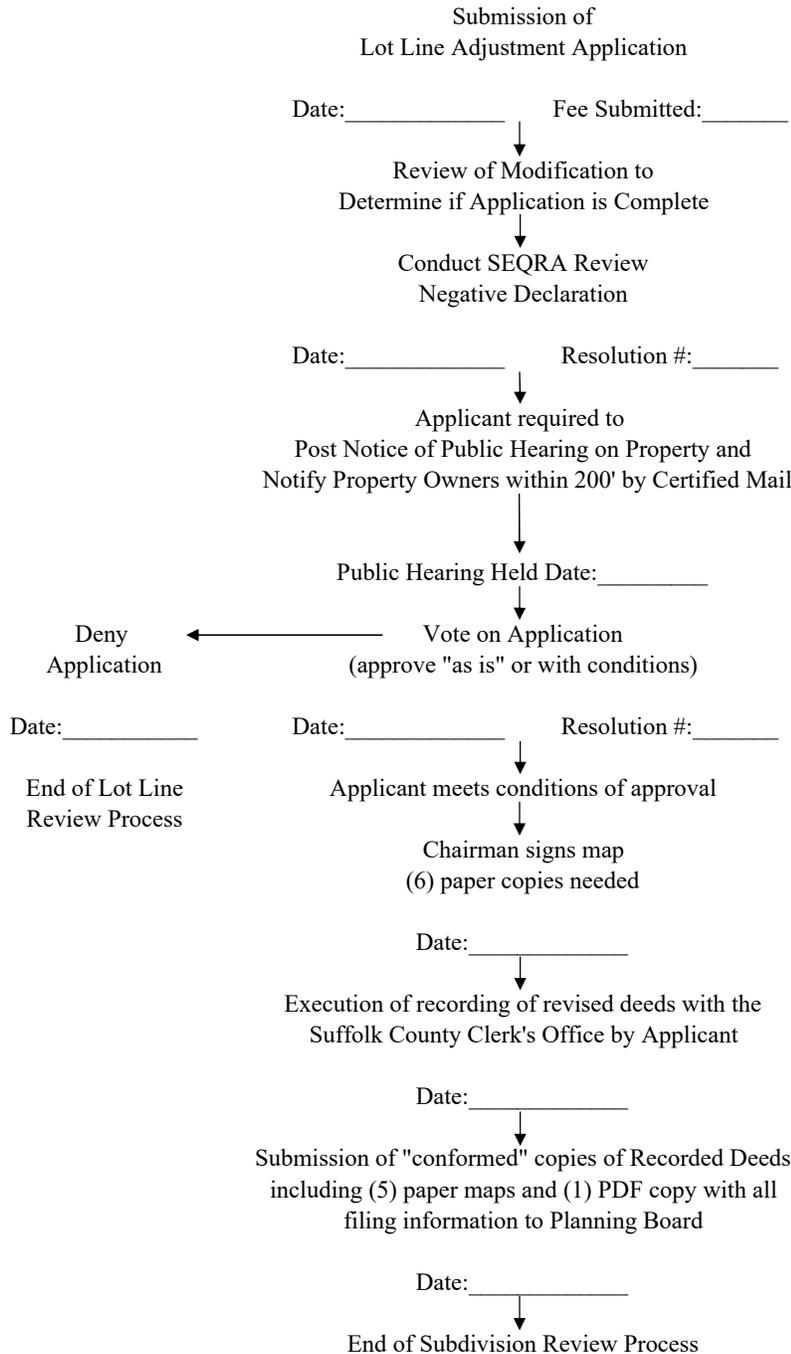




FLOW CHART FOR LOT LINE ADJUSTMENTS SHELTER ISLAND PLANNING BOARD

P.O. Box 970
Shelter Island, NY 11964-0970
tel: 631-749-0758 fax: 631-749-0227
email: sipb@shelterislandtown.us



Note:

A minimum of eight (8) full size paper copies and one (1) electronic (PDF) copy of all documents should be submitted with each application to the Planning Board. PDF sheets to be full scale/size reproducible.

Note:

Deeds, Covenants and Restrictions must be reviewed by the Planning Board Attorney prior to filing.

Lot Line Adjustment Map to be filed as a Miscellaneous Map with the County Clerk.



