

INDUSTRIAL USE COMMITTEE APPLICATION

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

APPLICATION CHECKLIST: **THE FOLLOWING ITEMS ARE REQUIRED IN ORDER TO ACCEPT AN APPLICATION:**

Date: _____ Section: _____ Block: _____ Lot: _____

Project Name: _____

Project Address _____

1. A signed and dated completed Application.
2. A copy of the Building Permit Denial Application, signed by the Director of the Department.
3. Agents must have written authorization from the owner/applicant to appear in front of the Committee.
4. Complete Environmental Assessment form, if needed.
5. Submit in quadruplet (4) copies of the **survey plan**, scale, (1 inch = 30 feet minimum) showing all zoning bulk, bulk chart and lot dimensions, size and use of all existing and proposed structures, north arrow and vicinity map. **Plans must be signed and sealed by a New York State Professional Engineer and/or Land Surveyor.**
6. Submit in quadruplet (4) copies of a completed Resume of Operations and Equipment Form which provides a description of the industrial user's operations, which shall be prepared, and signed, by a person who is qualified to answer the questions and submit documentation on behalf of the applicant.
7. Submit in quadruplet (4) copies of a plan of the proposed construction, installations or development, including a description of the proposed machinery, operations, products and specifications for the mechanism and techniques to be used or operated to comply with the applicable performance standards set forth in §4.1, in accordance with rules prescribed by the IUC specifying the type of information required in such plans and specifications.
8. Submit an affidavit by the applicant acknowledging his or her understanding of the applicable performance standards and agreement to conform with same at all times.
9. **Check** made payable to "Town of Orangetown":
Performance Standards: \$400.00

SUBMITTED BY: _____ **DATE RECEIVED BY OBZPAE:** _____.

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

Print Name: _____ **Signature:** _____

Email Address: _____

2. All applications shall also be submitted in **PDF format** via email to obzpa@orangetown.com.

Once all items are received and deemed complete, the project will then be assigned to the appropriate meeting date by the IUC Chairperson and the applicant will be notified via email.

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: _____

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

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, industrial use committee 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.

SWORN to before this

Owner/Applicant Signature

_____ 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 acknowledge understanding of the applicable
requirements of the Town Code, 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;
- Performance Standards Review;
- 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

APPLICATION REVIEW FORM

Reimbursement for Professional Consulting Services

The Town/Village Board, Planning Board, Zoning Board of Appeals and Industrial Use Committee in the review of any application described above, may refer any such application presented to it to such engineering, planning, environmental or other technical consultant as such Board shall deem reasonably necessary to enable it to review such application as required by law. The charges made by such consultants shall be in accord with such charges usually made for such services in the metropolitan New York region or pursuant to an existing contractual agreement between the town/village for the cost of such consultant services upon receipt of the bill. Such reimbursement shall be made prior to final action on the application.

Permits will not be issued and site plan or subdivision will not be signed until bill is paid in full.

Applicant's Signature: _____

SWORN to before this

_____ day of _____, 20_____

Notary Public

Town of Orangetown Resume of Operations and Equipment

Application Instructions

This application is to define equipment and operations for a new or existing facility or process to determine conformance with the Town of Orangetown Performance Standards. The information herein is required for the Town Industrial Use Committee to make such determination regarding the Applicant's proposed use of the land and buildings.

Do not start work before obtaining necessary permits to avoid subjecting the Applicant and contractors engaged in The Project to enforcement action, which could include: 1) civil or criminal court action, or both; 2) fines; 3) an order to remove structures or materials or perform other remedial action; or 4) both a fine and an order.

If the facility has existing and applicable local, county, state or federal permits, licenses or certifications, copies of such are to be listed below and included in this application.

PROJECT NAME:

Type of Permit <small>e.g., air, water, waste, etc.</small>	Agency <small>local, county, state, federal</small>	Submitted Paper Copy? Y or N	URL or Website Information

The Applicant must provide information and background showing the derivation of anticipated air emissions, water discharges and waste disposal, appropriate to the Projects' applicability to Town Performance Standards.

This PDF document is based on Microsoft's Excel format converted to PDF. Data can be entered directly into the areas designated, or the application may be printed and filled in by hand. To fill in electronically, open this document in Adobe Acrobat, click on "Typewriter" under "Tools", and begin typing. Font size is restricted. Additional pages can be included in the application.

Town of Orangetown
Resume of Operations and Equipment

This Application is required for the Town to make a determination regarding the applicant's proposed use of the land and buildings. Attach Additional Sheets as Needed.

