

# *Town of Caledonia Planning Board*

3109 Main Street, Caledonia, NY 14423

**Phone:** (585) 538-4927 ext. 122 / **Fax:** (585) 538-6348

**TO:** All Prospective Site Plan Applicants

**SUBJECT:** Site Plan Application

Attached you will find the minimum required application forms you must read and complete for your proposed site plan. In addition to these forms you are required to submit a sketch plat for your Site Plan and all other data for the appropriate state in the site plan review processes (i.e., sketch, preliminary or final). You will also need a Long or short EAF for SEQR depending on the size of the project. Those forms may be found at the following website: <http://www.dec.ny.gov/permits/357.html>

## AG Data Statement

If the proposed activity will be on property within an agricultural district containing a farm operation or on property with boundaries within 500 ft. of a farm operation located within an agricultural district, then an AG Data Statement must be completed.

Planning Board applications and fees for the Site Plan need to be submitted to the Town Clerk's Office for the Planning Board Clerk. At the time of submission, the application for the Planning Board must accompany the application fee in order to begin the review process. All required paperwork must be received a minimum of 10 business days prior to the next scheduled Planning Board meeting to be considered for the agenda.

### The fees are as follows:

<i>Initial Site Plan Review</i>	<i>\$150.00</i>
<i>Final Plat Review of Site</i>	<i>\$400.00</i>

All required paperwork must be received a minimum of 10 business days prior to the next scheduled Planning Board meeting to be considered for the agenda.

Please ensure the following have been submitted:

- Original Application
- Application Fee (Payable to: Town of Caledonia)
- 10 Copies of the Application
- 10 Copies of any maps or other documentation for review

**Steven Sickles**  
**Planning Board Chairman**

**Katie Hillman**  
**Planning Board Clerk**  
**(585) 506-2577**

[planningboardclerk@townofcaledoniany.org](mailto:planningboardclerk@townofcaledoniany.org)

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## **SITE PLAN REVIEW APPLICATION**

**ADDRESS OF SITE:** \_\_\_\_\_

**TAX PARCEL NUMBER:** \_\_\_\_\_ **ZONING DISTRICT:** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_

- If the Applicant is not the Owner of the property, an Authorization Form must accompany this application.

Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**PROPERTY OWNER'S NAME:** \_\_\_\_\_

Address: \_\_\_\_\_

Property Acquisition Date: \_\_\_\_\_

**DESIGN PROFESSIONAL:** \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**CURRENT USE OF SITE:** \_\_\_\_\_

\_\_\_\_\_

**PROPOSED SITE PLAN (Brief description):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Area of parcel(s): \_\_\_\_\_ sq. ft.

Building area: \_\_\_\_\_ sq. ft.

Fire District: \_\_\_\_\_

Water Supply: \_\_\_\_\_

## SITE CHARACTERISTICS:

Any natural features (e.g., streams, wetlands, floodplains, ect.) on site? \_\_\_\_\_

- If yes, provide a brief description. \_\_\_\_\_

Are there any pre-existing restrictions or easements affecting lands to be developed? \_\_\_\_

- If yes, (1) copy of pre-existing restrictions or easements must accompany this application.

Has this property been a subject of past Town Board, Planning Board or Zoning Board of Appeals applications and/or approvals?  Yes  No (If yes, please describe)

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## Is this application for:

a. A new proposal for development?  Yes  No

b. A revision of a previously approved Site Development Plan and/or Special Use Permit?  Yes  No

(If yes, please describe)

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Is the proposed development phased or to be developed in one phase?

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## **STATEMENT OF CONFORMANCE:**

The undersigned acknowledges that the official date of this application is that of the next scheduled meeting of the Planning Board, as established by the Planning Board's calendar, provided that this application form, the required Environmental Assessment Form and the required drawings have been submitted to the Planning Board at least fourteen (14) calendar days prior to the said meeting. At the time of submission, the Sketch Plan Application Fee must be paid in order to begin the review process.