LOT LINE ADJUSTMENT CHECKLIST SHELTER ISLAND PLANNING BOARD

P.O. Box 970
Shelter Island, NY 11964-0970
tel: 631-749-0758 fax: 631-749-0227
email: sipb@shelterislandtown.us

Please complete the application by typing or clearly printing information here as indicated. Provide eight copies of all application documents unless otherwise indicated. Please submit copies of this checklist with the application.

Name of Project: _____

Suffolk County Tax Map Numbers: 0700 - . - . - . _____

0700 - . - . - . _____

**MUST BE BASED ON SIGNED SURVEY MAP PREPARED BY A LICENSED SURVEYOR
(Map scale of 1" = 50' or larger)**

Are the following EXISTING property features shown (and within 200 feet of property lines)?

- | YES | NO | |
|--------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | EXISTING LOT LINES AND LOT AREAS |
| <input type="checkbox"/> | <input type="checkbox"/> | EXISTING BUILDING and setbacks to existing lot lines |
| <input type="checkbox"/> | <input type="checkbox"/> | EXISTING STRUCTURES (pools, sheds, tennis courts, fences, driveways, patios, retaining walls, wells, sanitary systems, drywells, cisterns, fuel tanks, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Wooded Areas |
| <input type="checkbox"/> | <input type="checkbox"/> | Fresh Water and/or Tidal Wetlands |
| <input type="checkbox"/> | <input type="checkbox"/> | Other Features (list):

_____ |

- | | | |
|--------------------------|--------------------------|------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Name of Landowner(s) indicated |
| <input type="checkbox"/> | <input type="checkbox"/> | Name of Applicant indicated |
| <input type="checkbox"/> | <input type="checkbox"/> | Adjacent property lines |
| <input type="checkbox"/> | <input type="checkbox"/> | Names of all adjacent property Owners |
| <input type="checkbox"/> | <input type="checkbox"/> | Tax Map Parcel Numbers (for subject properties) |
| <input type="checkbox"/> | <input type="checkbox"/> | Available utilities (PSEG-LI, Cablevision, water authority, sewer district, etc.) shown on map |
| <input type="checkbox"/> | <input type="checkbox"/> | Existing streets including distance to nearest cross road on same side of street |
| <input type="checkbox"/> | <input type="checkbox"/> | Width and jurisdiction of existing streets |

Are the following PROPOSED property features shown?

- | YES | NO | |
|--------------------------|--------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Full dimensions and areas of EXISTING lots |
| <input type="checkbox"/> | <input type="checkbox"/> | Full dimensions and areas of portion(s) to be TRANSFERRED |

LOT LINE ADJUSTMENT CHECKLIST SHELTER ISLAND PLANNING BOARD

- | | | |
|--------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Full dimensions and areas of PROPOSED lots |
| <input type="checkbox"/> | <input type="checkbox"/> | All appropriate dimensions from existing buildings and structures to lot lines to determine that there will be no new or increased non-conformities created |

Are all EXISTING restrictions shown?

- | YES | NO | |
|--------------------------|--------------------------|-----------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Easements |
| <input type="checkbox"/> | <input type="checkbox"/> | Covenants |
| <input type="checkbox"/> | <input type="checkbox"/> | Zoning District(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Zoning District Line(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Private Road(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Private right-of-way(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Flood Zone (s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Town/Village Boundary(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | Near Shore & Peninsula Overlay District |

An application for a Lot Line Adjustment shall consist of the following:

- a. Application Fee and Engineering Deposit (if applicable).
- b. Certification Form (eight copies).
- c. Owner's Endoresment (eight copies if applicable).
- b. Surveys of the existing two lots and the proposed new lots certified by a surveyor licensed in the State of New York and dated within one year of the application (eight copies).
- c. Deeds for the existing lots (eight copies).
- d. Chains of title or single and separate title abstracts since June 19, 1957 for each lot (one copy).
- e. Short Environmental Assessment Form filled out properly using the DEC's EAF Mapper application (eight copies).
- f. An electronic (PDF) copy of all submissions reproducible at full scale/size.

According to Section 111-37D of the Town Code, the Planning Board's review of a Lot Line Adjustment

Application should determine that the proposed adjustment:

- a. Will have no significant environmental effect.
- b. Will not make future development of the affected lots more difficult or impossible.
- c. Will not result in a substandard lot.
- d. Will not create an immediate or potential zoning, environmental or health problem which would require more thorough review by the Planning Board.*
- e. Will not increase the actual or potential number of subdividable lots as a result of this action.

