No.

TOWN OF OLIVE PLANNING BOARD APPLICATION FOR SUBDIVISION

P.O. BOX 180 WEST SHOKAN, NY 12481

					Date8.	26.2024
APPLICANT:	Ronald & Antoinette Boedigheimer Luca Farinelli & Jenny Hubbard Address 296 Sheldon Hill Road Olive NY 12461 (845) 657 5854		Name of Representative Luca Farinelli Address 207 W 106th St Apt 16B New York NY 10025 (917) 327 2346			
	PROPERTY:	Subdivision Name N/A (lot line adjustment) Location (Road) Sheldon Hill Rd Olive Tax Map # 53.4 Block 1 Lot 1		Any part in		3.RE1 BV1/2, BH1/
Total Area of Property in Acres LOT 10=5.9, LOT 1 A list of nemes and addresses of abutting land owners is rec		.100=34	.8rotal Lots	REV LOT	10=6.2, 1.100=34.5	
PLEASE REFER TO THE ATTACHED CHECKLIST FOR SUBMISSION DETAILS			OWNER(S)		Signature(a)	k
PLANNING BOARD USE ONLY	DATE APPROVED	-	DA	TE	Approved by	DATE
		aring Notice	•		County Health	
	Preliminary Plan Public Ha	aring			NYC EPA	
	Final Plan Other App	proved			Town Highway De	pt
	No. of Lots X Application	on Fee	Amount per			
ANA	— χ Recreation	n Trust Fun	d	· · ·		
굽	Date Fees Sent to Town Supervisor: Application F		-	Trust Fund		

TOWN OF OLIVE PLANNING BOARD DOCUMENT TO BE SUBMITTED FOR MINOR SUBDIVISION or LOT LINE ADJUSTMENT

SUBDIVISION NAME	#
SECTION 133-28 - SKETCH PLAN	
Clerk of the Planning Board (via the of the Board ten (10) copies of all a 133-37) of a sketch plan of the proprequirements set forth below for the Environmental Assessment Form (a https://gisservices.dec.ny.gov/ex Application, EAF, list of neighbors application must be emailed to jp	djusting lot lines, subdividing or resubdividing land, submit to the le Building Department) at least 14 days prior to the regular meeting required application documents, including ten copies (see Section posed lot line adjustment or subdivision, which shall comply with the expurposes of classification and preliminary discussion. The EAF) must be completed using the online tool: [AFTIME APPLICATION DOCUMENTS: 1, envelopes. A pdf version of the sketch plan and entire erry.olive@gmail.com. The Code Enforcement Officer must review on to the Clerk of the Planning Board.
some other similarly accurate base enable the entire tract to be shown	to the Planning Board shall be based on tax map information or map at a scale (preferably) not less than 200 feet to the inch, to on one sheet. The sketch plan shall be submitted, showing the in Fee will be determined at the initial review meeting)
•	ich is to be adjusted or subdivided in relation to the entire tract, and ing street intersection.
portion to be subdivided and wi	l areas, streams and other significant physical features within the thin 200 feet thereof. If topographic conditions are significant, at intervals of not more than 20 feet.
 500' of the applicant's property A. Each packet should include responsibility to confirm cu records. B. 2-sets of #10 envelopes (no **Also include two envelopes) 	owner(s) and the names of all surrounding property owners within as disclosed by most recent tax records. e a list of names and mailing addresses w/SBL#. It is the applicant's rrent mailing addresses with the Town of Olive Assessor's tax payer return address) with name, address and stamped best addressed to the applicant. lock with two signature lines
(5) The tax map sheet, block and lo	t numbers, if available
(6) All the utilities available, and al	l streets which are either proposed, mapped or built.
	cluding lot width and depth), street layout, recreation areas, systems or supply within the subdivided area.
(8) All existing restrictions on the u	ise of land including easements, covenants, or zoning lines.
(9) The proposed subdivision name	, address, and name of the town and county in which it is located.
(10) Licensed Surveyor signature	e, date and seal.
(11) The date, North point, map	scale, name & address of the subdivider.
CHAIRMAN	DATE COMPLETED