

# **Historical Areas Board of Review (HABR)**

Town of Orangetown Building Department  
26 Orangeburg Road, Orangeburg, New York  
10962 (845) 359-8410, ex 4316  
www.orangetown.com

## **APPLICATION CHECKLIST:**

### **THE FOLLOWING ITEMS MUST BE SUPPLIED IN ORDER TO ACCEPT AN APPLICATION:**

Date: \_\_\_\_\_ Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Address \_\_\_\_\_

1.  A signed and dated completed Part I and Part II of the Board Application.
2.  A copy of the Building Permit Denial Application, signed by the Director of the Department. (*Historic Board applications that are referred from the Planning Board or consultations do not require a Building Permit Denial.*)
3.  Copy of Deed to present owner of property.
4.  Agents must have written authorization from the owner to appear in front of the Board. Contract Purchaser may file a copy of the contract.
5.  **If the Owner and/or Applicant is listed as an Entity, A completed Entity Disclosure Statement Form MUST be submitted with this Application.**  
*Entity: A limited liability company, limited liability partnership, general or limited partnership, professional Corporation, joint venture, doing business as name or venture, association, business trust, or non-publicly-traded corporation*
6.  List of Names/Addresses of all property owners within 200 feet of perimeter of site, obtained from the Land Use Board Office. *Application must include a map of tax lots noting 200 foot radius line as applicable, measuring from all points on property line, not from center of site, (excluding public roadways, right of ways, public utility or public entity). Names and addresses must be placed on stamped #10 envelopes, without return address. Do not use a postage meter.*
7.  Completed List of Questions in the application package to be answered and returned with the package.
8.  One (1) copy of **architectural plans** showing dimensions and height of existing and Proposed construction. (see item 7 for required information). **Plans must be signed and sealed by a New York State Licensed Architect or Professional Engineer.** (*Since the review is concerned with exterior design, it is preferable to have your architect present.*)

Drawing Name \_\_\_\_\_ Date: \_\_\_\_\_

Prepared by: \_\_\_\_\_

- 9. All plans shall include the following:** All plans shall be for construction purposes (ie. Building Department submission) and must include the following information on the plan:
- A vicinity map;
  - Floor Plans and Sections;
  - Elevations with exterior materials and color schemes. (Samples must be furnished).
  - All exterior mechanical equipment and signs, if incorporated in the proposal. (i.e. air conditioning)
  - Dimensions and elevations to scale of existing building showing relationships to proposed alterations/additions and dimensions. Label windows, doors and all distinguishing features. (Please provide the same information for buildings within one hundred (100') feet of new structure).
  - Provide photographs of the building and surrounding area at the meeting.
  - Gutters and leaders and disposition of runoff must be indicated on all plans.

**10. Provide One Check, for all applicable fees, made payable to "Town of Orangetown" Please calculate the total amount based on the list provided below:**

All Reviews Standards Fee: Residential District:	\$125.00
Legal Notice Advertisement Fee:	\$150.00

*(For each time an advertisement or re-advertisement has to be published):*  
 Effective February 4th, 2015 as per **Town Board Resolution No. 45, January 28, 2015**

For HABR Consultation only One Check in the amount of \$100.00

- 11.** Submit completed application and fees to the Board Clerk to be processed.

**SUBMITTED BY:** \_\_\_\_\_ **DATE RECEIVED BY BOARD CLERK:** \_\_\_\_\_.

By signing below, the applicant/agent agrees that they have completed and supplied all items listed above.

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

ONCE DEEMED COMPLETE BY BUILDING INSPECTOR  
APPLICANT SHALL SUBMIT THE FOLLOWING:

- 10 copies** of all Plans signed and sealed by the appropriate New York State Professional. (Same plans submitted and reviewed by the Building Inspector). List type of plans submitted.
- All drawings** shall be submitted in **PDF format** via email to [Kbettmann@orangetown.com](mailto:Kbettmann@orangetown.com)

**Once all items are received, project will then be assigned to the appropriate hearing date by the Board Clerk and the applicant will be notified.**

*Once scheduled for a meeting date, all applicants are required to erect signs containing information regarding the public hearing on every lot corner and once every 100 feet facing each public street on which the property abuts, see Chapters 21 and 21A of the Town of Orangetown Town Code. Such signs shall be obtained from the Historic Areas Board of Review Office. The Board Clerk will notify the applicant when signs are ready to be picked up from the HABR office.*

