

TOWN OF BERGEN

APPLICATION FOR SUBDIVISION

<input type="checkbox"/> MINOR 1-4 Lots	<input type="checkbox"/> MAJOR 5+ Lots	<input type="checkbox"/> BULKLAND TRANSFER 40+ Acres
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Date: _____

OWNER (of land to be subdivided)

APPLICANT (if other than owner)

Name: _____
 Address: _____
 City, State/Zip: _____
 Phone #: _____

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 Address: _____
 City, State/Zip: _____
 Phone #: _____

INSTRUCTIONS: Please fill out this application as completely as possible. Submit additional documents which can include but is not limited to Maps - Sketch, Tape and/or Survey Maps, Abstracts, Deeds Covenants, etc.

1. Location of proposed Subdivision - Tax Map # (TMP) _____
 Road _____ Nearest street intersection _____

2. Number of existing lot(s) _____ Number of proposed lot(s) _____
 (SUBMIT A MAP/SKETCH OF THE EXISTING LOT(S) AND OF THE PROPOSED NEW LOT(S) LINE(S))

3. Current Zoning District _____ If yes, list the requested Zone change _____
 Will there be a Zoning District Change? NO YES

4. Check the intended use of the subdivision and the # of lot(s)

<input checked="" type="checkbox"/> # of PARCELS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 33%; text-align: center;">RESIDENTIAL</td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>	RESIDENTIAL						<input checked="" type="checkbox"/> # of PARCELS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 33%; text-align: center;">AGRICULTURAL</td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> <tr><td style="width: 33%; text-align: center;">RECREATION</td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>	AGRICULTURAL			RECREATION			<input checked="" type="checkbox"/> # of PARCELS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 33%; text-align: center;">COMMERCIAL</td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> <tr><td style="width: 33%; text-align: center;">INDUSTRIAL</td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>	COMMERCIAL			INDUSTRIAL		
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5. Is a Special Use permit , Variance , or Other procedure necessary? BRIEFLY STATE REASON _____

6. Are there any Deed restrictions and/or covenants that apply or are contemplated for this subdivision?
 NO YES IF YES, ATTACH A COPY OF THE PROPOSED DEED RESTRICTION OR COVENANT.
 BRIEFLY LIST THE NATURE OF THE RESTRICTION HERE _____

7. Is there an Engineer designing this project? NO YES

Name: _____ Phone #: _____
 Address: _____ Firm Name: _____
 _____ Address: _____

SIGNATURE BLOCK*****

	Signature OWNER	Date	Signature APPLICANT (if different than owner)	Date
OFFICE USE ONLY	REVIEW BY: (if applicable) _____	Date _____	FEES COLLECTED: AMOUNT DATE	BOARD ACTION: DATE MTG./ACTION TAKEN
	State _____		Preliminary _____	Consultation _____
	Health Department _____		Final _____	Preliminary _____
	County Planning Bd. _____		Bulkland Transfer _____	S.E.Q.R. _____
	Town Engineer _____		Recreational Fee _____	Public Hearing _____
	Town D.O.T. _____		Per Lot _____	Final _____
	Fire Department _____		Amendments _____	Filed w/ County Clerk _____
			Public Hearing _____	
			TOTAL _____	
			Cash <input type="checkbox"/> or Check # _____	

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	Town D.O.T.		Per Lot	Final
	Fire Department		Amendments	Filed w/ County Clerk _____
			Public Hearing	
			TOTAL	
			Cash <input type="checkbox"/> or Check # _____	