Certification and Identification Information

Type of Action/Application: Place an "X" to the left of the appropriate categories.

<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Minor Action	<input type="checkbox"/> Significant Modification <input type="checkbox"/> Administrative Amendment <input type="checkbox"/> Major Action	<input type="text"/> Other:
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PROJECT NAME:	
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein in this application, and information in support of it, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.	
Responsible Official: Print	Title:
Signature:	Date:
Phone:	Email:

Facility / Owner Information

Facility Name:	
Facility Address:	
Owner Name:	Business EIN:
Street:	ZIP:
City/Town:	State/Province:

Ownership:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	
Place "X" to left of box	<input type="checkbox"/> Partnership	<input type="text"/> Other:	

Owner/Firm/Facility Contact

Name:	Phone:
Street Address:	Fax:
City/Town:	ZIP:
State/Province:	Country:
Affiliation:	Title:
Email:	

Town of Orangetown
Resume of Operations and Equipment

PROJECT NAME:

BUILDING & PROPERTY

Property Footprint, total sq. ft./acres	
Footprint, Largest structure, sq. ft.	
Highest 'Story' on Site	
Total No. Structures	

Parking sq. ft.	
No. Parking Spots	
Full Time Employees	
Part Time Employees	

STATE ENVIRONMENTAL QUALITY REVIEW

This application may require completing and submitting to the Town only, the New York State Department of Environmental Conservation's Short Environmental Assessment Form, Appendix B to 6NYCRR 617.20. Some of this information may be duplicated herein. This form can be accessed at:

http://www.dec.ny.gov/docs/permits_ej_operations_pdf/seafpartone.pdf

The applicant must provide floor plans showing location of equipment, work stations, vents, exhausts, chimneys or stacks, and associated industrial processes.

OPERATIONS

Primary Line(s) of Business:	NAICS:	SIC:
1.	1.	1.
2.	2.	2.
3.	3.	3.
Week Days Operating		
No. Shifts per Day		
Hours per Day Operating		

Principal Products of Manufacture/Assembly/Business

1.
2.
3.
4.
5.

Town of Orangetown
Resume of Operations and Equipment

PROJECT NAME: _____

NOISE

Based on descriptive decibel levels of Table A (following page), decibel corrections shown below as appropriate, and in accordance with the Town's Noise Performance Standard 4.181, evaluate the noise level for the processes you list below.

When appropriate, "frequency band cycles" as described in the Town's Noise Performance Standard will be evaluated by the facility in the event of non-compliance with levels proposed for this project. The Town may request this evaluation during the application process if more complex noise patterns are expected.

Type of Operation of Character of Noise	Decibel Correction
Daytime operation only	Plus 5
Noise source operates less than 20% of any one hour period	Plus 5
Noise source operates less than 5% of any one-hour period	Plus 10
Noise source operates less than 1% of any one-hour period	Plus 15
Noise of impulsive character (hammering, etc.)	Minus 5
Noise of periodic character (hum, screech, etc.)	Minus 5

Use dB categories in Table A following page	Noise Level/Range Anticipated Outdoor:			
'Loudest' Producers of Noise Include construction and process operations.	During Time of Busiest Activity	During Time of Slowest Activity	Frequency per day or Specific Time Ranges	Duration, denote hours or minutes
1.				
2.				
3.				
4.				
5.				

VIBRATION

It is understood that the applicant is familiar with, and anticipates compliance with, the Town's Vibration Performance Standard, 4.171, during project construction and ultimate project operations. Any anticipated aberrations from this expectation should be detailed below.

Town of Orangetown
Resume of Operations and Equipment

TABLE A
Decibel Levels

0	healthy hearing threshold
10	a pin dropping
20	rustling leaves; quiet rural area, nighttime
30	whisper, faint; quiet suburban area, nighttime
40	babbling brook, bird calls; quiet urban area, nighttime; computer
50	light traffic; quiet urban area, daytime; refrigerator; residential air conditioner @ 50'
60	conversational speech @ 3'; air conditioner; heavy traffic @ 300'
70	shower; living room music; dishwasher
75	toilet flushing; vacuum cleaner; gas lawnmower @ 100', commercial area
80	alarm clock; garbage disposal; noisy urban area, daytime
85	passing diesel truck; snow blower
90	squeeze toy; lawn mower, food blender, motorcycle @ 25'; arc welder; diesel truck @ 50' @ 50 mph.
95	inside subway car; food processor; belt sander
100	motorcycle (riding); loud auto horn @ 10'; lawn mower @ 3'; handheld drill
105	sporting event; table saw

110	rock band; jackhammer, jet flyover @ 1000 ft.
115	emergency vehicle siren; riveter
120	thunderclap; oxygen torch
125	balloon popping
130	peak stadium crowd
135	air raid siren, near jet engine
140	jet engine at takeoff
145	firecracker
150	fighter jet launch
155	cap gun
160	shotgun
165	.357 magnum revolver
170	safety airbag
175	howitzer cannon
180	rocket launch
194	sound waves become shock waves

Most noise levels are given in dBA, which are decibels adjusted to reflect the ear's response to different frequencies of sound. Sudden, brief impulse sounds, like many of those shown at 120 dB or greater, are often given in dB (no adjustment).

