



SITE PLAN AND/OR SPECIAL USE PERMIT APPLICATION CHECKLIST

- ☐ Application Fee
- ☐ Two (2) Sets of stamped envelopes addressed to property owners within 500 feet of the property, and written list of those property owners and addresses.
- ☐ Ten copies of the completed Site Plan and/or Special Use Permit Application and all attachments.
- ☒ Short Environmental Assessment Form (with answers generated by NYSDEC EAF Mapping Tool; the remainder completed by applicant).*
- ☒ Detailed narrative describing the proposed use, improvements, business operations and other details pertinent to the application.
- ☐ Location map showing all properties abutting and across the road from the site and the current use of each abutting property.
- ☒ Detailed Site Plan to-scale, showing existing conditions and proposed improvements, including, but not limited to:
 - ☐ The location, current uses and heights of all existing buildings and uses (including parking and or outdoor storage) on the site or lot.
 - ☐ The location, current uses and heights of all proposed buildings and uses (including parking and or outdoor storage) on the site or lot.
 - ☐ The location of all existing and proposed vehicular and truck parking and loading areas.
 - ☐ The location of all existing and proposed motorized and non-motorized ingress, egress, and circulation infrastructure.
 - ☐ All existing and proposed drains, culverts, retaining walls, man-made vegetated areas, fences, water supply infrastructure (with description)
 - ☐ The location, type, and size of all existing and proposed signs
 - ☐ The location, type, and size of all existing and proposed exterior lighting
 - ☐ Dimensions of all setbacks from adjacent properties.*
 - ☐ Refuse and sewage disposal infrastructure with descriptions of areas designated as flood zones, wetlands, the approximate location of sewage disposal systems and wells within 100 feet of the site (to the extent available) and any streams or water bodies within fifty feet of the site.*

* - Please include to the extent applicable.



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- ☐ The location and a description of the types of buffers to prohibit unwanted impacts on adjacent and nearby property, adjacent or on-site natural resources, views, and to mitigate other potential unwanted off-site impacts.

- ☐ Area Sketch Map ;(within 500 feet of the subject (applicant's) site that identifies*:
 - ☐ Surrounding properties and their use (for example, single family home, commercial, storage)

 - ☐ Roads

 - ☐ Significant geological and environmental features (including and not limited to streams)

** - Please include to the extent applicable.*



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This application requires information available at no charge from the Ulster County Parcel Viewer, Ulster County Assessor (244 Fair St, Kingston, NY 12401. Tel: (845) 340-3490), or the Town of Olive Building and Zoning Office (Town of Olive, 45 Watson Hollow Road, West Shokan, NY 12494. Tel: 845-657-8118) Applicants may also email inquiries to the Planning Board Clerk at jerry.olive@gmail.com

The Ulster County Parcel Viewer can be accessed online at:

<https://ulstercountyny.gov/maps/parcel-viewer/>

For information on how to use the parcel viewer please see pages 6 and 7 of this application.

The New York State Department of Environmental Conservation Mapper can be accessed online at:

<https://gisservices.dec.ny.gov/efmapper/>

The Town of Olive Zoning Code can be accessed online at:

<https://ecode360.com/12687942>

SECTION I: TYPE OF REQUEST:

☒ **I.a. This a request for Site Plan approval** to improve or modify the number, configuration or size of structures or improvements on your property?

Property Zone

☒ **I.b. This a request for a Special Use Permit**

Property Zone

Proposed Use

SECTION II: CONTACT INFORMATION

II.a. Applicant Information

Name:

Address:

Date:

Contact Information: Phone:

Email:

Is the applicant the property owner? Yes ☒ (if yes, please skip to II.c) No ☐

II.b. Owner Information

Owner Name:	ROBERT AND RUSSEL OAKES
Owner Address:	PO BOX 73, SHOKAN, NY 12481

II.c. Professional entity preparing the site plan (if any)

Name:	MIKE NORTH, KIMBERLY SNYDER, NORTH ENGINEERS AND ASSOCIATES		
Contact Information: Phone:	845-331-0028	Email:	NORTHENGR@GMAIL.COM

SECTION III: PROPERTY INFORMATION

The following information can be accessed through the Ulster County Parcel Viewer [HERE](#).

III.a. Tax Parcel No:

Parcel No. (SBL):	46.5	Deed Book:	3	6.110
Page:Physical Address:	3216 ROUTE 28, SHOKAN NY 12481			

The following information is available using the Ulster County Parcel Viewer measurements tool:

III.b. Existing Parcel Dimensions:

Total Area (acres):	46.5
Lot Width (linear feet):	357
Lot Depth (linear feet):	493

The Town Zoning Code is located [HERE](#). Please refer to Attachment 1 (\$155.A1) for the appropriate zoning information to complete the following questions.

III.c. Minimum Lot Size permitted for the current Zoning District (in acres):

III.d. Setbacks:

	Existing:	Proposed:
Front Yard Depth (linear feet from main structure to property line)	50	50
Left Side Yard Width (linear feet from main structure to property line):	54.14	21.33
Right Side Yard Width (linear feet from main structure to property line):	217.49	75.82
Rear Yard Depth (linear feet from main structure to property line):	308.05	201.92

SECTION IV: DESCRIPTION OF PROPOSED IMPROVEMENTS OR SPECIAL USE:

IV.a. Please describe your proposed improvements. (attach additional narrative as needed)

ADD STORAGE BUILDINGS ON AN EXISTING STORAGE BUILDING SITE. ONE STRUCTURE TO THE WEST END OF THE PROPERTY FACING ROUTE 28. ADD THREE NEW STRUCTURES TO THE EAST END OF THE SITE AS SHOWN IN THE DRAWINGS.

Will there be employees on the site?

NO

If yes, how many?

What will be hours of operation?

9-5

IV.b. What types of activities would you like to conduct in this improvement?

(For example: operate a home-based business, operate a cafe, offer medical service, shelter animals, vehicle storage, artist studio, cover equipment, recreation, other).

INDOOR STORAGE

IV.c. What is the maximum height (in feet) of each building proposed for this site (if applicable)?

Building 1

13

Building 2

13

Building 3

13

IV.d. Does your proposal include (please check all that apply):

☐

Connections to a public sewer system?

☐

Installation of new sewage disposal system? If yes, please provide Board of Health approvals

☐

Stormwater drainage / management improvements?

☐

Signs of any type? If yes, please provide the sign specifications on a separate sheet attached to this application.

☐

Will the sign(s) be lit?

☐

Exterior lighting? If yes, please provide the lighting specifications on a separate sheet attached to this application.

☐

Driveways or motorized vehicle access? (If this is a new driveway, please obtain and attach to this application, a curb cut permit from the Town of Olive Highway Department, or if along Route 28, [NY Department of Transportation](https://www.dot.ny.gov/index) (website: <https://www.dot.ny.gov/index>))

☐

New Electric Utility Connection(s)?

☐

Loading/unloading areas?

☒

Landscaping?

☐

Outside storage?

☐

Walls, berms, or fences?

☐

Sidewalks or pathways?