# **HISTORICAL AREAS BOARD OF REVIEW**

## **(HABR)**

Town of Orangetown Building Department  
26 Orangeburg Road  
Orangeburg, New York 10962  
(845) 359-8410, ex 4316  
www.orangetown.com

### **2025 MEETING DATES**

**2<sup>ND</sup> Tuesday of every month**  
(except as otherwise noted\*\*)

**Land Use Board Meeting Room, North West Corner**  
**26 Orangeburg Road, Orangeburg, NY**

**All meetings start at 7:00 PM.**

**A building permit denial must be included with your application.**  
**Please ask about the process of obtaining abutting property owners.**

### **HABR MEETING DATES**

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January 14  
February 11  
March 11  
April 8  
May 13  
June 10  
July 8  
No Meetings in August  
September 9  
October 14  
November 4\*\*  
December 9

#### **NOTE THE FOLLOWING:**

- The Town Code of the Town of Orangetown, Chapter 12, entitled "Historic Areas", (adopted by the Town Board on 7/28/1997), governs the historic area in Palisades and Tappan, and is available for inspection in person at the office or online at [www.orangetown.com](http://www.orangetown.com).
- In the Historic Areas of the Town of Orangetown, Historical Areas Board of Review (HABR) approval is required for all construction as follows;
  - A. Work requiring a building permit affecting the exterior of the property, and
  - B. Any exterior changes to buildings constructed prior to 1918.
- PLEASE BE AWARE THAT THE APPLICATION PROCESS TAKES APPROXIMATELY 21 DAYS FROM THE TIME OF SUBMISSION TO A HEARING DATE.
- Bring building material samples to the meeting.

For more information, please contact the Clerk to HABR at (845)359-8410.

# Historical Areas Board of Review(HABR)

Town of Orangetown Building Department  
26 Orangeburg Road, Orangeburg,  
New York 10962

PROPERTY ADDRESS: \_\_\_\_\_ Section/Block/Lot: \_\_\_\_\_

1. Provide a narrative summary explaining the project and including any facts pertaining to this project which applicant feels would be of interest to the Board;
2. Architectural Plans;
3. It is preferable to the HABR if the Architect would appear at the meeting with the Applicant.
4. Please bring SAMPLES of building materials to the meeting.
5. Materials checklist: (please provide the brand name, type, style, model and color numbers):

	COLOR	MATERIAL	MANUFACTURER
Roof:			
Siding:			
Decorative Siding:			
Soffits & Fascia:			
Gutters & Leaders:			
Windows:			
Trim:			
Shutters:			
Front Door:			
Back Door:			
Garage Door(s):			
Other Door(s):			
Lighting:			
Lighting:			
Stone or Rock being used on Structure:			
Stone or Rock being used on walkway(s):			
Other:			

**OFFICE OF BUILDING, ZONING AND PLANNING  
ADMINISTRATION AND ENFORCEMENT  
TOWN OF ORANGETOWN  
MEMORANDUM**

Date: July 18, 2007

To: Deputy Building Inspector  
Assistant Building Inspectors

From: John Giardiello, P.E. & Director

Subject: H.A.B.R. Board Submissions

CC: Douglas Schmidt, Building Plans Examiner  
Cheryl Coopersmith, Chief Clerk  
Deborah Arbolino, Adm. Aide  
Rima DelVecchio, Clerk  
H.A.B.R. Members  
William Reddy, Deputy Town Attorney

Yesterday I met with H.A.B.R. Chairperson Margaret Rasso to discuss a recent issue that confronted the Board. As you know the purpose and intent of the H.A.B.R. local law is to protect the places, buildings and other objects and thereby preserve the overall historic look and character within the Tappan and Palisades Historic areas. In order for the Board to review and approve (or disapprove) an application, they must have a proper submission.

