

Supervisor: (845) 688-7165 Police: (845) 688-9902 Town Clerk: (845) 688-5004 Justice Court: (845) 688-5005 Assessor: (845) 688-5003 Assessor Fax: (845) 688-5708 **ZBA/ZEO/Plannig: (845) 688-5008** Highway: (845) 688-9901 Fax: (845) 688-2041 P.O. Box 134, 7209 Rte. 28, Shandaken, NY 12480

"The Heart of the Park...Where the Eagle Soars" www.shandaken.us

INFORMATION AND REQUIRMENTS FOR LOT LINE ADJUSTMENTS

PLEASE NOTE: The following is a guide and is not intended to replace the actual provisions of the Subdivision Regulations, which stipulate that the division of a parcel of land requires the approval of the Planning Board, acting on an application submitted by the owners and following their inspection and review of plats and other required documents and the holding of a Public Hearing if the Planning Board so orders. Copies of §105 (subdivision regulations) and §116 (zoning regulations) can be reviewed online at: <u>www.shandaken.us</u>

THE APPLICATION PACKET: The applicant should complete a Lot-Line Adjustment Application form, the front page of the short Environmental Impact Form, and attach a sketch plan (which may be prepared by the owners) showing the basic layout of the property and the proposed adjustment. The drawing should include Zoning and Flood Plain lines, adjacent owners, existing easements and restrictions as well as those proposed. Further information regarding setbacks, topography, grades, drainage, water supply, sewage disposal, and stormwater runoff may also be required. The original application packet, plus eight (8) copies of the complete application packet should be submitted to the Planning Board office at least ten (10) days in advance of the Planning Boards Regular Monthly Meeting.

If more than two properties are involved, be sure that the list of additional owners and parcel transfer information to/from each lot is copied as part of each completed application packet.

REPRESENTATION: While only one owner or representative needs to be present at the conference or subsequent meetings, any absent owner(s) must provide notarized letter(s) of authorization for the representative to act in his/her behalf.

FEE: The application fee for a Lot Line Adjustment is \$100 per application sought, payable to the Town of Shandaken. Debit and credit card payments are accepted by the Town Clerks office.

PLANNING BOARD MEETINGS: Scheduled monthly meetings are held on the second Wednesday of each month at 7:00pm at the Shandaken Town Hall on Route 28. Workshop meetings are held eight (8) days prior to the regular meeting, at the same time and place. The board, as a body, previews all pending applications, which is the reason for the ten (10) day deadline.

FINAL PLAT: Within sixty (60) days of approval of a preliminary plat, a FINAL PLAT (if not already submitted and approved) must be provided to the Board for final approval and signatures. It should consist of one linen or mylar copy, plus a minimum of seven (7) additional copies of any of the following dimensions: 8½ x11, 17x22, 22x34, 24x44 inches. Within forty-five (45) days of submission of the Plat in final form, the Planning Board shall, by resolution, conditionally approve (with or without modifications,) disapprove or grant final approval and authorize the signing of the plat. The Town will retain four (4) signed copies of the plat, and return the signed mylar and all other copies to the applicant, who is responsible to file the mylar plus two (2) signed copies with the Ulster County Clerks office. Failure to complete this last step will invalidate Planning Board approval, and the entire process will have to be repeated.

APPLIACTION FOR LOT LINE ADJUSTMENT

		(B)_		
City/State/Zip:				
ocation of Property:	On the	side(s) of	(road/s	treet) being also
			, approximately	
			(road/street) in the hamlet of	
			· · · · · · · · · · · · · · · · · · ·	
Coning District:	Siz	e of Parcel Being	Transferred:	_ acres
From: Sectior	۱ Block	Lot	Current Size of Lot	acres
To: Sectior	1 Block	Lot	Current Size of Lot	acres
If more than tw	o lots are involved, c	ontinue on revers	e side of this form, and check h	ere. ()
	PLICATION:			
PURPOSE OF THIS A	PPLICATION:			
PURPOSE OF THIS A	PPLICATION:			
PURPOSE OF THIS A	PPLICATION:			
PURPOSE OF THIS A		Арр	licant – If Other Than Owner	Noted in (A):
Surveyor or Engineer			licant – If Other Than Owner	
Surveyor or Engineer	:			
Surveyor or Engineer lame: lailing Address:				
Surveyor or Engineer lame: lailing Address: Sity/State/Zip:				

Signature: _____ Date: _____