

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

DATE: _____ FEE: _____
PLAN NAME: _____
PROPOSED USE: _____
TAX MAP # _____ ZONE: _____
APPLICANT'S NAME: _____
ADDRESS: _____
PHONE NO: _____
ENGINEER OR SURVEYOR: _____
LICENSE NO: _____
ADDRESS: _____
PHONE NO: _____

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: _____
Name Printed: _____

Sworn before me this _____ day of _____, 20__

Notary Public
My Commission Expires On: _____

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) and the required fees (see fee schedule).

It is recommended that every applicant attend a technical work shop with the Planning Board Engineer on the first Wednesday of each month. Call 845-493-7011 X726 to schedule an appointment.

TOWN OF BLOOMING GROVE PLANNING BOARD
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. I am (strike "a" or "b") the (a) owner in fee, or (b) duly authorized agent of
_____, the owner in fee of the property (Tax Description:
_____) described in the foregoing application, and that the undersigned is duly authorized to
make this affidavit.

2. For purposes 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:

<u>NAME</u> (If none, state None)	<u>ADDRESS</u>	<u>NATURE OF INTEREST</u>
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Sworn to before me this ____ day
of _____, 20__

Signature _____
(Name Printed): _____

Notary Public
My commission expires on _____

TOWN OF BLOOMING GROVE PLANNING BOARD
OWNERS ENDORSEMENT

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 (strike "a" or "b") is (a) the owner in fee, or (b) is the duly
authorized agent of _____, the owner in fee of the property (Tax Description:
_____) described in the foregoing application and that he/she/said entity has authorized:
_____ to make the application for subdivision plat approval, site plan
approval, architectural review, and/or conditional use permit as described herein.

(Signature)
(Name Printed)

Sworn to before me this ____
day of _____, 20__

Notary Public

My commission expires on _____