

Town of Harpersfield

NYS Route 23
Harpersfield, NY 13786
(607) 652-5060

Application # _____
Fee Paid _____
Classification _____

APPLICATION FOR SUBDIVISION REVIEW

Part 1 - Sketch Plat

Date _____

1. Name of Subdivision _____
2. Name of Owner/Applicant _____
Address _____
(Street Number and Name) (Post Office) (State) (Zip Code)

3. Subdivision Location: _____ Deed Reference _____
(Liber) (Page)

4. Tax Map Designation: Sheet _____ Block _____ Lot(s) _____

5. Total Acreage _____ Number of Lots (including the original) _____

6. Name of Agent/Applicant (if different than owner)
Address _____
(Street Number and Name) (Post Office) (State) (Zip Code)

7. Land Surveyor/Engineer _____
Address _____
(Street Number and Name) (Post Office) (State) (Zip Code)

8. Attorney _____
Address _____
(Street Number and Name) (Post Office) (State) (Zip Code)

9. List all contiguous holdings in the same ownership: _____
Sheet _____ Block _____ Lot(s) _____

10. Existing restrictions, easements, covenants and zoning on parcel.

11. Is parcel within or adjacent to any Agricultural District ? (if so, specify) _____

12. REQUESTED EXCEPTIONS: The planning board is hereby requested to authorize the following exceptions to, or waivers of, its regulations governing subdivisions. List exception or waiver with the reason for each set forth.

13. Comments and Recommendations (For planning board use)

Signature of Applicant _____ Date _____

