



*Town of Fishkill  
Planning Department*

**FOR OFFICE USE ONLY**

Application No.: \_\_\_\_\_

Application Fee: \_\_\_\_\_

Escrow Deposit: \_\_\_\_\_

Escrow Account No.: \_\_\_\_\_

**APPLICATION FOR SUBDIVISION AND RESUBDIVISION OF LAND**

**APPLICANT'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**PROPERTY OWNER'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**REPRESENTATIVE'S INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ License No.: (if applicable): \_\_\_\_\_



*Town of Fishkill  
Planning Department*

**APPLICATION FOR SUBDIVISION AND RESUBDIVISION OF LAND**

**PROPERTY INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

|                  |   |   |              |
|------------------|---|---|--------------|
| Tax Grid Number: | — | — | Acres: _____ |
| Tax Grid Number: | — | — | Acres: _____ |
| Tax Grid Number: | — | — | Acres: _____ |
| Tax Grid Number: | — | — | Acres: _____ |

Location of property: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

Property is located in \_\_\_\_\_ Zoning District(s)

**PROPOSED SUBDIVISION INFORMATION (ENTIRE SECTION MUST BE COMPLETED)**

Proposed name of subdivision: \_\_\_\_\_  
(If this application is for a resubdivision of land please list the Approved Subdivision's Name)

Total Number of lots proposed: \_\_\_\_\_  
(Please list Proposed Lot No. and proposed acreage per lot below):

|                        |                         |
|------------------------|-------------------------|
| Proposed Lot No: _____ | Proposed Acreage: _____ |
| Proposed Lot No: _____ | Proposed Acreage: _____ |
| Proposed Lot No: _____ | Proposed Acreage: _____ |
| Proposed Lot No: _____ | Proposed Acreage: _____ |

Brief Description of the Proposed Subdivision or Resubdivision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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The owner/applicant has interest in the abutting property as stated below or on the attached sheet: (If none so state): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the applicant proposed to submit a Final Subdivision Plat to cover the entire preliminary layout or file same in sections? No Yes If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the applicant propose to dedicate to the Town any or all streets and/or and/or highway, which may be shown on the preliminary layout? No Yes If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Applicant proposes to dedicate for public use for park and/or playground purposes \_\_\_\_ acres of land.

Does the Applicant intent to request from the Board any waivers of requirements of the Sudivision of Land Regulations upon submission of the Final Plat for approval? No Yes If any waivers of these requirements are to be requested, list each of them below and indicate the reasons that any such requirements should be waived.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL ENGINEER OR LAND SURVEYOR INFORMATION  
(ENTIRE SECTION MUST BE COMPLETED)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ License Number: \_\_\_\_\_

*Town of Fishkill  
Planning Department  
807 Route 52 - Fishkill, NY 12524  
Phone: (845) 831-7800 ext. 3328 - Fax: (845) 831-3256*



*Town of Fishkill  
Planning Department*

**APPLICATION FOR SUBDIVISION AND RESUBDIVISION OF LAND**

**STATEMENT OF CONFORMANCE**

I/We, the undersigned, hereby acknowledge that I/We, have read this application and state that the information contained herein is correct and agree to comply with all the Town and County Ordinances and State Laws regarding Subdivision of Land. I/We, hereby authorize the Town of Fishkill Planning Board, Town of Fishkill Officials and/or Town of Fishkill Consultants to enter and inspect this property at any reasonable hour of the day, including Saturday and Sunday.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representative's Signature

\_\_\_\_\_  
Date



**Town of Fishkill  
Planning Department**

**APPLICATION FOR SUBDIVISION AND RESUBDIVISION OF LAND**

**Checklist:** (as may be applicable)

**Applicant's Name:** \_\_\_\_\_

**Subdivision Plat Title:** \_\_\_\_\_

- |   |   |
|---|---|
| <input type="checkbox"/> Site Plan                                      | <input type="checkbox"/> Storm Drainage                               |
| <input type="checkbox"/> Applicant's Name(s)                            | <input type="checkbox"/> Refuse Storage                               |
| <input type="checkbox"/> Applicant's Address                            | <input type="checkbox"/> Other Outdoor Storage                        |
| <input type="checkbox"/> Subdivision Plat Preparer's Name               | <input type="checkbox"/> Water Supply                                 |
| <input type="checkbox"/> Subdivision Plat Preparer's Address            | <input type="checkbox"/> Sanitary Disposal System                     |
| <input type="checkbox"/> Subdivision Plat Date                          | <input type="checkbox"/> Fire Hydrants                                |
| <input type="checkbox"/> Subdivision Plat Revision Date(s)              | <input type="checkbox"/> Building Locations                           |
| <input type="checkbox"/> Area Map Inset                                 | <input type="checkbox"/> Building Setbacks                            |
| <input type="checkbox"/> Site Designation                               | <input type="checkbox"/> Building Elevations                          |
| <input type="checkbox"/> Property Owners within 500' of site            | <input type="checkbox"/> Divisions of Occupancy                       |
| <input type="checkbox"/> Property Owners' addresses within 500' of site | <input type="checkbox"/> Sign details (colors & samples)              |
| <input type="checkbox"/> Plot Plan                                      | <input type="checkbox"/> Data Table Inset                             |
| <input type="checkbox"/> Scale  | <input type="checkbox"/> Property Area (nearest 100')                 |
| <input type="checkbox"/> Metes and Bounds                               | <input type="checkbox"/> Building Coverage (sq. ft.)                  |
| <input type="checkbox"/> Zoning District Designation                    | <input type="checkbox"/> Building Coverage (percentage of total area) |
| <input type="checkbox"/> North Arrow                                    | <input type="checkbox"/> Pavement Coverage (sq. ft.)                  |
| <input type="checkbox"/> Abutting Property Owners (Items No. 10 above)  | <input type="checkbox"/> Pavement Coverage (percentage of total area) |
| <input type="checkbox"/> Existing Building Locations                    | <input type="checkbox"/> Open Space (sq. ft.)                         |
| <input type="checkbox"/> Existing Paved Area                            | <input type="checkbox"/> Open Space (percentage of total area)        |
| <input type="checkbox"/> Existing Vegetation                            | <input type="checkbox"/> Number of Parking Spaces Required            |
| <input type="checkbox"/> Existing Access and Egress                     | <input type="checkbox"/> Number of Parking Spaces Proposed            |
| <b><u>Proposed Improvements:</u></b>                                    | <b><u>Others (must be submitted with Application)</u></b>             |
| <input type="checkbox"/> Landscaping                                    | <input type="checkbox"/> Environmental Assessment Form                |
| <input type="checkbox"/> Exterior Lighting                              | <input type="checkbox"/> Applicant Disclosure Form                    |
| <input type="checkbox"/> Screening                                      | <input type="checkbox"/> Application Fee                              |
| <input type="checkbox"/> Existing Access and Egress                     | <input type="checkbox"/> Escrow Deposit                               |
| <input type="checkbox"/> Parking Areas                                  | <input type="checkbox"/> Compact Disc in PDF Format - CD Must         |
| <input type="checkbox"/> Loading Areas                                  | contain copies of Application and all documents                       |
| <input type="checkbox"/> Paving Details                                 | that are being submitted as part of the application.                  |
| <input type="checkbox"/> Catch Basin through section                    |   |