A proper submission consists of the following:

1. A vicinity map.
2. Floor plans and sections.
3. All elevation views with exterior materials and color schemes
4. All exterior mechanical equipment and signs if incorporated in the proposal.
5. Dimension and elevations, to scale, shall be labeled on the plans of the proposed building, the existing building showing relationships to proposed alterations/additions (if applicable) and all distinguishing features. The same information shall be provided for buildings within 100 feet of the new structure. The applicant shall provide photographs of the building and the surrounding area at the H.A.B.R. meeting.
6. As with all other building permit applications, the disposition of Stormwater runoff, rain gutters and leaders shall be indicated on all applicable plans such as the site plan or plot plan and elevation views of the building of structure being proposed.

Please assure the applicant has complied with the above items before referring the application to the Board. Also, tell the applicant to bring building material samples and photographs of the property, existing buildings and surrounding areas to the H.A.B.R. meeting. You can furnish the applicant with a copy of this memorandum so they have the minimum plan submission requirements.

Thank you for your cooperation in this matter.

JG:jcf

**CONTACT PERSON INFORMATION SHEET:**

**NAME:** \_\_\_\_\_

**MAILING ADDRESS:**

_____	_____	_____
Street number	(PO Box)	Street Name
_____	_____	_____
City	State	Zip Code

**TELEPHONE #:** \_\_\_\_\_

**CELL PHONE #:** \_\_\_\_\_

**FAX #:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**Relation to project:** \_\_\_\_\_

Name of Municipality: TOWN OF ORANGETOWN

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

**LAND USE BOARD APPLICATION**

*Please check all that apply:*

<input type="checkbox"/> Commercial <input type="checkbox"/> <b>Planning Board</b> <input type="checkbox"/> <b>Zoning Board of Appeals</b>  <input type="checkbox"/> Subdivision <input type="checkbox"/> Number of Lots <input type="checkbox"/> Site Plan <input type="checkbox"/> Conditional Use  <input type="checkbox"/> Special Permit <input type="checkbox"/> Variance <input type="checkbox"/> Performance Standards Review <input type="checkbox"/> Use Variance <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Residential <input type="checkbox"/> <b>Historical Board</b> <input type="checkbox"/> <b>Architectural Board</b>  <input type="checkbox"/> Consultation <input type="checkbox"/> Pre-Preliminary/Sketch <input type="checkbox"/> Preliminary <input type="checkbox"/> Final <input type="checkbox"/> Interpretation
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**PERMIT#:** \_\_\_\_\_  
**ASSIGNED**  
**INSPECTOR:** \_\_\_\_\_  
 Referred from Planning Board: YES / NO  
 If yes provide date of Planning Board meeting: \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_  
\_\_\_\_\_

**Tax Map Designation:**  
Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_  
Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_

**Directional Location:**  
On the \_\_\_\_\_ side of \_\_\_\_\_, approximately \_\_\_\_\_ feet \_\_\_\_\_ of the intersection of \_\_\_\_\_, in the Town of ORANGETOWN in the hamlet/village of \_\_\_\_\_.

<b>Acreage of Parcel</b> _____ <b>School District</b> _____ <b>Ambulance District</b> _____ <b>Water District</b> _____	<b>Zoning District</b> _____ <b>Postal District</b> _____ <b>Fire District</b> _____ <b>Sewer District</b> _____
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**Project Description:** *(If additional space required, please attach a narrative summary.)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.  
Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

# APPLICATION REVIEW FORM

**Applicant:** \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number (Post Office) City State Zip Code

**Property Owner:** \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number (Post Office) City State Zip Code

**Engineer/Architect/Surveyor:** \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number (Post Office) City State Zip Code

**Attorney:** \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number (Post Office) City State Zip Code

**Contact Person:** \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number (Post Office) City State Zip Code

## GENERAL MUNICIPAL LAW REVIEW:

This property is within 500 feet of:  
(Check all that apply)

**IF ANY ITEM IS CHECKED, A REVIEW MUST BE DONE BY THE ROCKLAND COUNTY COMMISSIONER OF PLANNING UNDER THE STATE GENERAL MUNICIPAL LAW, SECTIONS 239 L, M, N, AND NN.**

\_\_\_\_\_ State or County Road  
\_\_\_\_\_ Long Path  
\_\_\_\_\_ Municipal Boundary

\_\_\_\_\_ State or County Park  
\_\_\_\_\_ County Stream  
\_\_\_\_\_ County Facility

List name(s) of facility checked above:

