TOWN OF BLOOMING GROVE PLANNING BOARD
APPLICATION FOR SUBDIVISION, SITE PLAN - ARCHITECTURAL REVIEW
OR CONDITIONAL USE PERMIT

DATE: _____ FEE: _____

PLAN NAME: _____

PROPOSED USE: _____

TAX MAP # _____ ZONE: _____ OVERLAY DISTRICT: _____

FIRE DISTRICT: _____

SCHOOL DISTRICT: _____

WATER/SEWER DISTRICTS (if applicable): _____

APPLICANT'S NAME: _____

ADDRESS: _____

PHONE NO: _____

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

OWNER'S PHONE NO._____

ENGINEER OR SURVEYOR: _____

LICENSE NO: _____

ADDRESS: _____

PHONE NO: _____

ARCHITECT NAME (IF APPLICABLE): _____

I hereby depose and say that all the above statements and information and all statements and information contained in the supporting documents and drawings attached hereto are true:

Applicant's signature: _____

Sworn before me this _____day of _____ 20_____

_____
Notary Public

Applications for the Planning Board are due on the 1st of the month - a complete application contains 9 sets of plans, a completed application (3 pages), Site Consent Form, Entity Disclosure Form (if applicable), SEQRA form and the required fees (see fee schedule). Must also submit a digital copy of all documents and maps.
Every new applicant must attend a technical work shop with the Planning Board Engineer on the first Wednesday of each month. Call 845-496-5223 X7 to schedule an appointment and fee.

Amended January 2025

GENERAL MUNICIPAL LAW 809
AFFIDAVIT

STATE OF NEW YORK)
) SS:
COUNTY OF ORANGE)

I, _____, residing at _____

_____ do hereby swear and affirm the following to be true under penalties of perjury:

1. For the purpose of this affidavit, I acknowledge and affirm that an officer or employee of the Town shall be deemed to have an interest in the application when she or he, his or her spouse, or their brothers, sisters, children, grandchildren or the spouse of any of them:

   A. is the applicant, or

   B. is an officer, director, partner or employee of the applicant, or

   C. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or

   D. is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of this application.

2. The name and residence address of all officers or employees of the Town of Blooming Grove known by me to have any interest in the applicant on this application to the Planning Board of the Town of Blooming Grove are as follows:

NAME (If none, state None)	**ADDRESS**	**NATURE OF INTEREST**

Sworn to before me this _____ day of _____, 20___

Signed:_____

_____
Notary Public

Amended January 2025

OWNERS ENDORESEMENT

County of Orange)
ss:
State of New York)

_____ being duly sworn, deposes

and says that he/she resides at: _____

in the County of _____ State of _____

and that he/she is the owner in fee (_____) of the

_____ Corporation that is the owner in

fee of the property described in the foregoing application and that he/she has authorized:

_____ to make the application for subdivision

plat approval as described herein.

Sworn to before me this _____ day of _____, 20___

Signed:_____

_____
Notary Public

REFERRAL FORM FOR GENERAL MUNICIPAL LAW REVIEWS:

Please indicate the agencies that need to receive copies of this application:

_____ Orange County Department of Health

_____ Orange County Parks and Recreation

_____ Orange County Department of Planning

_____ Orange County Department of Public Works

_____ NYS Department of Environmental Conservation

_____ NYS Department of Transportation

_____ NYS Historic Preservation Office (NYS SHPO)

_____ US Army Corps of Engineers

_____ Palisades Interstate Park Commission

_____ Adjacent Municipality

_____ Town Board

_____ Town Highway Department

_____ Zoning Board of Appeals

_____ Fire District

Site Visit Consent Form

The property owner of street address _____

Section_____ Block _____ Lot _____ in regards to the application of

_____

hereby grants permission to all members of the Town of Blooming Grove Planning Board and their consultants to visit the property at any time during the tenure of said application before the Planning Board for purpose of analysis. The above parties agree that both the applicant and the property owner shall be held harmless in case of an event that may happen during such site analysis.

By:_____ _____
(Property Owner – Print) Date

By:_____ _____
(Property Owner – Signature) Date

By:_____ _____
(Property Applicant – Print) Date

By:_____ _____
(Property Applicant – Signature) Date

Nearest cross street _____

Property identification/
Mail Box Name: _____

Adjacent homeowners:

Left: _____

Right: _____

Across Road: _____

Other Identifying Features: _____

ENVIRONMENTAL FORMS

Dear Planning Board Applicant:

The Town of Blooming Grove Planning Board requires that all environmental forms (Short and Full) must be completed on line using the following link:

New York State DEC website: ~~www.dec.ny.gov/eafmapper~~
extapps.dec.ny.gov/docs/permits_ej_operations_pdf/seafpartone.pdf

The form **must** be completed online, printed out and included with your application submission.

