



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

**PROCEDURES AND REQUIREMENTS GOVERNING  
SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

**All Applicants to the Planning Board must schedule an informational meeting with the Town Planning Department and/or the Town Building Inspector/Zoning Administrator prior to submitting an application.**

The Planning Board meets regularly on the second Thursday of each month. All applications for Subdivision and Resubdivision approval must be submitted in accordance with the current Town of Fishkill Planning Board Meeting Schedule which is available on the Town's website at <https://www.fishkill-ny.gov/board-meeting-schedules.html> or in the Town Planning Department.

**APPLICATION REQUIREMENTS:**

An application for Subdivision, Resubdivision or Revised Lot Line approval must be made by submitting the following by U.S. mail or in person to the Town Planning Department.

1. One (1) original and five (5) copies of the completed Subdivision, Resubdivision or Revised Lot Line Application. The form is available for download on the Town's website. Any request for waivers of required information must be included together with the reason for such request.
2. Six (6) copies of the Subdivision Plat or Revised Lot Line detailing the proposed subdivision, resubdivision or revised lot line. The drawings should be at a scale of 1" = 20' where possible.
3. One (1) original and five (5) copies of the completed Environmental Assessment Form. The completion of a Full Environmental Assessment Form or a Short Environmental Assessment Form shall be the decision of the Town Planning Department and/or the Town Engineer. The forms are available for download on the Town's website.
4. One (1) compact disc or USB Drive containing copies in PDF Format of the completed Application for Subdivision, Resubdivision or Revised Lot line, Environmental Assessment Form, Subdivision Plat or Revised Lot Line, listing of all adjacent Property Owners' within 500' of the project site (listing shall include property owners' names, addresses and Tax Map Grid Nos.) and any other documentation being included as part of the application.
5. All required fees. An Application Fee and an Escrow Deposit must be submitted in accordance with the current Town of Fishkill Fee Schedule. A full copy of the Town's Fee schedule may be obtained by clicking on the following link to the Town's website Town Fee Schedule or or by visiting the Town's website at [www.fishkill-ny.gov](http://www.fishkill-ny.gov).



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807 Route 52 - Fishkill, NY 12524  
Phone: (845) 831-7800 ext. 3328  
email: dcolonna@fishkill-ny.gov*

<b>FOR OFFICE USE ONLY</b>	
Application No.:	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
Application Fee:	<input type="text"/>
Escrow Deposit:	<input type="text"/>
Escrow Account No.:	<input type="text"/>

**APPLICATION FOR SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

**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, RESUBDIVISION AND REVISED LOT LINE**

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

Tax Grid Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Acres:	<input type="text"/>
Tax Grid Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Acres:	<input type="text"/>
Tax Grid Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Acres:	<input type="text"/>
Tax Grid Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Acres:	<input type="text"/>

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

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

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

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

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

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

**PROPOSED SUBDIVISION, RESUBDIVISION OR REVISED LOT LINE INFORMATION  
(ENTIRE SECTION MUST BE COMPLETED)**

Proposed name of subdivision, resubdivision or revised lot line: \_\_\_\_\_  
(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 or Revised Lot Line:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



*Town of Fishkill*  
*Planning Department*

**APPLICATION FOR SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

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

Does the applicant propose 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 to the Town for public use for park and/or playground purposes land \_\_\_\_\_ acres of land.

Does the Applicant intend to request from the Board any waivers of requirements of the Subdivision 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*

**APPLICATION FOR SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

**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, RESUBDIVISION AND REVISED LOT LINE**

**AFFIDAVIT PURSUANT TO SECTION 809 OF THE GENERAL MUNICIPAL LAW**

State of New York )  
County of \_\_\_\_\_) ss:  
Town of \_\_\_\_\_

I, \_\_\_\_\_ being duly sworn, hereby depose and say that all of the following statements and statements contained in the papers submitted herewith are true and that the nature and extent of any interests set forth are disclosed to the extent that they are known to the Applicant.

1. Print or type full name and post office address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certifies that he/she is the owner or agent of the certain lot, piece or parcel of and/or building described in this application **and if not the owner that he/she has been duly properly authorized to make this application and to assume responsibility for the owner** in connection with this application for approval as indicated below.

2. To the Planning Board of the Town of Fishkill, Dutchess County, New York:

Application is hereby submitted for (please check all that apply):

- Subdivision
- Resubdivision and Revised Lot Line

3. Premises affected are in the \_\_\_\_\_ Zoning District and on the Town of Fishkill Tax Map known as,

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

4. There is no state officer, Dutchess County officer or employee or Town officer or employee nor his or her spouse, brother, sister, parent, child or grandchild, or a spouse of any of these relatives who is the applicant or who has an interest in the person, partnership or association making this application, petition or request, or is an officer, director, partner or employee of the applicant, or that such officer or employee, if this applicant is a corporation, legally or beneficially owns or controls any stock of the applicant in excess of 5% of the total of the corporation, if its stock is listed on the New York or American Stock Exchanges; or is a member or partner of the applicant, if the applicant is an association or partnership; nor that such town officer or employee nor any member of his family in any of the foregoing classes is a party to an agreement with the applicant, express or implied, whereby such officer or employee may receive any payment or benefit, whether or not for service rendered, which is dependent or contingent upon the favorable approval of this application, petition or request.

