

**APPLICATION FOR APPROVAL OF REALTY SUBDIVISIONS AND DEVELOPMENTS**  
**SECTION 1**

Name of Proposed Subdivision or Development			Hamlet	Town
<u>Tax Map No.:</u>	District (s)	Section(s)	Block(s)	Lot(s)
Name of Applicant:			Tel#: ( ) -	
Mailing Address:				
Email Address:				
Name of Design Professional:			Tel#: ( ) -	
Mailing Address:				
Email Address:				
Name of Current Property Owner:			Tel#: ( ) -	
Mailing Address:				
Email Address:				
Name of Agent:			Tel#: ( ) -	
Mailing Address:				
Email Address:				
Specify total acreage of property to be subdivided:	Specify the total number of lots proposed:		Specify Town Zoning:	
Specify Method of Water Supply: <input type="checkbox"/> Connect to Existing Public Water Supply <input type="checkbox"/> Construct Private Well Supply <input type="checkbox"/> Other _____		Specify the distance (in feet) from the nearest water main to the property: _____ Is a water main extension proposed? _____ Name of the water district _____		
Specify Method of Sewage Disposal: <input type="checkbox"/> Individual Sewage Disposal Systems <input type="checkbox"/> Connect to Existing Public Sewers <input type="checkbox"/> Construct A Sewage Treatment Plant <input type="checkbox"/> Other (explain) _____		Is property partially or totally within a sewer district? _____ If yes, name of district _____ If no, name of and distance to nearest district _____		
Specify Topography (e.g., flat, rolling, steep, etc.):				
Specify intended use of proposed lots: <input type="checkbox"/> Single family residences <input type="checkbox"/> Two family residences <input type="checkbox"/> Multi-family residences <input type="checkbox"/> Commercial or industrial buildings <input type="checkbox"/> Other _____				
Site is currently: <input type="checkbox"/> Vacant <input type="checkbox"/> Improved Specify previous use(s) of site, if any: _____ _____			Are any new roads proposed? _____ If yes, are the roads to be publicly or privately owned? _____ Are any road abandonments proposed? _____	

## SECTION 2

<b>OTHER PERMITS REQUIRED</b>	YES	NO
<b>1. Are any of the following permits required?</b>		
<b>a. Wild Scenic and Recreation Rivers Permit - NYSDEC</b>		
<b>b. Long Island Well/Water Supply Permit- NYSDEC</b>		
<b>c. Tidal Wetlands Permit</b>		
<b>d. Fresh Water Wetlands Permit</b>		

## SECTION 3

<b>ENVIRONMENTAL QUALITY AND HEALTH REVIEW</b>	YES	NO
<b>1. Has a determination been made by any other permitting agency that this project is a Type I action pursuant to SEQRA?</b>		
<b>2. Has a determination of Environmental Significance (Negative or Positive Declaration) been issued by any other permitting agency for this project?</b> If yes, provide copy of determination.		
<b>3. Is the property located within or substantially contiguous to a locally or county designated Critical Environmental Area (CEA) pursuant to Article 8 of the Environmental Conservation Law (ECL) and 6 NYCRR? The potential impact of any Type I or Unlisted action on the environmental characteristics of the CEA is a relevant area of environmental concern and must be evaluated in the determination of significance prepared pursuant to Section 617.7 of SEQRA.</b>		
<b>4. Is the property located within the area designated Central Pine Barrens Core Preservation Area pursuant to Article 57 of the ECL?</b>		
<b>5. Is the project located in an area designated as “Parkland” or “Agricultural Land”?</b> If yes, show area on plans and/or explain in Section 5.		
<b>6. Is any portion of the subject property in a “Coastal Erosion Hazard Area” (pursuant to 6NYCRR Part 505) or subject to imminent erosion or flooding? Alternatively, could the project have the potential to cause erosion, drainage or flooding problems on adjacent or neighboring properties?</b>		
<b>7. Will the completed project have an adverse effect on existing air quality, or routinely produce odors, vibrations or operating noise which exceeds the local ambient noise levels? If yes, explain in Section 5.</b>		
<b>8. Will there be an adverse effect to existing traffic patterns?</b> If yes, explain in Section 5.		
<b>9. Has the property ever been used for the disposal or burial of solid waste or hazardous waste? If yes, show area on plans and/or explain in Section 5.</b>		
<b>10. Are there any existing environmental factors which may affect the public health and safety of the completed project’s occupants (for example, neighboring landfills, petroleum spills, toxic materials, noise sources, odors, etc.)?</b>		
<b>11. Does the property contain any species of plant or animal life listed as rare, threatened, or endangered by New York State, the New York State Natural Heritage Program?</b>		
<b>12. Will the project substantially affect any non-threatened or non-endangered species?</b> If yes, explain in Section 5.		
<b>13. Is the property substantially contiguous to, or does it contain, a building, site or district listed on the National or New York State Registers of Historic Places?</b>		
<b>14. Could the project affect the community or neighborhood character or adversely affect any aesthetic, agricultural, archaeological, or other natural or cultural resources? If yes, explain in Section 5.</b>		

