



**APPLICATION FOR FINAL APPROVAL
SHELTER ISLAND PLANNING BOARD**

P.O. Box 970
Shelter Island, New York 11964-0970
tel: 631-749-0758 fax: 631-749-0227
e-mail: sipb@shelterislandtown.us

Please complete the application by typing or print information except where indicated. Provide eight copies of all application documents unless indicated.

Name of project: _____

Suffolk County Tax Map No. 0700-Section ____ Block ____
Parcel No(s) _____

MINOR SUBDIVISION _____ MAJOR SUBDIVISION _____
STANDARD SUBDIVISION ONLY _____ PLANNED residential DEVELOPMENT _____

ENCLOSED PLEASE FIND THE FOLLOWING:

- 1. The FINAL PLAT, signed and approved by the Suffolk County Department of Health Services, plus at least eight (8) paper prints.
- 2. FINAL ROAD AND DRAINAGE PLANS with street profiles (at least eight (8) paper prints of each sheet of the final set of drawings.)
- 3. Letters from the electric power agency, cable television service agency and water service agency (if applicable) to the Planning Board assuring necessary services can be provided to the development.
- 4. Letters from the New York State Department of Transportation or the Suffolk County Department of Public Works approving work in either State or County rights-of-way.
- 5. Letter from the school district acknowledging the receipt of subdivision plans.
- 6. Offers of dedication for all properties, including street rights-of-way, scenic easements, drainage easements, drainage structures, etc. to be conveyed to the Town of Shelter Island (all legal documents subject to review and approval of the Planning Board attorney: acceptance by the Town Board may be needed as well).
- 7. Final Subdivision Application Fee (Sec. 111-13)
- 8. Final Engineering Review Fee (Sec. 111-13) The fee will be calculated once the bond estimate is prepared.
- 9. New York State Department of Environmental Conservation Permit, if applicable.

**APPLICATION FOR PRELIMINARY APPROVAL
SHELTER ISLAND PLANNING BOARD**

Land owner:

Name: _____
Address: _____
Home or Office Phone # (____) ____ - ____ Extension if applicable _____
Fax: _____
E-mail: _____

Is the applicant the landowner? Yes ____ No ____

If the applicant is NOT the landowner, indicate the Applicant's:

Name: _____
Address: _____
Home or Office Phone # (____) ____ - ____ Extension if applicable _____
Fax: _____
E-mail: _____

Owner or Applicant's Attorney, if any, for this project:

Name: _____
Address: _____
Home or Office Phone # (____) ____ - ____ Extension if applicable _____
Fax: _____
E-mail: _____

Owner or Applicant's Engineer or Surveyor for this project:

Name: _____
Address: _____
Home or Office Phone # (____) ____ - ____ Extension if applicable _____
Fax: _____
E-mail: _____

Name of contact person for questions relating to this project:

Name: _____
Address: _____
Home or Office Phone # (____) ____ - ____ Extension if applicable _____
Fax: _____
E-mail: _____

Name of person completing this application: _____

Signature: _____

Date completed: _____

**APPLICATION FOR PRELIMINARY APPROVAL
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SPECIAL SECTION FOR PLANNED RESIDENTIAL DEVELOPMENTS ONLY:

CHECK HERE IF THIS SECTION APPLIES _____

Pursuant to the applicable provision of New York State Town Law and the Code of the Town of Shelter Island, the undersigned as the applicant or on behalf of the applicant for this subdivision application, hereby requests consideration as a Planned Residential Development (commonly called a "cluster" development).

Signature _____

If the person completing this form is NOT the landowner, please complete the following:

The undersigned, as the OWNER of the subject property, authorizes the filing of this application by (please print) _____

Landowner's signature _____

Sworn before me this _____ day of _____, 200__

Notary Public