## **Town of Taylor Planning Board**

## **Application for Sub-Division**

P.O. Box 197, Cincinnatus, NY 13040 SUB-DIVISION NAME	3 copies needed for application process
Applicant's Name(s)	Phone #
	E-Mail:
Address:	
Check Box Applicant's Title:( ) Licensed Surveyor, ( )	Engineer, ( ) Architect, ( ) Owner, ( ) Developer
Surveyor's Name:	Phone #
Property Owner(s) Name:	Phone #
Address:	
Location of Sub-Division Road:	Total Acreage:
Tax Map #	Proposed Lots:
Simple Sub-division( ) Minor Sub-division( ) Two lots Three Lots	Major Sub-division( ) **See Fee Schedule Four + Lots
Are there any easements or restrictions on property du Flood Plain Yes ( ) No ( ) Historic District Yes ( ) No ( )	Wetland Yes ( ) No ( ) Land Use Commitments Yes ( ) No ( )
List the number of existing buildings with gross dim	ensions in feet.
If Yes, attached a description of revisions.	ions to to the sub-division regulations? Yes ( ) No ( ) for them.
Owner Signature	Date
Applicant Signature	Date
Applicant Signature  Application Fee to be paid to Town Clerk \$  Action Taken: Approved ( ) Planning Board Denied ( ) Chairperson/	Received by