

All requested information shall be provided and must be filled out in black ink or typed for photocopying purposes.

### TOWN OF ROTTERDAM SUBDIVISION APPLICATION

Initial Sketch Plan \$150 Final Major Subdivision \$200 per lot Final Minor Subdivision \$160 per lot Parkland Fees \$1,000 per additional lot created or \$600 per unit (MULTI-FAMILY) Advertising Fee = Actual cost of legal notices

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#### PART II GENERAL INFORMATION

City:	State:	Zip:
Daytime Phone:	E-mail:	
	ne property, prepare the endorsem	
establishing owner's authorizat	ion of the applicant's proposed su	bdivision of his land.
0 15 10 1		
Owner's Designated Contact:		
City	Stata	7:
City:	State: E-mail:	Zip:
Daytime Phone:	E-mail:	
If you do not hold title to property	y, what is your interest in it?	
If you do not hold title to propert	y, what is your interest in it?	
If you do not hold title to propert	y, what is your interest in it?	-
If you do not hold title to propert	y, what is your interest in it?	
If you do not hold title to propert	y, what is your interest in it?  if any):	
If you do not hold title to propert  Street Address of Proposed Site (	y, what is your interest in it?i if any):	
If you do not hold title to propert  Street Address of Proposed Site (	y, what is your interest in it?	
If you do not hold title to propert  Street Address of Proposed Site ( Project/Proposal Site Area: (Acre	y, what is your interest in it?  if any):  es or sq. ft.)	
If you do not hold title to propert  Street Address of Proposed Site ( Project/Proposal Site Area: (Acr  Assessor Tax Parcel No.(s) of Pro	y, what is your interest in it? if any): es or sq. ft.) oposal Site:	
If you do not hold title to propert  Street Address of Proposed Site ( Project/Proposal Site Area: (Acr  Assessor Tax Parcel No.(s) of Pro	y, what is your interest in it?  if any):  es or sq. ft.)	
If you do not hold title to propert  Street Address of Proposed Site ( Project/Proposal Site Area: (Acr  Assessor Tax Parcel No.(s) of Pro	y, what is your interest in it? if any): es or sq. ft.) oposal Site:	
If you do not hold title to propert  Street Address of Proposed Site ( Project/Proposal Site Area: (Acr  Assessor Tax Parcel No.(s) of Pro	y, what is your interest in it? if any): es or sq. ft.) oposal Site:	

#### **LEGAL INFORMATION**

Location of Proposal Site:	(General description by which direction and how far from roads and intersections and other community features)
General Municipal Law Secti	oyee or family member thereof have a financial interest (as defined by on 809) in this application? YES NO If yes, a statement e, nature and extent of this interest must be filed with this application.
Width of Property Fronting of	n Public Road in Linear Feet:
	otion of the proposed site:  ( ) Yes ( ) No n an attached legal description stamped by the Land Surveyor. Include the e area to be subdivided on a preliminary subdivision map.)
I have included a copy of the (All applications must contain	deed(s) of the proposed site: ( ) Yes ( ) No n a current deed of the proposed site)
I have attached a vicinity map (All applications must contain nearest cross streets)	o of the proposed site:  ( ) Yes ( ) No n a vicinity map indicating at a minimum the location and distances to the
What impact will the propose	d subdivision have on the adjacent properties?
What factors support this sub-	division?
_	
provision for open spaces, dra water supplies, sanitary waste	se to mitigate your proposal's impact upon or otherwise to make appropriate ainage waste, streets or roads, alleys, other public ways, transit stops, potable parks and recreation, playgrounds, schools, and school grounds, and ablic health, safety and general welfare?

#### SUBDIVISION INFORMATION

Number of Lots:	Gross Area:				
Typical Lot Size:	Proposed Net Density:				
Smallest Lot Size:	Minimum Frontage:				
Proposed Source of Water: ( ) Public System ( ) Private Community System ( ) Individual Wells ( ) Other, please describe					
Proposed Means of Sewage Disposal: ( ) Pub ( ) Septic Tank & Drain field	lic Sewer ( ) Community System ( ) Dry Sewer ( ) Other, please describe				
·	Expansions or Further Activity Related to this Proposal?				
Level of Street Improvements Proposed:	ION IMPROVEMENT INFORMATION				
Estimated Time Period Expected for Complete	e Development of Subdivision:				
Is phasing of the finalization of the subdivision  ( ) Yes. If yes, show phasing on ( ) No.					
Is dedication of land for public use proposed?  ( ) Yes. If yes, please explain below: ( ) No.					

#### **INCLUDE WITH PART II**

	**************************************	
	**************************************	
The 1	undersigned, a licensed land surveyor, and/or enginegal description has been prepared by me or under rements of the Town of Rotterdam regulations and t	ny supervision in accordance with the
Name	e:License No	
Addr	ess:	
	phone No	
E-ma	il or Fax <u>:</u>	
	INCLUDE WITH	I PART II
	************	********
	LEGAL OWNER S (Signature of legal owner(s) or representat ***********************************	ive(s) as authorized by legal owner)
	undersigned, swear or affirm under penalty of perju to the best of my knowledge.	ry that the above responses are made truthfully
previ	her swear or affirm that (I)(we) (am)(are) the owner ously identified land use action, or, if not the owner wner(s) authorizing my actions on his or her behalf.	
#1	Name:	Date:
	Address:	Phone:
		Zip:
	Signature of Applicant or Representative	Date
#2	Name:	Date:
	Address:	Phone:
		Zip:
	Signature of Applicant or Representative	Date

# TOWN OF ROTTERDAM



John F. Kirvin Government Center • 1100 Sunrise Boulevard • Rotterdam, NY 12306 Telephone: 518-355-7575 • Fax: 518-355-7976 • Website: www.rotterdamny.org

## LETTER FROM PROPERTY OWNER GRANTING AUTHORIZATION TO ACT

## A COPY OF THIS LETTER MUST BE SUBMITTED FOR EACH PROPERTY OWNER INVOLVED

I,	, being duly sworn declare that I am the				
(PROPERTY OWN	ER)				
owner of the property involve Town of Rotterdam for proper			application request before the		
Tax Parcel Number(s):					
I hereby grant		and/or their agent(	s) to act on my behalf.		
I further declare that all state correct to the best of my kno Signature (Authorized Repre	wledge and belief.		mitted is in all respects true and		
Date:					
	NO	TARY			
STATE OF NEW YORK) so COUNTY OF SUBSCRIBED AND SWOR	)	day of	, 202_		
NOTARY SEAL	Notary Signature				
		nd for the State of Ne	w York		
	Residing at: My appointment ex				