15. <b>Have any unique or unusual landforms been identified on site?</b> If yes, explain in Section 5.		
16. <b>Does the property contain scenic views known to be important to the community?</b> If yes, explain in Section 5.		
17. <b>Is the subject property within 100' of any surface water(s) or regulated wetland(s)?</b> If yes, show on maps.		
18. <b>Is the parcel subject to existing covenants or restrictions?</b> If yes, explain in Section 5.		
19. <b>Does the project require a change in zoning or a zoning variance?</b> If yes, explain in Section 5.		
20. <b>Is there a public water wellfield within 1,500 feet of property boundaries?</b> If yes, show on preliminary map.		
21. <b>Is there a sewage treatment plant within 500 feet of property boundaries?</b> If yes, show on preliminary map.		
22. <b>Could the project result in any adverse effects associated with the production, storage, processing or disposal of solid wastes?</b> If yes, explain in Section 5.		
23. <b>Will the property be mined?</b> If yes, how much:		
24. <b>Will there be a significant adverse impact to the community's source of fuel or energy supply?</b> If yes, explain in Section 5.		
25. <b>Will there be a significant adverse impact to the quality or quantity of existing or future open space?</b> If yes, explain in Section 5.		

#### SECTION 4

APPLICATION IS HEREBY MADE FOR APPROVAL TO SUBDIVIDE LAND INTO PARCELS IN ACCORDANCE WITH THIS APPLICATION, SURVEY(S) AND PLAN(S) SUBMITTED. I CERTIFY THAT THE INFORMATION ON ALL THE PAGES OF THIS APPLICATION AND ALL THE ATTACHMENTS HAVE BEEN REVIEWED BY ME AND THAT, BASED ON MY INQUIRIES, SITE INVESTIGATION(S) AND/OR OTHER STUDIES, I BELIEVE THAT THE INFORMATION IS TRUE, ACCURATE AND COMPLETE. FURTHERMORE, THE OWNER/APPLICANT AGREES THAT THE INSTALLATION OF THE REQUIRED WATER SUPPLY AND SEWAGE DISPOSAL FACILITIES WILL BE MADE IN ACCORDANCE WITH THE DETAILS SHOWN ON THE APPROVED PLANS AND STANDARDS IN EFFECT AT THE TIME OF CONSTRUCTION. I UNDERSTAND THAT FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW.

*Note - ALL property owners and applicants must sign this form - Additional owner and applicant signatures can be included in Section 5 on reverse if necessary.*

Property Owner's Signature(s) \_\_\_\_\_

Print Name(s) \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Signature(s) \_\_\_\_\_

Print Name(s) \_\_\_\_\_ Date \_\_\_\_\_

Design Professional's Signature \_\_\_\_\_

Print Name \_\_\_\_\_ License # \_\_\_\_\_ Date \_\_\_\_\_

Complete Instructions for filing an application are contained in the Bulletin "Application Requirements for Filing Realty Subdivision Or Development Maps" (WWM-022). Before filing subdivision applications with the Department, you should be familiar with Article 6 of the Suffolk County Sanitary Code which describes conditions under which subdivision or development maps are required by this Department and the general qualifications for approval. Copies are available from the Department or at [www.suffolkcountyny.gov/health](http://www.suffolkcountyny.gov/health) under "Documents and Forms".

**SECTION 5**

**COMMENTS/EXPLANATIONS:**