

TOWN OF CATLIN
APPLICATION FOR PLANNING BOARD REVIEW

This Application has been developed by the Town of Catlin Planning Board for use by the Code Enforcement Officer and the Public. It is anticipated that the applicant will have become familiar with the Local Laws and Ordinances in the Town of Catlin.

Type of review requested: Subdivision/ Site Plan (Circle one)

Tax Parcel Number: _____

Name of Proposed Project: _____

Owners Name: _____

Address: _____

Telephone Number: _____

Applicants Name: _____

Address: _____

Telephone Number: _____

On the back of this sheet please provide the following information:

General location of project:

Description of present use of property:

Description of proposed use of property:

Statement of ownership:

Applicant's opinion of environmental impact:

Statement regarding provisions for water supply and sewage disposal:

The information provided on this application as well as any information requested by the Catlin Planning Board is true and correct to the best of my knowledge. It will be used as the basis for approval, approval with conditions, or disapproval of this Application

Owners Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

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Map or Plan Checklist

Tax Parcel Number: _____
 Owners Name: _____
 Applicants Name: _____
 Name of Proposed Project: _____

Type of review; Concept, Preliminary, or Final (Circle one)

ITEM	REQUIRED	PROVIDED
1. Applicable fee collected		
2. Certified Survey		
3. Tax Parcel Number		
3. Scale not less than: (Circle one)		
A. Site Plan:		
i. Concept Plan: 1":2000'		
ii. Preliminary: 1":100'		
B. Subdivision:		
i. Concept: 1":200'		
ii. Preliminary: 1":50'		
4. Show Entire Parcel		
5. North Arrow		
6. Name of Project		
7. Owner or Applicant Name		
8. Existing Buildings		
9. Existing Streets		
10. Proposed Streets		
11. Existing Utilities		
12. Proposed Utilities		
13. Septic and Well Location		
14. Natural Features		
15. Contour Lines		
16. Rights of Way		
17. Existing Driveways		
18. Proposed Driveways		
19. All Proposed Signage (Refer to Section 10.7, Zoning Law)		
20. All Proposed Buffer, Landscaping, and Barrier (Refer to Section 10.23, Zoning Law)		
21. Existing Location of All Included Drainage Features		
22. Proposed Location of All Included Drainage Features		
23. Drainage System Details		
24. New Street(s) and Associated Ditch Cross Sections		
25. All Adjoining Property(s) Identified on Map		
26. Other Items: Use back of this Sheet		

NOTE: Site plan requires (12) paper copies of plan. Subdivision requires (12) copies of plan.

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ITEM	REQUIRED	PROVIDED
Other Items From 26 on Page 3		
A.		
B.		
C.		
D.		
E.		
F.		
G.		
H.		
I.		
J.		
K.		
L.		
M.		
N.		
O.		
P.		
Q.		
R.		
S.		
T.		
U.		
V.		
W.		
X.		
Y.		
Z.		

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SEQR CONSIDERATIONS CHECKLIST

Type of review requested: Subdivision/ Site Plan (Circle one)

Tax Parcel Number: _____

Project Name: _____

Owners Name: _____

Applicant's Name: _____

ITEM	YES	NO
1) Does this project involve development of more than 5 acres?		
2) Are there any DEC classified streams within 500 ft. of this project?		
3) Are there any wetlands within 500 ft. of this project?		
4) Will any structure on this project exceed 4000 sq.ft. in area including all paved areas?		
5) Will any structure on this project exceed 35 ft. in height at peak?		
6) Is this project within 500 ft. of any municipal water supply (well)		
7) Will this project create any hazardous waste or create an air or water discharge other than ordinary sewage disposal system?		
8) Are any of the thresholds exceeded as referenced in Sect.617.4 of 6NYCRR Part 617?		
9) Has there been any documented public controversy over this project?		
10) In the opinion of the preparer are there any environmental concerns other than those listed?		
a)		
b)		
c)		
d)		
11) Is this a: Type I Action/Type II Action/ or Unlisted Action(Circle one)		

Note: Any answer in the Yes column may require the completion of Part 617.20 Appendix A SEQR form. Part 617.20 Appendix C SEQR form may be used when determined by the Planning Board or Applications Committee.

Preparer's Signature: _____ Date: _____

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Final Checklist

Type of review requested: Subdivision/ Site Plan (Circle one)

Tax Parcel Number: _____

Project Name: _____

Owners Name: _____

Applicant's Name: _____

ITEM	REQUIRED	DATE COMPLETED
1) Application form(Pages 1 and 2)		
2) General Location Maps		
a) Tax Map Extract		
b) USGS Topographical Map		
3) SEQR Considerations Checklist(Page 5)		
a) Type of Action: I, II, unlisted (circle one)		
b) SEQR Form 617.20 Appendix A		
c) SEQR Form 617.20 Appendix C		
4) Planning Map or Plat		
5) Map/Plan Checklist(Page 3)		
6) Chemung County Health Department Disposal Permits		
7) County Sewer District Permits		
8) Driveway Permits		
a) DOT		
b) Chemung County Highway		
c) Town of Catlin Highway		
9) Approvals/Notifications		
a) Chemung County Planning Board		
b) Adjoining Town(s)		
c) DEC		
d) Others		
10) Storm Water Drainage Plan		
11) Water Department Letter		
12) Public Hearing		
13) Other Items		
a)		
b)		
c)		
d)		

Preparer's Signature: _____ Date: _____

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