

APPLICATION FOR SUBDIVISION

Village of Granville
Quaker Street
Granville, New York 12832
518-642-2640

File No. _____
Applicant Name: _____
Applicant Address: _____

Date Received: _____
Date of Final Decision: _____
Final Decision: _____

Planning Board meetings are held on the forth Monday of each month at 7:30 p.m.

Instructions

The following Subdivision Application must be completed and filed with the Village Clerk at least ten (10) working days prior to the next scheduled Planning Board meeting. The fees below are based on the type of subdivision (Article 11 of the Village of Granville Zoning Law).

Minor Subdivision Fees:

Application fee	\$100.00
Lot fee	\$125.00
Recreation fee	\$100.00 / lot
Boundary line adjustment application fee	\$ 75.00

Major Subdivision Fees:

Application fee	\$300.00
Lot fee	\$125.00 / lot
Recreation fee	\$100.00
Final application fee	\$300.00

Type of Application

- Minor Subdivision
- Boundary line adjustment
- Major Subdivision

MAJOR SUBDIVISION:

1. Any subdivision not classified as a minor subdivision, including, but not limited to, subdivisions of a parcel into a total of four or more lots, or any size subdivision requiring any new street or extension of municipal facilities.
2. Any subdivision of a parcel of land within three years of the final approval of a previous subdivision or all or portion of the same parcel. Application for a further subdivision of any portion of a minor subdivision within a period of three years from the approval date of the original subdivision shall constitute application for a major subdivision, regardless of ownership of any portion of the minor subdivision.

MINOR SUBDIVISION: Any subdivision containing a total of three lots fronting on an existing street, not involving any new street or road or the extension of municipal facilities and not adversely affecting the development of the remainder of the parcel or adjoining property and not in conflict with any provision or portion of the Comprehensive Plan, Official Map, or Zoning Ordinance, or these regulations.

Please submit seven (7) copies of the following:

- Application for Subdivision.
- **Short or Long Environmental Assessment Form** pursuant to the N.Y. State Environmental Quality Review Act (SEQRA). Whether a short or long form is required is dependent upon whether the application is classified as “Type 1” or “Unlisted.” These forms are available from the Code Enforcement Officer or the Village Clerk.
- **Agricultural Data Statement and Control Form** if the property is located on a farm or within 500 feet of a farm in an agricultural area. This form is available from the Code Enforcement Officer or the Village Clerk.

Failure to provide completed applications may cause delays in the application process.

A public hearing will be scheduled at a subsequent Planning Board meeting. At that time applicant(s) will be informed of any other information requested by the Planning Board. (Failure to provide information requested may cause delays in the application process.)

The Planning Board will hold the public hearing. At that time the Planning Board may approve, approve with conditions and/or modifications, or deny the application. (If denied, the applicant may make alterations and re-apply. New application fees apply.)

It is the applicant(s) responsibility to file the final plat with the Washington County Clerk along with the completed and signed Application for Subdivision **within ninety (90) days of final approval. Failure to do so may result in nullification of the final approval.**

Part I. Applicant Information

1. Applicant or Agent Name: _____
 Street Address: _____
 City, State, Zip: _____
 Telephone No. _____
 2. Property Owner Name: _____
 Street Address: _____
 City, State, Zip: _____
 Telephone No. _____
 3. Licensed Engineer / Architect Designing Subdivision
 Name : _____
 Street Address: _____
 City, State, Zip: _____
 Telephone No. _____
 License Number: _____
 4. Licensed Surveyor Designing Subdivision
 Name : _____
 Street Address: _____
 City, State, Zip: _____
 Telephone No. _____
 License Number: _____
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Part II. Subdivision Information / Realty Subdivision Checklist

1. Subdivision Title: _____

2. Location of Site of Proposed Subdivision:

Address: _____

Tax Map Number: Section _____ Block _____ Lot _____

Total Acreage: _____

Adjoining Landowner(s) Names:

3. Zoning District / Classification:

Present: _____

Proposed: _____

Will a variance be needed? _____

Has a variance been applied for? _____

4. Provide a brief description of the existing use of property:

5. Provide a brief description of the proposed project / activity:

6. Number of proposed lots* created by this subdivision: _____

7. Number of proposed lots created of five (5) acres or less: _____

8. Number of proposed buildings: _____

9. a) Has this tract* of land been subdivided within the past three (3) consecutive years:

Yes _____ No _____

b) If yes, state the date(s) when the plats (maps) were filed with the Washington County Clerk's Office: _____

c) Number of lots created by all previous subdivision(s) of five (5) acres or less: _____