\_\_\_\_\_  
\_\_\_\_\_

### Referral Agencies:

\_\_\_\_\_ RC Highway Department  
\_\_\_\_\_ RC Drainage Agency  
\_\_\_\_\_ NYS Dept. of Transportation  
\_\_\_\_\_ NYS Thruway Authority  
\_\_\_\_\_ Adjacent Municipality \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ RC Division of Environmental Resources  
\_\_\_\_\_ RC Dept. of Health  
\_\_\_\_\_ NYS Dept. of Environmental Conservation  
\_\_\_\_\_ Palisades Interstate Park Commission



# APPLICATION REVIEW FORM

## FILL IN WHERE APPLICABLE.

( IF THE FOLLOWING DOES NOT APPLY PLEASE MOVE ON TO THE NEXT PAGE )

### If subdivision:

- 1) Is any variance from the subdivision regulations required? \_\_\_\_\_
- 2) Is any open space being offered? \_\_\_\_ If so, what amount? \_\_\_\_\_
- 3) Is this a standard or average density subdivision? \_\_\_\_\_

### If site plan:

- 1) Existing square footage \_\_\_\_\_
- 2) Total square footage \_\_\_\_\_
- 3) Number of dwelling units \_\_\_\_\_

If **special permit**, list special permit use and what the property will be used for.

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### Environmental Constraints:

Are there **slopes greater than 25%**? If yes, please indicate the amount and show the gross and net area \_\_\_\_\_

Are there **streams** on the site? If yes, please provide the names. \_\_\_\_\_

Are there **wetlands** on the site? If yes, please provide the names and type:

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### Project History:

Has this project ever been reviewed before? \_\_\_\_\_

If so, provide a narrative, including the list case number, name, date, and the board(s) you appeared before, and the status of any previous approvals.

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List tax map section, block & lot numbers for all other abutting properties in the same ownership as this project.

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**APPLICATION REVIEW FORM**

**Applicant’s Signature and Certification**

State of New York     )  
County of Rockland   ) SS.:  
Town/Village of \_\_\_\_\_)

I, \_\_\_\_\_ hereby depose and say that all the above statements contained in the papers submitted herewith are true.

Signature: \_\_\_\_\_

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

SWORN to before this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

**Owner/Applicant’s Consent Form to Visit Property**

I, \_\_\_\_\_, owner/applicant of the property described in the application submitted to the town/village board, planning board, zoning board of appeals and/or supporting staff, do hereby give permission to members of said boards and/or supporting staff to visit the property in question at a reasonable time during the day.

\_\_\_\_\_  
Owner/Applicant Signature

SWORN to before this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

**APPLICATION REVIEW FORM**

**Affidavit of Ownership/Owner's Consent**

State of New York     )  
County of Rockland   ) SS.:  
Town/Village of \_\_\_\_\_)

I, \_\_\_\_\_ being duly sworn, hereby depose and say  
that I reside in the county of \_\_\_\_\_ in the state of  
\_\_\_\_\_.

I am the (\* \_\_\_\_\_) owner in the fee simple of premises located  
at: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ described in a certain deed of said premises recorded in the Rockland County  
Clerk's Office in Liber \_\_\_\_\_ of conveyances, page \_\_\_\_\_.

Said premises have been in my/its possession since \_\_\_\_\_.  
Said premises are also known and designated on the Town of \_\_\_\_\_.  
Tax Map as: section: \_\_\_\_\_ block: \_\_\_\_\_ lot(s): \_\_\_\_\_.

I hereby authorize the within application on my behalf and that the statement of fact contained in said  
application are true, and agree to be bound by the determination of the board.

Owner Signature: \_\_\_\_\_

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

SWORN to before this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

*\*If owner is a corporation, fill in the office held by deponent and name of corporation, and provide a  
list of all directors, officers and stockholders owning more that 5% of any class of stock.*

# APPLICATION REVIEW FORM

## Affidavit Pursuant to Section 809 of the General Municipal Law

State of New York     )  
County of Rockland    ) SS.:  
Town/Village of \_\_\_\_\_)

I, \_\_\_\_\_, being duly sworn, hereby depose and say that all the following statements and the statements contained in the papers submitted herewith are true and that the nature and extent of any interests set forth are disclosed to the extent that they are known to the applicant.