* A lot line adjustment application is meant to be an adequate review of simple lot line modification. If the application does not meet one of the categories mentioned in (D) above, then the Board may determine that the review will have to be more detailed and the application will be considered a form of subdivision. Should the Board determine this to be the case, the applicant will be notified promptly and be told what concerns were raised in the initial review process and what additional information must be submitted.

Due to the processing backlogs for subdivision applications at the Suffolk County Department of Health Services (SCDHS), the applicant is advised to submit an application to that agency as soon as possible after the completion of the SEQRA Review. The SCDHS considers Lot Line Adjustments to be Subdivisions.

The Applicant is advised to check with the Building Department for open permit(s) which may affect the SCDHS application and future property development.

**LOT LINE ADJUSTMENT CHECKLIST
SHELTER ISLAND PLANNING BOARD**

Name of person completing this application: _____

Signature: _____

Date completed: _____

**LOT LINE ADJUSTMENT APPLICATION
SHELTER ISLAND PLANNING BOARD**

Owner or Applicant's Attorney, if any, for this project:

Name: _____
Address: _____
Home or Office Phone #: _____ Extension if applicable: _____
Fax: _____
E-mail: _____

Owner or Applicant's Engineer or Surveyor for this project:

Name: _____
Address: _____
Home or Office Phone #: _____ Extension if applicable: _____
Fax: _____
E-mail: _____

Name of contact person for questions relating to this project:

Name: _____
Address: _____
Home or Office Phone #: _____ Extension if applicable: _____
Fax: _____
E-mail: _____

Does this application cover all contiguous property of the owner(s)? Yes No

If not, indicate other ownership and tax map parcel designation: _____

Zoning classification(s) of subject property (consult Town Zoning Map): _____

Flood Zone(s) (consult FEMA Flood Insurance Rate Map): _____

Near Shore and Peninsula Overlay District (consult Town Zoning Map): _____

Are any variances needed for this project that you are aware of? Yes No

If so, indicate what is needed: _____

Does the property have frontage on a public road? Yes No

If so, name of public road or highway: _____

Note: If subject property does NOT have frontage on a public road or highway, you must submit information on legal right-of-way or access to an existing private road.

OWNER'S ENDORSEMENT
To be Signed by Applicant(s)/Owner(s)

STATE OF NEW YORK)
COUNTY OF SUFFOLK) ss:

_____, being by me duly sworn, deposes and says:

I reside at _____, in the
County of _____ and the State of _____, and I am the
(owner in fee) (officer of the Corporation which is the owner in fee) of the premises described in the
foregoing and that I have authorized _____ to make
the foregoing application as described herein.

Signature(s): _____

Sworn to before me this _____

day of _____, 20____

Please print name (s): _____

Notary Public

CERTIFICATION

To be Signed by Applicant(s)/Owner(s)

STATE OF NEW YORK)
COUNTY OF SUFFOLK) ss:

_____, being by me duly sworn, deposes and says:

1. I am interested in an application for a Lot Line Modification/Minor Subdivision/Major Subdivision now pending before the Shelter Island Planning Board.
2. I reside at _____
3. The nature of my interest in the aforesaid application as follows (circle answer): I am the:
 Owner Tenant Bank Other: _____
4. It is my understanding that the Shelter Island Planning Board has determined that public policy requires a full, frank and complete disclosure of all persons having an interest, direct or indirect, in all applications to the Shelter Island Planning Board or other agencies of Town Government, to insure that no question of conflict of interest or favoritism may arise. The following Town officials have an interest in this property: _____
5. To the best of my knowledge, information and belief, there are no other persons, firms or corporations interested in this application, except as hereafter set forth (If either corporation or company, etc., list all officers): _____
6. By signing this form, I authorize the Planning Board members and staff to inspect the property(s). Members and staff may enter the property without notice between 7:00am and 7:00pm, Monday – Friday. Inspection may occur without the owner, applicant or agent present. If the property is posted with “keep out” signs or fenced with an unlocked gate, members and staff may still enter the property. Members and staff may take measurements, analyze site physical characteristics, sketch and photograph the site. I understand that failure to give this consent may result in denial of the application.

Signature(s): _____

Sworn to before me this _____

day of _____, 20____ Please print name (s): _____

Notary Public