

# TOWN OF MIDDLESEX

## Application For Planning Board Review

FOR CODE ENFORCEMENT OFFICER USE ONLY		
Application #: _____	Date Issued To Applicant: _____	
If completed and returned by _____, application will be reviewed by Planning Board on _____		
Application Fee: \$ _____	Other Fee: _____	
Prior Application(s) On File:    yes    no	Issue Date Of First Application: _____	
Area Variance required _____	SEQR required _____	Septic system review required _____
Use Variance required _____	Yates County PB review required _____	Agricultural District review _____
Special Use Permit required _____	_____	_____
Other CEO instructions to Applicant: _____		
_____		

**APPLICANT TO COMPLETE ONLY SECTIONS THAT APPLY AND SUBMIT TO PLANNING BOARD CLERK**

**Application Type:** (check all appropriate boxes)

- |                                    |                     |                                |
|------------------------------------|---------------------|--------------------------------|
| Preliminary                        | Site Plan Review    | Public Utility                 |
| Final                              | Residential         | Special Use Site Plan Approval |
| Major Subdivision (4 or more lots) | Commercial          | Driveway / Road Construction   |
| Minor Subdivision                  | Cluster Development | Other _____                    |

**Name of Proposed Development:** \_\_\_\_\_

**Applicant:**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Facsimile \_\_\_\_\_

**Plans Prepared by:**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Facsimile \_\_\_\_\_

**Owner:** (if different from applicant)

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Facsimile \_\_\_\_\_

(If more than one owner, provide information for each)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Submitted with this application: (**SEVEN** sets of each required)

- |                                   |                                     |
|-----------------------------------|-------------------------------------|
| sketch (s)                        | project scope description (written) |
| conceptual plan(s) by design firm | other: _____                        |
| final plan(s) by design firm      | _____                               |

Location of site: \_\_\_\_\_  
 \_\_\_\_\_

Tax Map #ID description: \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Current Zoning Classification: \_\_\_\_\_

Current site status: (residential occupancy, being farmed, abandoned buildings, undeveloped, etc. ) \_\_\_\_\_  
 \_\_\_\_\_

Total site area (s.f. or acres): \_\_\_\_\_

Will development be staged?    yes    no    How many stages? \_\_\_\_\_

Anticipated design/build completion: 1<sup>st</sup> stage \_\_\_\_\_ 2<sup>nd</sup> stage \_\_\_\_\_ Total project \_\_\_\_\_

Estimated total cost of improvements: 1<sup>st</sup> stage \_\_\_\_\_ 2<sup>nd</sup> stage \_\_\_\_\_ Total project \_\_\_\_\_

Describe surrounding lands (suburban, agriculture, wetlands, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Summarize perceived impact to area in regard to population: (commuters, retirees, school age children, seasonal, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The following project scope information must be either shown on the submitted plans and/or within the written project scope description. IF NOT, fill in the following as required. Refer to Town Subdivision Law for additional submittal requirements for subdivisions. (Use additional sheets as needed.)**

1. Planned primary site usage: \_\_\_\_\_
2. Planned secondary useage: \_\_\_\_\_
3. Indicate s.f. of ground floor area, no. of floors, and height to ridge of each structure:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Indicate which buildings are in which phase, if applicable:  
\_\_\_\_\_  
\_\_\_\_\_
5. For residential buildings, indicate no. of families per building and/or no. of efficiencies, one bdr, two bdr, etc.:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Number of parking spaces allowed for Item 5 (by phase, if applicable): \_\_\_\_\_  
\_\_\_\_\_
7. What is total area of green space provided (by phase) for Item 5?  
\_\_\_\_\_
8. For Item 5, describe plans for site entrance, to include signage, fencing, lighting, landscaping, public roadway features, etc.: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. For commercial buildings, indicate total facility square footage (all buildings, all floors) and percentage break down of this total by: **A.** Production (processing/manufacturing/assembly/packaging/QC), **B.** Admin./sales, **C.** Support facilities (utilities), and **D.** Warehousing/storage (raw materials/ finished goods):  
Total S. F. \_\_\_\_\_  
% **A.** \_\_\_\_\_  
% **B.** \_\_\_\_\_  
% **C.** \_\_\_\_\_  
% **D.** \_\_\_\_\_
10. For Item 9, indicate total paved surface area on site (parking, roads, outside storage, etc.) \_\_\_\_\_
11. For Item 9, what is total area of green space provided (by phase)?  
\_\_\_\_\_

12. For Item 9, describe plans for storm water control and sediment pond construction, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. For Item 9, describe plans for site entrance, to include signage, fencing, lighting, landscaping, public roadway features, etc.:

APPLICANT'S SIGNATURE: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

<b><u>TO BE COMPLETED BY MIDDLESEX PLANNING BOARD</u></b>		File No. _____ - SPR
Date application received from Applicant / CEO: _____		
Initial meeting date with Applicant: _____		Second meeting date after application data received _____
Third meeting date with Applicant after receipt of additional information (if req'd): _____		
Yates County Planning Board review date (if req'd): _____		
Public Hearing date scheduled for (if req'd): _____		
Application Fee received:    yes      no      n/a      PB Meeting Fee: Amount: \$ _____ Check No.: _____		

<b><u>MIDDLESEX PLANNING BOARD REPORT TO TOWN BOARD</u></b>	
Application approval recommended.	Detailed report attached:    yes    no
Approval Conditions:	
_____	
_____	
_____	
Approval Comments:	
_____	
_____	
_____	
Board Signature: _____ Date: _____	
Application to be resubmitted as follows:	
_____	
_____	
Board Signature: _____ Date: _____	
Application is rejected for the following reason (s):	
_____	
_____	
Board Signature: _____ Date: _____	