1. Print or type full name and post office address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certifies that he/she is owner or agent of all that certain lot, piece or parcel of land and/or building described in this application **and if not the owner that he/she has been duly and properly authorized to make this application and to assume responsibility for the owner** in connection with this application for the relief set forth:

2. To the \_\_\_\_\_ of the Town/Village of \_\_\_\_\_, Rockland County, New York:

- Application, petition or request is hereby submitted for:
- Variance or modification from the requirement of Section \_\_\_\_\_;
  - Special permit per the requirements of Section \_\_\_\_\_;
  - Review and approval of proposed subdivision plat;
  - Exemption from a plat or official map;
  - An order to issue a certificate, permit or license;
  - An amendment to the Zoning Ordinance of Official Map or change thereof;
  - Other (*explain*) \_\_\_\_\_;

To permit construction, maintenance and use of \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Premises affected are in a \_\_\_\_\_ zone and from the Town of \_\_\_\_\_

Tax map, the property is known as Section \_\_\_\_\_, Block, \_\_\_\_\_, Lot(s) \_\_\_\_\_.

# APPLICATION REVIEW FORM

4. There is no state officer, Rockland County officer or employee or town/village officer or employee nor his or her spouse, brother, sister, parent, child or grandchild, or a spouse of any of these relatives who is the applicant or who has an interest in the person, partnership or association making this application, petition or request, or is an officer, director, partner or employee of the applicant, or that such officer or employee, if this applicant is a corporation, legally or beneficially owns or controls any stock of the applicant in excess of 5% of the total of the corporation if its stock is listed on the New York or American Stock Exchanges; or is a member or partner of the applicant, if the applicant is an association or a partnership; nor that such town/village officer or employee nor any member of his family in any of the foregoing classes is a party to an agreement with the applicant, express or implied, whereby such officer or employee may receive any payment or other benefit, whether or not for service rendered, which is dependent or contingent upon the favorable approval of this application, petition or request.

5. To the extent that the same is known to your applicant, and to the owner of the subject premises **there is disclosed herewith** the interest of the following officer or employee of the State of New York or the County of Rockland or of the Town/Village of ORANGETOWN in the petition, request or application or in the property or subject matter to which it relates:

**(IF NONE, SO STATE)**

- a. Name and address of officer or employee \_\_\_\_\_
- b. Nature of interest \_\_\_\_\_
- c. If stockholder, number of shares \_\_\_\_\_
- d. If officer or partner, nature of office and name of partnership \_\_\_\_\_
- e. If a spouse or brother, sister, parent, child, grandchild or the spouse of any of these blood relatives of such state, county or town/village officer or employee, state name and address of such relative and nature of relationship to officer and employee and nature and extent of office, interest or participation or association having an interest in such ownership or in any business entity sharing in such ownership. \_\_\_\_\_
- f. In the event of corporate or limited liability company ownership: A list of all directors, officers and stockholders of each corporation or members of each limited liability company owning more than five (5%) percent of any class of stock or more than five (5%) percent beneficial interest, must be attached, if any of these are officers or employees of the State of New York, or of the County of Rockland, or of the Town of Orangetown.

6. I do hereby depose and say that all the above statements and statements contained in the papers submitted herewith are true, knowing that a person who knowingly and intentionally violates this section is guilty of a misdemeanor.

Signature: \_\_\_\_\_

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

\_\_\_\_\_

SWORN to before this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public



Clerk of Boards Review:  
Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Building Dept. (Accepted By):  
Date: \_\_\_\_\_ Initials: \_\_\_\_\_

**ENTITY DISCLOSURE FORM**

TOWN OF ORANGETOWN  
Office of Building, Zoning, Planning Administration and Enforcement (OBZPAE)  
26 Orangeburg Road  
Orangeburg, New York 10962  
Tel: (845) 359-8410 ext. 4330  
Website: [www.orangetown.com](http://www.orangetown.com)

***THIS FORM MUST ACCOMPANY ALL LAND USE APPLICATIONS SUBMITTED BY AN ENTITY AS DEFINED IN CHAPTER 43, ARTICLE 16 OF THE TOWN CODE OF THE TOWN OF ORANGETOWN.***

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PROJECT NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