30 faint

50 moderate

70 loud

90 very loud

120 deafening

130 threshold of pain

PROJECT NAME:

Permits and Applicable Local, County, State & Federal Regulations

Does the new or modified facility, process(es) or equipment require ANY additional permits, licenses, certifications or other authorizations under local, county, state or federal jurisdiction, or adherence to the regulations below? If so, list the main applicable regulatory parts for each category.

For example, NYSDEC Air State Facility Permit: Part 201-5; industrial wastewater discharge, State Pollutant Discharge Elimination System (SPDES), Part 750; large gas burning engines, NSPS Subpart JJJJ.

Answers in the positive may cause the Town to only conditionally approve this project until these other requirements are met. Additional information and specificity of regulations may be required. It is the applicant's responsibility to provide proof of evidence of meeting all requirements.

AIR*

EPA New Source Performance Standards

NYSDEC:

Registration

Air State Facility Permit

Federal Title V Major Facility Permit

PRIMARY APPLICABLE REGULATIONS

WASTE**

Pesticide Control

Solid & Hazardous Waste

Radiation

Mineral Resources & Mined Land Reclamation

Noise from Heavy Motor Vehicles

RESOURCE MANAGEMENT***

Land Use

Mineral Resources

Invasive Species

Real Property and Land Acquisitions

Water Regulation

WATER****

All other water applicable matters

GENERAL

State Environmental Quality Review

New York State Department of Health

Uniform Procedures per 6NYCRR 621.1

NYS Department of State

Additional

* <http://www.dec.ny.gov/regs/2492.html>

** <http://www.dec.ny.gov/regs/2491.html>

*** <http://www.dec.ny.gov/regs/2490.html>

**** <http://www.dec.ny.gov/regs/2485.html>

Town of Orangetown
Resume of Operations and Equipment

PROJECT NAME:

Combustion Sources

Combustion Source (engine, turbine, boiler, etc.)	No. of Units	Equipment Rating List HP, KW, MMBtu/hr, CFM with units	Fuels (e.g., natural gas, fuel oil, distillate or residual oil, waste oil, wood)

Processes

Will any process, including combustion, use or storage, disposal, discharge, emission, or release to the environment, be applicable and/or reportable to:

*

- EPA Greenhouse Gas Reporting
- EPA Toxic Release Inventory
- National Emission Standards for Hazardous Air Pollutants
- High Toxicity Air Contaminants per NYSDEC Part 212-2.2 Table 2
- Emergency Planning and Community Right-to-Know Act (EPCRA)
- Tier II NYS Emergency Response Commission
- Solid Waste
- Hazardous Waste
- FHWA or NYSDOT
- SPDES or NPDES

* Mark with an 'X' those that are applicable.

Chemical Characterization Codes

Table B

Use these codes to characterize chemicals and chemical products.

Does any operation involve the use of any of the following:

Y or N

- B explosive and blasting agents
- C poison: gas,g; liquid,l; solid,s
- D irritant
- E flammable liquid
- F flammable solid
- H flammable gas: specify propane and/or butane
- H-a flammables, NOS
- I oxidizer
- J organic peroxide
- K combustible liquid
- RA radioactive material
- M corrosive material
- N "dangerous when wet" material
- O etiological material
- P combustible fibers

Does any operation consist of the following:

- Q produces dust subject to explosion or spontaneous combustion
- R product poisons fumes or gases
- T spray operations
- U fuel dispensing
- V propane gas forklifts
- W any other operation which may present a fire, explosive, radiological or other hazard

If none of the above, identify substances as:

- A aerosol
- G gas
- L liquid
- S/P solid/powder
- S/L slurry

Chemical Bulk Inventory

PROJECT NAME:

SINGLE, NON-MIXTURE CHEMICALS Top 5 by Amounts Used/Stored	CAS Identification*	Table B Characterization Code List all that apply	Yearly Use/Stored (list gallons or pounds)
1.			
2.			
3.			
4.			
5.			

