

**VILLAGE OF WOODBURY PLANNING BOARD  
AMENDMENT - SITE PLAN REVIEW AND APPROVAL  
APPLICATION FOR PUBLIC HEARING**

APPLICANT \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

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

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

ENGINEER OR SURVEYOR \_\_\_\_\_

\_\_\_\_\_

LOCATION OF PROPERTY \_\_\_\_\_

TAX MAP DESIGNATION: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

PROPOSED PROJECT: \_\_\_\_\_

**RULES AND REGULATIONS**

1. Fifteen **(15) sets** of collated **plans** must be submitted and **digital copy/PDF** via Email/CD
2. Public Hearings will not be scheduled until such time as the Planning Board deems appropriate.
3. **PRIOR TO AN APPEARANCE BEFORE THE PLANNING BOARD YOU WILL BE REQUIRED TO POST ESCROW IN THE AMOUNT DETERMINED BY THE PLANNING BOARD FOR CONSULTING FEES. IF ESCROW AMOUNT AT ANY TIME REDUCES TO LOWER THAN 20%, ADDITIONAL FEES MUST BE POSTED TO CONTINUE BOARD APPEARANCES.**
4. A public hearing is required on five (5) days published notice.
5. The meetings are the 1<sup>st</sup> & 3<sup>rd</sup> Wednesdays of every month. Please call this office to confirm your appearance on the agenda the Friday-Monday prior to these meeting days (845)928-6911 Ext 5

*PRINT APPLICANT NAME* \_\_\_\_\_

*APPLICANT SIGNATURE* \_\_\_\_\_ *Date:* \_\_\_\_\_

*PRINT PROPERTY OWNER NAME* \_\_\_\_\_

*PROPERTY OWNER SIGNATURE* \_\_\_\_\_ *Date:* \_\_\_\_\_

**VILLAGE OF WOODBURY  
PLANNING BOARD**

**AMOUNT OF ESCROWS**

**SUBDIVISIONS**

|                    |                           |
|--------------------|---------------------------|
| <b>Residential</b> | <b>\$3,000.00 per lot</b> |
| <b>Commercial</b>  | <b>\$5,000.00 per lot</b> |

**LOT LINE CHANGE**

|                    |                   |
|--------------------|-------------------|
| <b>Residential</b> | <b>\$2,500.00</b> |
| <b>Commercial</b>  | <b>\$5,000.00</b> |

**SITE PLAN APPROVAL**

**New Structure or Use**

**\$5,000.00 per acre and .50 per square feet of structure**

**Existing Structure or Use**

**\$3,500.00 per acre and .25 per square feet of structure**

**ARCHITECTURAL REVIEW BOARD**

|                    |   |
|--------------------|---|
| <b>Residential</b> | <b>\$1,500.00</b>                                       |
| <b>Commercial</b>  | <b>\$3,500.00 plus .05 Square feet of building area</b> |

**INFORMAL WORK SESSION APPEARANCE**

**Fee of \$ 500.00**

**ALL MAPS SUBMITTED FOR SIGNATURE  
MUST HAVE IMPRINTED SIGNATURE BOX FOR THE  
PLANNING BOARD CHAIR**

**ANY MAPS SUBMITTED WITHOUT REQUIRED  
SIGNATURE BOX WILL BE RETURNED**

STAMP WORDING SHALL BE IN ACCORDANCE WITH THE FOLLOWING APPROVED  
STAMPS AND APPLICABLE APPROVAL RECEIVED

**PRELIMINARY  
SUBDIVISION  
APPROVAL**

VILLAGE OF WOODBURY PLANNING BOARD  
PRELIMINARY APPROVAL GRANTED  
SUBJECT TO CONDITIONS AND RESOLUTION  
OF PLANNING BOARD

Date \_\_\_\_\_ Chair \_\_\_\_\_

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**FINAL  
SUBDIVISION  
APPROVAL**

VILLAGE OF WOODBURY  
FINAL SUBDIVISION APPROVAL GRANTED  
SUBJECT TO ALL CONSITIONS SET FORTH  
IN FINAL RESOLUTION AND COMPLIANCE  
WITH CHAPER 272 OF VILLAGE CODE

Date \_\_\_\_\_ Chair \_\_\_\_\_

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**FINAL  
SITE PLAN  
APPROVAL**

VILLAGE OF WOODBURY PLANNING BOARD  
SITE PLAN APPROVAL GRANTED  
SUBJECT TO ALL CONDITIONS SET FORTH  
IN FINAL RESOLUTION

Date \_\_\_\_\_ Chairperson \_\_\_\_\_

Please complete the following portions of form below

Client Name, Address  
Backup Withholding Certification Section to include the TIN and Signature



Client Account Signature Card

Type of Account: Client Escrow Account

NON-INTEREST BEARING

INTEREST BEARING  (The interest posted is subject to change at any time in the Bank's sole discretion.)

Account Number: \_\_\_\_\_

Account Title (Client Name): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Initial Deposit: \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_, Other FRSD

BACKUP WITHHOLDING CERTIFICATION

TIN: \_\_\_\_\_

Under penalties of perjury, I certify that

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding,
3. I am a U.S. person (including a U.S. resident alien).

You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

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

Facsimile Signature(s) Allowed:  Yes  No

I certify that I am an authorized officer/partner/member of the Escrow Agent Company referenced below and agree to and acknowledge receipt of the Escrow Account Agreement Terms and Conditions, Statement Savings Account Disclosure and the Funds Availability Disclosure of Provident Bank.

Escrow Agent Signature: \_\_\_\_\_

Master Escrow Account #: \_\_\_\_\_

Master Escrow Account Title: \_\_\_\_\_

Escrow Agent Phone #: 845 928 7558

Corporate Services Use Only:

Date Opened: \_\_\_\_\_ Opened by: \_\_\_\_\_ Verified Date: \_\_\_\_\_ Verified by: \_\_\_\_\_

Return to: Provident Municipal Bank, Corporate Services, Montebello, NY 10901