TAX LOT ID: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_

Land Use Application/Brief Description of Project: \_\_\_\_\_

\_\_\_\_\_

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**PART ONE:**

1. Pursuant to Section Chapter 43, Article 16 of the Town Code, the disclosure of the names and address of all persons or entities owning any interest or controlling position of any limited liability company, limited liability partnership, general or limited partnership, professional corporation, joint venture, doing business as name or venture, association, business trust, or non-publically traded corporation, (hereinafter referred to as the "Entity") is required of both the owner and applicant (if not the same) when filing a land-use application.
2. Set forth the names of all members, officers, shareholders, directors, partners or other authorized persons of the Entity for the past year from the date of filing of any land-use board application.
3. Attach a copy of all Entity documents filed with the NYS Secretary of State, or in any other State of formation, including:
  - a. All records regarding membership interests in the Entity;
  - b. Records regarding the transfer of membership interests since the date of formation.
4. If a member of the Entity is not a natural person, please provide the name(s) and address(es) for the of the non-natural person member of that Entity, and provide the formation filing documents for such Entity.
5. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Entity:	
Address:	
Telephone Number:	
E-Mail Address:	
State/Date of Formation:	
Contact Person:	

**PART TWO:**

6. Please list all persons, officers, limited or general partners, directors, members, shareholders, managers, authorized persons, beneficial owners, and any others with any interest in or with the above referenced entity.
7. Please NOTE that an "authorized person" means an individual or entity, whether or not a shareholder, member, officer or director, or person identified by any other title, who is authorized to act, solely or in conjunction with others, on behalf of or for the Entity.
8. List all persons with a membership or voting interest or controlling position in the Entity. Please provide that parties' business or personal address and telephone number, email address and other contact information.
9. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Individual	Address	Telephone	Email	Interest or Role in Entity
1.				
2.				
3.				
4.				
5.				
6.				



PART THREE:

- 10. Is any person identified in Part TWO currently employed by or hold a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? *Please circle:* YES NO
- 11. Is any person identified in PART TWO the spouse, sibling, parent, child, or grandchild of any individual who is employed by or holds a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? *Please circle:* YES NO
- 12. Does any person identified in PART TWO perform services for or have a contract, or employed by an entity that has a contract to perform services for the Town of Orangetown? *Please circle:* YES NO
- 13. If the answer is "YES" to any of the above, please provide a supplement sheet and list every Board, Department, Office, agency or other position with the Town of Orangetown in which the party has a position, paid or unpaid, or provides services for, and identify the agency, title and date of hire.

PART FOUR:

- 14. The information contained herein shall be updated with the Town of Orangetown Office of Building Clerk and Clerk of the Boards no later than THIRTY (30) DAYS after any change in information.
- 15. **NOTE: Any person who (a) provides false or fraudulent beneficial ownership information; (b) willfully fails to provide complete or updated information; or (c) during the application process, fails to obtain or maintain credible, legible and updated beneficial ownership information shall be subject to suspension of any pending application by the applicant entity, or a "stop work" order on any work relating to the application, or both, in addition to any other applicable penalties under the Town Code, or State and Federal Statute, or both.**

STATE OF NEW YORK            )  
   ) ss.:  
 COUNTY OF ROCKLAND        )

I, \_\_\_\_\_, being duly sworn, deposes and says that I am (Title) \_\_\_\_\_, an active or qualified member of the \_\_\_\_\_, a business duly authorized by law to do business in the State of New York, and that the statements made in the foregoing Affidavit are true, accurate and complete. I further understand that Land Use Applications may have a significant impact upon the health, safety and general welfare of the Town of Orangetown and its inhabitants and visitors; and that the Town Board is required to be certain that anyone with an interest or controlling position of an Entity, who applies for any land use approval or permission must have no conflict of interest as that term is described in NYS Town Law, as well as NYS General Municipal Law, and that the disclosure of any officers, directors, members, shareholders, managers, authorized persons, beneficial owners, any other controlling parties with the above entity, and all persons with a membership or voting interest in the entity is required to be made in any land use application or request for any approval from the Town, to be certain no conflict of interest exists and without the disclosure, a full review of any conflict cannot take place.

\_\_\_\_\_  
 Signature

Sworn to and subscribed in my presence

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
 NOTARY PUBLIC