Is there any mixing on-site of any combination of single, bulk substances and/or purchased mixtures? Indicate YES or NO

Identify <u>any</u> on-site, single non-mixture chemical that is:		
Known Human Carcinogen - KHC Probable Human Carcinogen - PrHC Possible Human Carcinogen - PHC Other - Indicate	Carcinogen Characteristic[#]	Yearly Consumption (gallons or pounds)
1.		
2.		
3.		

CAS Identification*

https://ofmpub.epa.gov/sor_internet/registry/substreg/searchandretrieve/substancesearch/search.do?search=&substanceName=ethyl%20ketone&substanceNameScope=contains&substanceType=-1&hasComponents=both

[#] As would be expected to be found in agreement among bodies such as the National Academy of Sciences, the U.S. Department of Health and Human Services' *Agency for Toxic Substance and Disease Registry*, the World Health Organization's *International Agency for Research on Cancer*.

Chemical Mixtures Inventory

PROJECT NAME:

PURCHASED CHEMICAL MIXTURES List Top Three By Amount Used or Stored, and % of top three components of each mixture, excluding water.	CAS Identification* & Percentage	Table B Characterization Code List all that apply	Yearly Used/Stored (include units: gallons, g, or pounds, p)
M1.	---		
a.			---
b.			---
c.			---
M2.	---		
a.			---
b.			---
c.			---
M3.	---		
a.			---
b.			---
c.			---

Identify any on-site chemicals in any mixtures that are:

- Know Human Carcinogen - KHC
- Probable Human Carcinogen - PrHC
- Possible Human Carcinogen - PHC
- Other - Indicate

**Carcinogen
 Characteristic**

**Yearly
 Used/Stored,**
 gallons or pounds

- 1.
- 2.
- 3.

Chemical Discharges

PROJECT NAME:

List raw material, or products, that emit to the atmosphere or discharge to land or water.	Does this material - or products they form - emit or discharge to a pollution control device? If so, list device(s).
SINGLE, NON-MIXTURE CHEMICALS	
1.	
2.	
3.	
4.	
5.	
6.	
7.	

CHEMICAL MIXTURES	
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Primary Process Descriptions

PROJECT NAME:

Describe Primary Processes:

Provide a facility blueprint, drawing or schematic showing locations of the processes described below.

**Characterization Codes from
Table B**

List all that apply

PP1

PP2

PP3

PP4

PP5

PP6

PP7

PP8

PP9

PP10

Control Systems

PROJECT NAME:

Describe control methods such as pollution and odor controls, fire alarm systems, automatic fire suppression devices such as sprinklers, portable fire extinguishers, and any other safety devices.

C1

C2

C3

C4

C5

C6

C7

C8

C9

C10

DEFINITIONS

Responsible official. A president, vice president, secretary, treasurer, general partner, proprietor, principal executive officer, ranking elected official, or any other person who performs policy or decision making functions and is authorized to legally bind a corporation, partnership, sole proprietorship, or government entity which operates a facility that is subject to the provisions of this Application. Whenever the term responsible official is used in this document or in any other Town regulations, it shall be deemed to refer to the “designated representative” with regard to all matters under this application.

Major action/project - actions for which permit applications are to be sent to the NYSDEC under 6NYCRR621.1.

Refer to: [https://govt.westlaw.com/nycrr/Document/l4ec443aacd1711dda432a117e6e0f345?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=\(sc.Default\)](https://govt.westlaw.com/nycrr/Document/l4ec443aacd1711dda432a117e6e0f345?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default))

Minor Project - Projects as described under NYSDEC's Uniform Procedures, 6 CRR-NY 621.4

Refer to: [https://govt.westlaw.com/nycrr/Document/l4ec46aa7cd1711dda432a117e6e0f345?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=\(sc.Default\)](https://govt.westlaw.com/nycrr/Document/l4ec46aa7cd1711dda432a117e6e0f345?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default))

Modification means any change or amendment whatsoever to a permit that is currently in force, including permit transfer.

Research and Development activities. The primary purpose of such activities is to conduct research and development into processes and products, where such activities are conducted under the close supervision of technically trained personnel. Research and development activities do not include activities whose primary purpose is to produce commercial quantities of materials.

RESERVED

Additional Information or Explanations

|PROJECT NAME:

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

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.

PROJECT NAME: _____

PROPERTY ADDRESS: _____

TAX LOT ID: _____

NAME OF APPLICANT: _____

OWNER OF PROPERTY: _____

Land Use Application/Brief Description of Project: _____

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.				

