Village of Warwick Planning Board 77 Main Street, PO Box 369 Warwick, New York 10990 Tel: (845) 986-2031, ext. 7

Email: planning@villageofwarwick.org

OFFICE USE ONLY:
Date Received:
App. Fee Received:
Escrow Received:

APPLICATION FOR SUBDIVISION APPROVAL

(Preliminary Approval / Final Approval)

[All information must be completed. If not applicable, note N/A. Must be signed & notarized.]

1. Project Name	Jewe	tt 2 lot su	ubdivision 								
2. Tax map design	gnation: S	ection _	204	Block _	1	Lot	19				
3. Zoning District *See Article II Zo	_				CCRO	С СВ	GC	LI	TND	PAC	AD
For questions 5 – 10	use Article	III Use	Regulation	s of the V.	of Warwi	ck Zonin	g Code,	Table	of Gen	eral Use	Requiremen
4. Type of Existi	ing Use:_	Residen	tial								
5. Proposed Typ	e of Use:_	Reside	ntial								
6. Circle Applica	able Categ	ory for	Project's	Proposed	Use:	P* C	* S*	P			
7. Proposed Proj	ect's Use	Group(s	s):B								
8. Proposed Proj	ect's Spec	ial Con	ditions:	N/A	******************************	*last colu	mn in Tal	ole of G	ieneral U	se Requir	ements
10. Application I	F ees , paya	ibdivision	on Appro ne Village	val of Warw							
Type of			Type of Fee	,	Fee	:	Check	# / Ca	sh	Date I	Received
Planning Bo Application		ubdivisio	n fee		\$350.00						
Planning Bo Application		lajor Sub ore	division – 2	lots or	\$450.00						
11. Escrow Fee, p				k Schedule Tarwick si	·						eation:

Owner's N	lame Same			Phor	ne		and an area of the same and the	
Address		<u></u>			Email _			
	(Street Number & N	Name) (Post Offic	e) (State)	(Zip Code)				
Applicant'	s Representativ	ve's Name	Kirk Rothe	er, PE	Phone	845-988-06	20	
	Saint Stephens (Street Number & N					krother@kirk		
	(Street Number & N	Name) (Post Offic	e) (State)	(Zip Code)				
Plan Prepa	rer's Name Sa	ame as above		Ph	one			
Address					Emai	I		
	(Street Number & N	Name) (Post Offic	e) (State)	(Zip Code)				
Attorney's	s Name	y Havens		Phone	845-987-85	500		
Address _				······································	Email	jeremy@ha	avenslaw.net	
	(Street Number & N	Varne) (Post Offic	e) (State)	(Zip Code)				
Meeting No	otification Nam	ne Kirk Rother	PE		_Phone	988-0620	Email_krother@kirkrot	her.com
13. Total acre	eage18.4+/-			Nun	ber of lots_	2		
14. This appl	ication is for th	ne use and cor	structio	n of Sing	le family reside	ential dwellin	g	
						•		
15. Is any va	ariance from A	rticle IV Bulk	Require	ements req	uested?	Yes / No		
If so, for	r what?							
	Zoning Board on this property		anted an	y variance	or has the V	illage Board	l granted any special use	permit
If so, lis	t Applicant Na	me				_(Attach e	ntire ZBA & VB appr	oval.)
17. Estimated	d area of distur	bance30,000)+/- sq.ft.					
	luster subdivis							

TO BE SIGNED AND NOTARIZED

COUNTY OFSTATE OF	SS:
I,statements contained in the papers sul	, hereby depose and say that all the above statements and the bmitted herewith are true.
Sworn before me this	Signature
Day of20	Title
Notary Public	
COUNTY OF Orange STATE OF New York- Freeborn G. Vewett at 27 van Duzen PI, Wa (Owners Address) State of New York-	,being duly sworn, deposes and says that he resides
And that he is the (owner in fee)	Of the
(corporation which is the owner in fee	e) of the premises described in the foregoing application and that to make the foregoing application for Planning Board epresent him on all Planning Board matters.
Sworn before me this 22 Day of Orlder 2022 Notary Public Melisse A. Stevens	Owner's or Official's Signature
Melissa A. Stevens tary Public, State of New York	
No. 01ST6062297	