



## **TOWN OF FISHKILL TOWN BOARD**

807 Route 52  
Fishkill, New York 12524-3110  
Phone: (845) 831-7800

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Fax: (845) 831-6040  
E-Mail: [tof@fishkill-ny.gov](mailto:tof@fishkill-ny.gov)  
Website: [www.fishkill-ny.gov](http://www.fishkill-ny.gov)

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### **PROCEDURES AND REQUIREMENTS GOVERNING A REZONING APPLICATION PAGE 1 OF 2**

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Four (4) copies, plus one (1) original, with original signatures, must be submitted to the Town Clerk three (3) weeks prior to being placed on a Town Board agenda. The Town Board, at the meeting at which the application is presented, will hear the merits of the proposal and will refer the application to its professional consultants, the Planning Board and any involved and interested agencies. The Board may schedule a public hearing at the initial meeting or may defer a public hearing until such time as initial comments on the proposal are presented to the Board by its consultants and any comments are received from involved or interested agencies. In accordance with Town Law §264, at least ten days' notice of the time and place of such public hearing on the rezoning proposal shall be published in a paper of general circulation in the town.

**Please fill out the application completely.**

**This application must be accompanied by the following items:**

1. Five (5) copies of a current survey map of the property to be rezoned, with a full description, including metes and bounds, demonstrating mathematical closure to within generally accepted industry standards, complete with existing and proposed contours at two (2) foot intervals. These may be submitted on separate sheets if appropriate.
2. Five (5) copies of an Area Map, showing all properties within 500 feet of the subject property.
3. One set of mailing labels containing the names and addresses of all property owners within 500 feet of the boundaries of the subject property.
4. Five (5) copies of all or portions of the pertinent tax maps, showing the adjacent properties within 500 feet and showing the names, addresses and tax map parcels numbers for those properties.
5. One original and four (4) copies of a Full Environmental Assessment Form (EAF) completed for the project.



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### **PROCEDURES AND REQUIREMENTS GOVERNING A REZONING APPLICATION PAGE 2 OF 2**

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6. Five (5) copies of the Site Development or Special Use Permit Plan or Subdivision Plat, which must include the following:
  - a. All metes and bounds descriptions, current and proposed zoning designation, north arrow, purpose of proposed development;
  - b. All main and accessory structure locations, showing setbacks from the property lines;
  - c. Location and types of all pertinent features such as shrubbery, trees, lighting, screening, curbing, refuse storage, recycle bins, storm drainage facilities, etc.
  - d. Location and dimensions of parking and loading areas showing individual parking spaces and numbers of spaces.
  - e. Typical cross sections and details of curbing, sidewalks, catch basins, parking areas, roadways, etc.
  - f. Building elevations including actual color samples for all exterior finishes, materials and sign details.
  - g. Any division(s) of building(s) into units of separate occupancy.
7. A Rezoning Application Fee, in the amount of \$2,500.00, plus \$200.00 per acre or part thereof, payable to the Town of Fishkill.
8. An escrow deposit, in the amount of \$10,000.00, payable to the Town of Fishkill, which covers the consultant review of the application in accordance with ARTICLE XX, §150-98 of the Code of the Town of Fishkill.

**In the event that the escrow account falls below \$2,000.00, the applicant shall be required to deposit additional funds in the amount of \$8,000.00. Any unused portion of the escrow account will be returned to the applicant after all consulting fees have been paid. The applicant shall submit a voucher to the Town for such escrow refund.**



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<b>FOR TOWN USE ONLY</b>
Date _____
Received: _____
Town Clerk's Signature: _____

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**REZONING APPLICATION**  
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Please print neatly or type.

Date: \_\_\_\_\_

A request is hereby made for the rezoning of the property described herein.

1. Premises Location: \_\_\_\_\_  
\_\_\_\_\_
2. Present Owner of Record: \_\_\_\_\_  
\_\_\_\_\_
3. Address of Present Owner: \_\_\_\_\_  
\_\_\_\_\_
4. Existing Zoning Designation: \_\_\_\_\_
5. Proposed Zoning Designation: \_\_\_\_\_
6. Size of Parcel: \_\_\_\_\_
7. Property Tax Map Parcel Number: \_\_\_\_\_
8. Present Use of Property: \_\_\_\_\_  
\_\_\_\_\_
9. Proposed Use of Property: \_\_\_\_\_  
\_\_\_\_\_
10. Existing Buildings, Facilities, Utilities on Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**REZONING APPLICATION**  
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11. **Proposed Buildings, Facilities, Utilities:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. **Reasons and Justification for Rezoning:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. **Is the property located in or does the property contain:**  
a) **Floodplains, as shown on the FEMA Flood Insurance Rate Maps** \_\_\_\_\_  
b) **ACOE wetlands, as shown on the National Wetland Inventory Maps** \_\_\_\_\_  
c) **DEC wetlands, as shown on the NYS Freshwater Wetlands Maps** \_\_\_\_\_
14. **Does the property contain slopes in excess of 15%?** \_\_\_\_\_

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Applicant's signature

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Date