FOR OFFICE USE ONLY
Application #

TOWN OF BLOOMING GROVE PLANNING BOARD
6 Horton Road PO Box 358 Blooming Grove, NY 10914
P: (845) 496-5223

ENTITY DISCLOSURE FORM

(This form must accompany all land use applications submitted by any Entity as defined herein)

Disclosure of the names and addresses of all persons or entities owning any interest as well as any controlling position of or in any Limited Liability Company, Partnership, Limited Partnership, Joint Venture, Doing Business Name, Corporation, Association, Company or organization of any kind (hereinafter referred to as the "Entity") filing a land-use application or request for land use approval before any and all municipal land-use board, official, committee or department (i.e., Town Board, Zoning Board of Appeals, Planning Board, etc.) is required. The names of any and all Individuals, Partners, Members or other Persons involved in the Entity for the past three calendar years from the date of filing of any land use application or request for land use approval must be set forth in writing on this Form. Also, the applicant must attach a copy of all Entity documents filed with the New York State Secretary of State or in any other State of its formation as well as all records regarding Membership, Partnership, or other interests in the Entity, Minutes of any and all Entity Meetings and records of transfer of any membership, partnership or other person's interests since the formation of the Entity. If any Member, Partner or person associated with the Entity is not a natural person, then the names and addresses as well as all other information sought herein must be supplied about the non-natural person member, partner or company comprising that Entity, including names, addresses and formation filing documents. Applicants shall submit supplemental sheets for any additional information that does not fit within the below sections, identifying the section being supplemented.

SECTION A.

Name of Entity	**Project Name and Address**
Address of Entity	**City, State, Zip Code**
State of Formation	**Email and telephone contact information**

SECTION B. List all persons, officers, limited or general partners, directors, members, shareholders, manager, authorized persons, beneficial owners, any others with any interest in or with the above referenced Entity. List all persons with a membership or voting interest or controlling position in the Entity along with that parties' business or personal address and telephone number, e-mail address and other contact information. "Authorized person" used herein means an individual or entity, whether or not a

shareholder, member, officer or director, or person identified by any other title who is authorized to act, solely or in conjunction with others, on behalf of or for the Entity. Use a supplemental sheet to list additional persons.

Name	Address	Telephone Number

SECTION C. Does any party identified in Section B currently hold a paid or unpaid position with an agency of the Town of Blooming Grove?

☐ YES ☐ NO

If yes, list every Board, Department, Office, agency or other position with the Town of Blooming Grove with which a party has a position, unpaid or paid, and identify the agency, title, and date of hire.

Agency	Title	Date of Hire

SECTION D. The information contained herein shall be updated with the Town Clerk no later than thirty days after any change in information.

Any person who (1) provides false or fraudulent beneficial ownership information; (2) willfully fails to provide complete or updated information; or (3) during the application process, fails to obtain or maintain credible, legible, and updated beneficial ownership information shall be subject to suspension of any pending application by the applicant entity or a stop work order on any work relating to the application or both, in addition to any other applicable penalties under the Town Code or State or Federal Statute or both.

STATE OF NEW YORK,_____COUNTY_____

I,_____being first duly sworn, according to law, deposes and says that I am (Title)_____an active and qualified member of the _____, a business duly authorized by law to do business in the State of New York, and that the statements made in the forgoing affidavit are true, accurate, and complete. I further understand that land use applications may have a significant impact upon the health, safety and general welfare of the Town, its inhabitants and visitors, and the Planning Board is required to be certain that anyone with any interest or controlling position of the Entity who applies for any land use approval or permission must have no conflict of interest as that term is defined in Town Law as well as the General Municipal Law and that the disclosure of any officers, directors, members, shareholders, managers, authorized persons, beneficial owners, any other controlling parties with the above entity, and all persons with a membership or voting interest in the entity is required to be made in any land use application or request for any approval from the Town to be certain no conflict of interest exists and without the disclosure a full review of any conflict cannot take place.

(Signature)_____(Print)_____

Sworn to and subscribed in my presence

this ____ day of_____, _____

_____

(Notary Public) (Notary Expiration)