TOWN OF BERGEN

APPLICATION FOR SUBDIVISION

☐ MINOR (1-4 Lots) ☐ MAJOR (5+ Lots) ☐ BULKLAND TRANSFER (40+ Acres)

Date: _____

OWNER (of land to be subdivided)

Name: _____

Address: _____

City, State/Zip: _____

Phone #: _____

APPLICANT (if other than owner)

Name: _____

Address: _____

City, State/Zip: _____

Phone #: _____

INSTRUCTIONS: *Please fill out this application as completely as possible. Submit additional documents which can include but is not limited to Maps - Sketch, Tape and/or Survey Maps, Abstracts, Deeds Covenants, etc.*

1. Location of proposed Subdivision - Tax Map # (TMP) _____
   Road _____ Nearest street intersection _____

2. Number of existing lot(s) _____ Number of proposed lot(s) _____
   (SUBMIT A MAP/SKETCH OF THE EXISTING LOT(S) AND OF THE PROPOSED NEW LOT(S) LINE(S)

3. Current Zoning District _____
   Will there be a Zoning District Change? NO ☐ YES ☐ If yes, list the requested Zone change _____

4. Check the intended use of the subdivision and the # of lot(s)

√		# of PARCELS
☐	RESIDENTIAL	☐

√		# of PARCELS
☐	AGRICULTURAL	☐
☐	RECREATION	☐

√		# of PARCELS
☐	COMMERCIAL	☐
☐	INDUSTRIAL	☐

5. Is a Special Use permit ☐, Variance ☐, or Other ☐ procedure necessary? BRIEFLY STATE REASON

6. Are there any Deed restrictions and/or covenants that apply or are contemplated for this subdivision?
   NO ☐ YES ☐ IF YES, ATTACH A COPY OF THE PROPOSED DEED RESTRICTION OR COVENANT.
   BRIEFLY LIST THE NATURE OF THE RESTRICTION HERE

7. Is there an Engineer designing this project? NO ☐ YES ☐

Name: _____ Phone #: _____

Address: _____ Firm Name: _____

_____ Address: _____

SIGNATURE BLOCK

_____ _____ _____ _____
Signature OWNER Date Signature APPLICANT (if different than owner) Date

OFFICE USE ONLY

REVIEW BY: (if applicable)	Date
State	
Health Department	
County Planning Bd.	
Town Engineer	
Town D.O.T.	
Fire Department	

FEES COLLECTED:	AMOUNT	DATE
Preliminary		
Final		
Bulkland Transfer		
Recreational Fee		
Per Lot		
Amendments		
Public Hearing		
TOTAL		

Cash ☐ or Check # _____

BOARD ACTION:	DATE MTG./ACTION TAKEN
Consultation	
Preliminary	
S.E.Q.R.	
Public Hearing	
Final	
Filed w/ County Clerk	

COPY DISTRIBUTION: WHITE - PLANNING BOARD YELLOW - CLERK PINK - APPLICANT

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