

TOWN OF WALLKILL PLANNING BOARD
SCHEDULE OF FEES
Adopted by Town Board Resolution 10/28/2010

RESIDENTIAL - **Lot Line change and Minor S/D – (3 lots or less)**
 \$250.00 pls \$50.00 per each additional lot

Major S/D (4 lots & above)
 \$500.00 for first 4 lots and \$50.00 each additional lot

NON –RESIDENTIAL

Existing Space	\$250.00 plus the following if applicable \$.15 s.f. up to 10,000 s.f. .05 s.f. from 10,001 to 100,000 s.f. .01 s.f. above 100,001 s.f.
New Construction	\$500.00 plus the following if applicable .15 s.f. up to 10,000 s.f. .05 s.f. from 10,001 to 100,000 s.f. .01 s.f. above 100,001 s.f.

Survey Monument Fees (Local Law #4 of 1989)

\$135.00 per Unit or Lot – 1. Subdivisions – one unit equals one approved subdivision lot.
 2. Multiple Family Development – one unit equals each individual
 Condominium, Townhouse, Apartment, or Dwelling unit approved.
 3. Industrial, Commercial office or other such use – one unit shall
 equal 2,000 sq. ft. of building area approved.

Recreation Fees (Section 249-34 Town Zoning Code) Local Law #1 of 2005

For all developments and subdivisions, other than two lot minor subdivisions, if the Planning Board has required the incorporation of recreation fees by the developer on the site, the parkland fee shall be \$1,250.00 per unit or lot. If the Planning Board has not required the incorporation of recreation facilities by the developer on his site, the parkland fee shall be \$2,500.00.

Inspection Fee (Section 249-42)

The owner/developer is responsible for payment of all inspections, as built and related costs. Initially, an inspection fee of 4% of the amount of the construction costs shall be paid to the town prior to the time that the Chairman of the Planning Board signs the final plat or the start of any site improvement work.

PUBLIC HEARING FEE - \$150.00

Contribution to Traffic Mitigation

Industrial & Office	\$1.00 sq. ft.
Warehouse	.50 sq. ft.
Retail	2.00 sq. ft.
Enclosed Malls	3.50 sq. ft.
Hotels/Motels	.75 sq. ft.
Apartments and Subdivisions	500.000 per unit

Town of Walkill Planning Board

ENGINEERING AND CONSULTANT FEES WITH THE TOWN ENGINEER AND/OR LANDSCAPE ARCHITECT ARE BILLED DIRECTLY TO THE APPLICANT. THIS FEES INCLUDE WORKSESSIONS AND/OR INSPECTION FEES IF APPLICABLE AND ARE NOT INCLUDED IN THE APPLICATION FEES. PLEASE REFER TO THE ESCROW SCHEDULE BELOW:

*******Procedure for establishing Escrow Account for payment***** of Consultant Review Fees**

Upon application to the Planning Board for any action or approval required in accordance with the procedures set forth by Town Law, the applicant shall post with the Town of Walkill a deposit to cover all engineering/planning consulting and/or attorney fees deemed necessary by the Planning Board. This fee must be submitted to the Secretary of the Planning Board preferably before, but no later than the day of the initial scheduled work session for the project. Amount shall be as follows:

Consulting Escrow

(Adopted by Town Board Resolution 10/28/2010)

- A. Residential Subdivisions: \$400.00 per lot up to 4 lots/\$100.00 for each additional lot
- B. Lot Line Changes \$400.00 minimum or such amount as deemed by Town Engineer
- C. Multi-Family S/P \$100.00 per unit up to forty units/25.00 for each additional unit
- D. Commercial Subdivision \$1,000.00 per lot up to 4 lots/200.00 for each additional lot over
- E. Site Plan/Special Use Permit Applications - \$1,0000.00 minimum
Or up to a maximum of \$2000.00
As deemed appropriate at the time
of application.

Attorney Escrow

(Adopted by Town Board Resolution # 14 of 2012)

- A. Residential Subdivisions: \$350.00 per lot up to 4 lots
425.00 for lots 5 thru 9
750.00 for lots 10 or more
- B. Lot Line Changes \$350.00
- C. Multi Family/SP \$250.00 for 1st 4 units
\$425.00 for units 5 thru 9
\$750.00 for 10 or more units
- D. Commercial S/D \$350.00 for the 1st 4 Lots
\$425.00 for lots 5 thru 9
\$750.00 for 10 or more
- E. Site Plan/SUP \$750.00

Your application is NOT deemed complete until all applicable fees have been paid in full. The consultants will bill the time for their services against the deposit in our Escrow Account. If your Escrow Account has a negative balance, then the Planning Board has the right to suspend review of your application, and you agree that its doing so will not entitle you to a default approval.

TOWN OF WALLKILL PLANNING BOARD APPLICATION

DATE _____ APPLICATION _____

FEE _____ PAID _____ TAX MAP _____

1. _____
Name of Owner (see owner endorsement) Phone No.

2. _____
Mailing Address

3. _____
Name of Applicant Phone No.

4. _____
Mailing Address

5. _____
Name of Applicants Representative Phone No.

6. _____
Mailing Address

7. Location of Proposed Application and nearest cross street _____

8. Description of Proposed Use _____

9. Subdivision _____ Zone _____ Minimum Lot Size Required _____
Square Footage: Lot 1 _____ Lot 2 _____ Lot 3 _____
Acreage: Lot 1 _____ Lot 2 _____ Lot 3 _____

*****PLEASE ADVISE ASSESSOR'S OFFICE OF ANY NEW ROAD NAMES BEING PROPOSED FOR 911 PURPOSES.**

10. Site Plan _____ Zone _____ Minimum Lot Size Required _____
Proposed Lot Size _____ Minimum Building Size Required _____
Proposed Bldg Size _____ Parking Space Required _____ Parking Space Proposed _____
#Apartments _____ #Attached Homes _____
Density _____

11. Home Occupation _____ Zone _____ % of Floor Space _____
Required Parking Spaces _____ Proposed Parking Spaces _____

12. Public Hearing Required ___ Yes ___ No
Public Hearing Date _____

13. **ARE YOU CONSIDERING A CONSERVATION SUBDIVISION? YES ___ NO ___**

APPLICANTS SIGNATURE _____

PLEASE SUBMIT 17 SETS OF SIGNED/SEALED APPLICATIONS OF YOUR PLAN TO THE PLANNING BOARD OFFICE, SUBMITTAL DATE IS 15 DAYS PRIOR TO THE MEETING. ALL PLANS MUST BE FOLDED. CALL 845-692-7814 IF YOU NEED ASSISTANCE.

OWNERS ENDORSEMENT

COUNTY OF ORANGE
STATE OF NEW YORK

_____ being duly sworn, deposes and
says that he/she resides at _____
in the County of _____ and State of _____ and that he is the
owner in fee or _____ of the _____
_____ OFFICIAL TITLE _____ Corporation which is the owner
in fee of the premises described in the foregoing application and that he has authorized
_____ to make the foregoing application for
approval as described herein.

Sworn before me this day of 200

NOTARY PUBLIC

OWNERS SIGNATURE

Appendix C
State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION: Municipality _____ County _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____	

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF. <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No	
C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)	
C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:	
C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:	
C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:	
C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:	
C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:	
C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:	
C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	

PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

<input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action WILL NOT result in any significant adverse environmental impacts AND provide, on attachments as necessary, the reasons supporting this determination.	
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)

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