I/We, the undersigned, in making an application to the Town of Caledonia for approval for the activity stated and described in this application have reviewed the laws and regulations of the Town of Caledonia to the extent that they are applicable to this proposal and understand that:

1. **NO** building construction or alteration may be started prior to issuance of a Building Permit:
2. **NO** Building Permit may be issued, **NO** site development work may be started, and **NO** use may be established, except for one-family dwellings and their accessory uses, until either Final Site Development Plan and/or Special Use Permit Approval has been granted.
3. **NO** building construction or site development work may proceed until each previous state of work, as specified by the Building Department has been inspected by the Building Inspector.
4. **NO** building or premises or part thereof may be used or occupied until a Certificate of Occupancy has been issued by the Building Inspector; and
5. **ALL** building construction and all site development must conform to the plans and specifications approved by the Town of Caledonia. No deviation from or revision to an approved plan may take place without prior approval of the Town of Caledonia.
6. **PAYMENT OF FEES.** It is the Applicant's responsibility to reimburse the Town of Caledonia for certain reasonable out of pocket Town costs associated with the review of this application, including costs of legal notice fees for publication, engineering and legal fees, and mailing fees for notification of surrounding property owners. Publication and mailing fees will be collected at the time the Application to the Planning Board is submitted. Decisions will not become effective, and a building permit will not be issued, until the reimbursement of all applicable fees have been paid. For larger projects requiring more complex reviews, the Zoning Enforcement Officer may require that an escrow account be established for the payment of the above fees. Checks payable to Town of Caledonia.

**Applicant's Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**NOTE:** It is the responsibility of the Applicant to notify the Building Inspector, for the purpose of inspection, at each stage of work. Please check with the Building Department for specific instructions concerning your project. The Building Department's phone number is 585-538-9320.

## AUTHORIZATION FORM

To the Town of Caledonia ( ) Planning Board;

I, \_\_\_\_\_ give permission to \_\_\_\_\_

*Property Owner Applicant*

For representing me for my application before the Town of Caledonia Planning Board, as indicated above, in applying for (a)

- ( ) Special Use Permit
- ( ) Site Plan Review
- ( ) Minor Site Plan Modification
- ( ) Subdivision Review
- ( ) Lot Line Adjustment

property located at: \_\_\_\_\_ For the  
*Property Address*

Property Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## AGRICULTURAL DATA STATEMENT

In accordance with Section 283-a of the New York State Town Law, the Town of Caledonia will use the data in this statement to assist in evaluating the impacts of proposed development projects on farm operations in Agricultural Districts.

1. Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

2. Project Name/Location: \_\_\_\_\_

3. Description of proposed project. \_\_\_\_\_

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4. Tax Parcel Number(s): \_\_\_\_\_

5. Number of total acres involved with project: \_\_\_\_\_

6. Number of total acres presently in Tax Parcel: \_\_\_\_\_

7. How much of the site is currently farmed? Acres \_\_\_\_\_

8. Please identify who is farming the site. \_\_\_\_\_

9. Please indicate what your intentions are for use of the remainder of the property, over:

Five years: \_\_\_\_\_

Ten years: \_\_\_\_\_

Twenty years: \_\_\_\_\_

10. Who will maintain the remainder of the property not being used for this development?

\_\_\_\_\_

11. Please indicate crop(s) or vegetation cover for the site. \_\_\_\_\_

\_\_\_\_\_

12. Are there any drainage ways or underground tile systems located on the site? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will this project alter existing drainage patterns? If yes, please describe \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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13. Is the parcel included in a farm plan prepared by the Livingston County Soil and Water District of the USDA Soil Conservation Service? \_\_\_\_\_

\_\_\_\_\_

Are federally funded cost sharing practices in place for the parcel? \_\_\_\_\_

\_\_\_\_\_

Name of program(s). \_\_\_\_\_

14. Is the parcel currently granted an agricultural tax exemption?     Yes     No

Signature of Applicant: Date: \_\_\_\_\_