PRELIMINARY PLAT SUBMISSION CHECKLIST

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) ____.____, ____.____, ____.____, ____.____, ____.____, ____.____

SUBMISSION REQUIREMENTS:

Check off

☐ 1. Application for Preliminary Plat Approval (8 copies).
☐ 2. The Preliminary Plat in sufficient quantity to allow the Planning Board to make all applicable referrals (see referral section below, eleven (11) minimum)
(Note: If this is a Planned Residential Development, enough copies of BOTH the Standard (Yield) Map and the PRD map must be included with the submission)
☐ 3. Preliminary Road and Drainage Plans with street profiles (see referral section below, nine (9) minimum)
(Note: If this is a Planned Residential Development, only road and drainage plans for the PRD map must be included with the submission)
☐ 4. Subdivision Application Fee (Sec. 111-13)
☐ 5. Engineering Review Fee (Sec. 111-13)
☐ 6. Written application to proceed under Section 281 of the Town Law if the subdivider wishes to submit a preliminary plat for Planned Residential Development (see applicable portion of Application for Preliminary Plat Approval).
☐ 7. Long Environmental Assessment Form (8 copies).

REFERRALS OF PRELIMINARY PLAT NEEDED:

☐ 1. Town Supt. of Highways (1 set of all plans).
☐ 2. Town Consulting Engineer (1 set of all plans).
☐ 3. Planning Board Attorney (1 set of all plans).
☐ 4. Respective Fire Department (2 set of plats; no road plans).
☐ 5. Planning Board (6 sets of all plans).
☐ 6. Suffolk County Planning Commission, if necessary (3 sets of plats, 1 set of road plans).

APPLICATION FOR PRELIMINARY APPROVAL
SHELTER ISLAND PLANNING BOARD

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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) ____.____, ____.____, ____.____, ____.____, ____.____, ____.____

MAJOR SUBDIVISION ____
STANDARD SUBDIVISION ONLY ____ PLANNED residential DEVELOPMENT____

ENCLOSED PLEASE FIND THE FOLLOWING:

☐ 1. The Preliminary Plat in sufficient quantity to allow the Planning Board to make all applicable referrals (check with office, eleven (11) minimum)
(Note: If this is a Planned Residential Development, enough copies of BOTH the Standard (Yield) Map and the PRD map must be included with the submission)

☐ 2. Preliminary Road and Drainage Plans with street profiles (nine (9) minimum)
(Note: If this is a Planned Residential Development, only road and drainage plans for the PRD map must be included with the submission)

☐ 3. Subdivision Application Fee (Sec. 111-13)

☐ 4. Engineering Review Fee (Sec. 111-13)

☐ 5. Written application to proceed under Section 281 of the Town Law if the subdivider wishes to submit a preliminary plat for planned residential development (see Special Section on next page)

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
SHELTER ISLAND PLANNING BOARD

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 in 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