscribed, before me,

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

**Town of Patterson**  
**Disclosure of Interests**

*Application Title:*  
*Case #:*

**Part I:      Owner Information**

Property Tax Map #: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Nature of Application, Petition, or Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part II:      Nature & Extent of Interest**

List the Name, residence or address, nature and extent of interest, as defined by General Municipal Law §809, of any State Officer or employee, Putnam County Officer or employee, or Town of Patterson Officer or employee, or of any municipality of which the Town of Patterson is a part has any interest in the property identified above, or is a part of has any interest in the person or firm/partnership or association making the above application, petition or request. If there is no conflict of interest, answer "None".

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part III:      Certification**

The Undersigned Applicant, Petitioner or Person (Firm), submitting an Application as identified above certifies by signature on this Disclosure Statement that, in accordance with the provisions of General Municipal Law §809, except as stated in Part II above, no State Officer or employee, County Officer or Town of Patterson Officer or employee, or of any municipality of which the Town of Patterson is a part has any interest, financial or otherwise, in the property identified above, or is a part of has any interest in the person or firm (partnership or association making the above application, petition or request.

**Signed:** \_\_\_\_\_  
*(Applicant, Petitioner or Person (Firm) Making Request)*

**By:** \_\_\_\_\_  
*(Print Name and Title)*

**Dated:** \_\_\_\_\_