



# VILLAGE OF MILLERTON

INCORPORATED JUNE 30, 1875

DUTCHESS COUNTY

PO BOX 528

MILLERTON, NY 12546

OFFICE PHONE 518-789-4489

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## Subdivision Application Information

Date Received: \_\_\_\_\_

Planning Board File No: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Earliest Meeting Date: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Record Owners Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicants Telephone No: \_\_\_\_\_

Applicant's E-mail: \_\_\_\_\_

Professional Consultant's Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Professional Consultant's Telephone No: \_\_\_\_\_

Professional Consultant's E-mail: \_\_\_\_\_

Property Location: \_\_\_\_\_

Tax Map Grid No: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Total Property area: \_\_\_\_\_ acres

Property Frontage Length: \_\_\_\_\_ feet

Describe current land use: (i.e., vacant, woodland, farmland, developed, etc.) \_\_\_\_\_

Any easements or restrictions on the land? (If so, describe) \_\_\_\_\_

Is the property located within 500 feet of an Agricultural District?  yes  no

Type of subdivision:  Standard, Conventional  Lot Line realignment

Cluster or conservation design subdivision  other (describe) \_\_\_\_\_

Number of Lots proposed; \_\_\_\_\_ Average Lot Size: \_\_\_\_\_ acres

Number of two family dwellings proposed: \_\_\_\_\_ Number of flag lots proposed: \_\_\_\_\_

Will a private road, public road community water system or central system be proposed?

yes  no (if yes, describe) \_\_\_\_\_

Will written waivers be requested? (If so, describe) \_\_\_\_\_

Site affected by (check all that applies):

State or Federal wetland(s)

Watercourse(s)

Floodplain

Archaeological Resources

Historic Resources

Steep Slopes (greater than 15%)

Visual Resources

Potentially Significant Habitat Areas

Important Natural Features

past Agricultural Pesticides Applications

(i.e. old-growth forest, stone walls, hedgerows, etc.)

I here by certify the above information to be true and correct according to my knowledge and belief.

By: \_\_\_\_\_

Applicant's Signature

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