Village of Monticello 2 Pleasant Street Monticello, NY 12701 Ph:(845)794-6130 Fax:(845)794-2327

SITE PLAN REVIEW/SUBDIVISION APPLICATION

	Planning Board Fees:
Basic Application Fee: \$300.00	Escrow Fee: \$1,000.00 due at time of application submission
Pre-Submission Conference: Application Fee Or	aly & Sketches of Project
Site Plan Review: Residential: \$500.00/plus \$15	50.00 per lot for each dwelling unit
Non-Residential: \$300.00/plu	s \$150.00 for each 2,000 sq. ft. of building area
Sub-Division Request: 2 Lot Subdivision \$600.0	00
3 or more Lot Subdivision	n \$1,000.00
SEQR Hearing: \$300.00	

The Village of Monticello Planning Board Meetings is scheduled for every 4^{th} Tuesday monthly unless otherwise noticed by the Village Clerk. All submissions must be received by the Village Clerk two (2) weeks prior to that date. Any application received after that date will be held until the following month. Thank you.

Section: Block: Lot(s): Zoning District: Street Address of Proposed Project: Current Property Owners: Address: Street/PO Box City State Zip Contact Phone: () Are you the current owner of this property? Yes No Name of Person(s) filling out application: Phone number: () Relation to project: Who will appear before the Planning Board and receive all notices: Check one only: Owner Agent Attorney Engineer Surveyor Other Other	Identifying Title of Site	e Plan or Subdivision: _				
Street Address of Proposed Project:	Section:	Block:	Lot(s):			
Current Property Owners:	Zoning District:					
Address:	Street Address of Prop	oosed Project:				
Street/PO Box City State Zip Contact Phone: () Are you the current owner of this property? Yes No Name of Person(s) filling out application: Phone number: () Relation to project: Who will appear before the Planning Board and receive all notices: Check one only:	Current Property Own	iers:				
Contact Phone: ()	Address:					
Name of Person(s) filling out application: Phone number: () Relation to project: Who will appear before the Planning Board and receive all notices:	Contact Phone: (•	•		State	Zip
Phone number: () Relation to project: Who will appear before the Planning Board and receive all notices: Check one only:	Are you the current ov	wner of this property?	Yes		No	
Relation to project: Who will appear before the Planning Board and receive all notices: Check one only:	Name of Person(s) fill	ing out application:				
Who will appear before the Planning Board and receive all notices: <u>Check one only:</u>	Phone number: (_)				
Check one only:	Relation to project:					
	• •	e the Planning Board a	nd receive all n	iotices:		
Owner Agent Attorney Engineer Surveyor Other		Attorney	Fnginger	Surveyor	Other 🗆	

<u>Please note:</u> If you are not the owner of the property please submit a notarized letter from the property owner giving you permission to make decisions and changes in regards to their property. This letter *must* be submitted at the time of application.

Is this a Pre-Submission C	onference? Yes	□ No	
=	onference, please pay the ap and provide 13 sketches of	oplication fee of \$300.00 only o the project.	and complete the
	on conference and is a full a out the complete applicatio	pplication to the Planning Boo on.	ard, please detach
Pre-Submission Conference	e Narrative:		
Signature:			
Title:		Date:	
**************************************	************Do Not Write E	elow This Line***********	*******
Date Paid:	Amount Paid:	Cash 🗆 Check [□ No
Clerk Initials:	13 Sketches of Proje	ct Submitted with Application	n 🗆

Who prepared the Sit	te Plan/Proposed Subdi	ivision:			
Name:					
Address:					
	Street/PO Box)	City		State	Zip
Purpose of Review:	Site Plan Review ☐ Subdivision ☐ Num	_			
Brief Description of P	Project:				
The undersigned here application.	eby requests approval l	by the Planning Bo	oard of the	above identific	ed
FOR PAYMENT OF AI SERVICES INCURREI	IIS APPLICATION INDI NY AND ALL APPLICAE D BY THE PLANNING ANT, ENGINEER, LEGA	BLE FEES AND ESO BOARD IN REVIE	CROW ACC	OUNT FOR PR S APPLICATIO	OFESSIONAL ON, SUCH AS
Signature:					
Title:		Date: _			<u> </u>
**************************************	******Do No .Y	ot Write Below Thi	s Line****	******	******
Date Paid:	_ Complete Application	on Fee:	Cash□	Check□ No)
	Escrow Ar	mount:	C ash \square	Check□ No	·
Clerk Initials:	13 Copies of	f Site Plan/ Subdiv	rision \square		

****Please note: The SPCL (Site Plan Check List) & SEAF (Short Environmental Assessment Form) must be completed and attached with all full Site Plan Applications. Thank you.