10. Will the total number of lots of five (5) acres or less from all subdivisions (including the subdivision currently being created) exceed five (5) lots:

Yes _____ No _____

11. Type of Project:

Residential _____

Commercial _____

Industrial _____

12. Total Length of New Roads: _____

13. Water:

Well _____

Existing Water Hookup _____

New Water Hookup _____

Sewer / Septic Hookup _____

14. Responsibility of Roads (Martin’s Law): _____

15. Homeowner’s Association: _____

16. Recreation Facilities: _____

17. Other Improvements: _____

***Definitions:**

Lot(s) – All lots, including non-contiguous lots, which are less than one-half mile from any point on the boundary of any other lot in the tract of land to be subdivided.

Tract –“Any body of land, including contiguous parcel(s) of land under one ownership or under common control of any group of persons acting in concert as part of a common scheme or plan” (Public Health Law, Article 11, Section 1115 Subsection 2).

Compliance with Public Health Law

Applicant(s), please read the following and proceed accordingly:

If the answer to either question seven (7) or nine-c (9.c) of Part II of this application exceeds five (5) or the answer to question ten (10) is “yes”, then the applicant is creating a Realty Subdivision. Applicants creating a Realty Subdivision must apply to the New York State Department of Health (NYSDOH) for approval of the water supply and sewage service facilities in compliance with Public Health Law (Article 11, Title II).

For further information contact the NYSDOH for further information and instructions:

**Glens Falls District Office
77 Mohican Street
Glens Falls, NY 12801
518-793-3893**

For Office Use:

If the applicant does not appear to meet the criteria of a Realty Subdivision and your municipality has determined that this subdivision does not require NYSDOH approval, please sign the statement below and attach this Subdivision Application to the approved subdivision plat (maps) for filing with the Washington County Clerk’s Office. The municipal board with the authority to make the final decision regarding subdivision reviews should complete and sign the following statement:

The **Planning Board** of the **Village of Granville** has determined that this subdivision does not meet the criteria of a Realty Subdivision as defined by Article 11, Title II, Section 1115 of Public Health Law; therefore, does not require approval of the New York State Department of Health.

Planning Board Chair: _____
(Printed name)

Signature: _____ **Date:** _____

Part III. Site Plans

Attach all drawings, covenants, deed restrictions, surveys, construction drawings, and any other supplemental data pertaining to this Subdivision Application as outlined in Article 4 and Article 11 of the Village of Granville Zoning Law to this application for submission to the Planning Board.

Part IV. Signatures

Signature of Owner:

The information provided in this Subdivision Application and on the attached site plan is true and accurate to the best of my knowledge. I acknowledge that the Planning Board will not review my plan unless all information requested has been submitted and no work will be initiated until all required submissions have been approved and/or approved with conditions.

Signature of Owner

Date

Authorization to Act as Agent For:

In the event that the Owner of the property desires to have another individual act as his/her authorized representative in support of this Subdivision Application the following statement must be completed and signed:

I, _____, owner of the premises located
(Name of Owner)

at _____ With the Tax Map No. _____,
(Location)

hereby designate _____ as my agent regarding an
(Agent)

application for Subdivision.

Signature of Owner

Date

Part V. Decision of the Planning Board

Permit Granted

Conditions: _____

Permit Denied

Conditions: _____

Signature of Chairperson
Planning Board

Date

Record of Vote		Date: _____	
	Member Name	Aye	Nay
Chair	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____

Planning Board & Village Office Checklist

Application Number: _____
Date Received: _____
Number of New Lots: _____
(including original(s))
Amount Paid: _____
Date Paid: _____

Classification: Minor: _____ Major: _____
 Preliminary: _____ Preliminary: _____
 Final: _____ Final: _____

Referred to: _____

Recommendation of Reviewing Agency: _____

Action Taken: _____

Reason: _____

Sketch Plan Review Completed: _____

Sketch Plan Approval: _____

Preliminary Plat Submitted: _____

Preliminary Plat Public Hearing Scheduled: _____

Preliminary Plat Public Hearing Completed: _____

Preliminary Plat:

 Approved as Filed: _____

 Approved with Conditions: _____

 Conditions are: _____

Final Plat Submitted: _____

Final Plat Public Hearing Scheduled: _____

Final Plat Public Hearing Completed: _____

Final Plat:

 Approved as Filed: _____

 Approved with Conditions: _____

 Conditions are: _____

Disapproved: _____ Reasons: _____

Documents:

Perc Tests: _____

Survey: _____

Roads: _____

SEQR: _____ Coordinated Review: _____ (if applicable)

Fees: _____