5. To the extent that the same is known to the applicant, and to the owner of the subject premises **that is disclosed herewith** the interest of the following officer or employee of the State of New York or the County of Dutchess or the Town of Fishkill in the application or in the property or subject matter to which it relates. **(IF NONE, SO STATE)** \_\_\_\_\_

- a. Name and address of officer or employee \_\_\_\_\_
- b. Nature of interest \_\_\_\_\_
- c. If stockholder, number of shares \_\_\_\_\_
- d. If officer or partner, nature of office and name of partnership \_\_\_\_\_
- e. If a spouse or brother, sister, parent, child, grandchild or the spouse of any of these blood relatives of such state, county or town officer or employee, state name and address of such relative and nature of relationship to officer and employee and nature and extent of office, interest or participation or association having an interest in such ownership or in any business entity sharing in such ownership.

6. I do hereby depose and say that all of the above statements and statements contained in the papers submitted herewith are true and, knowing that a person who knowingly and intentionally violates this section is guilty of a misdemeanor.

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

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

Sworn before this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Public Stamp



*Town of Fishkill  
Planning Department*

**APPLICATION FOR SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

**REIMBURSEMENT FOR PROFESSIONAL CONSULTING SERVICES**

The Town of Fishkill Planning Board in the review of any application described herein, may refer any such application presented to it to such attorneys, engineering, planning, environmental or other technical consultant as the Planning Board may deem reasonably necessary to enable it to review such application as required by law. The charges made by such consultants shall be in accordance with such charges usually made for such services in the New York region or pursuant to an existing contractual agreement between the Town of Fishkill for the cost of such consultant services upon receipt of the bill. Such reimbursement shall be made prior to the final action of this application.

The final subdivision plat or revised lot line plat shall not be signed by the Planning Board Chair until all bills are paid in full.

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

Sworn to before this \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Public Stamp



*Town of Fishkill  
Planning Department*

**APPLICATION FOR SUBDIVISION, RESUBDIVISION AND REVISED LOT LINE**

**Checklist (as may be applicable)**

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

**Subdivision or Revised Lot Line Plat Title:** \_\_\_\_\_

- |   |  |
|---|--|
| Site Plan   | Storm Drainage   |
| Applicant's Name(s)   | Refuse Storage   |
| Applicant's Address   | Other Outdoor Storage  |
| Subdivision or Revised Lot Line Plat Preparer's Name        | Water Supply   |
| Subdivision or Revised Lot Line Preparer's Address          | Sanitary Disposal System   |
| Subdivision or Revised Lot Line Plat Date                   | Fire Hydrants  |
| Subdivision or Revised Lot Line Plat Revision Date(s) Area  | Building Locations   |
| Map Inset   | Building Setbacks  |
| Site Designation  | Building Elevations  |
| Abutting Property Owners & addresses - 500' of project site | Divisions of Occupancy   |
| Plot Plan   | Sign Details (colors & samples)  |
| Scale   | Data Table Inset   |
| Metes and Bounds  | Property Area (nearest 100')   |
| Zoning District Designation                                 | Building Coverage (square feet)  |
| North Arrow   | Building Coverage (percentage of total area) Pavement Coverage (square feet) |
| Existing Building Locations                                 | Pavement Coverage (percentage of total area) Open Space (square footage)     |
| Existing Paved Area   | No. of Parking Spaces Required per Town Code No. of Parking Spaces Proposed  |
| Existing Vegetation   |  |
| Existing Access and Egress                                  |  |

**Proposed Improvements**

- Landscaping
- Exterior Lighting
- Screening
- Existing Access and Egress
- Parking Areas
- Loading Areas
- Paving Details
- Catch Basin Through Section

**Others (must be submitted with Application)**

- Environmental Assessment Form
- Application Fee
- Escrow Deposit
- One (1) CD or USB Drive
- A copy of the **entire** submission must be provided on CD or USB Drive in PDF format. Drawing sets are to be one (1) file on the CD or USB Drive (i.e. if there are five (5) drawings one (1) file is to be on the CD or USB Drive that contains one (1) copy of the complete set of drawings.

A Planning Board Approval Block must appear on page 1 of all Subdivision Plats and/or Revised Lot Line Plats as follows:

**PLANNING BOARD APPROVAL**  
 APPROVED BY RESOLUTION OF THE PLANNING BOARD OF THE TOWN OF FISHKILL, NY  
 ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_  
 SUBJECT TO ALL REQUIREMENTS AND CONDITIONS OF SAID RESOLUTION, ANY CHANGE,  
 ERASURE, MODIFICATION OR REVISION OF THIS PLAN, AS APPROVED SHALL VOID  
 THIS APPROVAL.

BY \_\_\_\_\_ SIGNED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_  
 TOWN OF FISHKILL PLANNING BOARD CHAIR