

APPLICATION FOR APPROVAL OF SANITARY FACILITIES FOR REALTY SUBDIVISION

NOTE: (Law requires that no subdivision or portion thereof shall be sold, leased or rented or any permanent building erected thereon until plans are approved by State Department of Health or Department of Environmental Conservation).

Application is hereby made for the approval of plans for realty subdivision as required by the provisions of Title II of Article 11 of the Public Health Law, and Title 15 of Article 17 of the Environmental Conservation Law.

GENERAL INFORMATION:

1. Name of Subdivision _____ Location _____
(City/Village/Town)
2. Owner _____
(State name of person, company, corporation or association, owning the subdivision)
3. Business address _____
(Street) (City) (State) (Zip)
4. Officers _____
(If organized, give names of officers)
5. Total area of entire property _____ Area of this section _____
Total number of lots _____ Number of lots in this section _____
Have plans for previous sections been approved? _____ Disapproved? _____
Will plans for additional sections be submitted? _____
6. Do you intend to build houses on this subdivision? _____ Do you intend to sell lots only? _____
Do you intend to build on some lots and sell others without buildings? _____
7. Is this subdivision or any part thereof located in an area under the control of local planning, zoning or other officials? _____
If so, have these plans been submitted to such authorities? _____
Have these plans been approved or disapproved by such governing authority? _____
8. Nature of soil _____
Describe to a depth of 10 ft. (20 ft. if seepage pits are proposed) giving thickness of various strata such as topsoil, clay, loam, sand, rock, etc.....
By whom determined? _____
How determined? _____ Date determined? _____
9. Topography _____
(State whether ground is flat, rolling, steep or gently slope, etc.....)
10. Grading: State depth of maximum cut _____ Maximum fill _____
11. Depth to water table – Maximum _____ Minimum _____ By whom determined _____
(Give maximum and minimum if there is any variation)
How determined? _____ Date determined _____

WATER SERVICE

12. Proposed method of supplying water _____
(If public supply, give name of municipality, water district or company)
Has municipality, district or company agreed to supply water? _____
13. State approximate distance to nearest public water supply main of municipal system _____
14. State approximate distance to nearest subsurface disposal systems _____
15. If a water supply application is required, has the approval from Bureau of Water Regulation, NYSDEC been received? _____

SEWERAGE SERVICE

16. Proposed method of collection and disposal of sewage _____
(Give name of municipality or sewer district if public sewers are to be used)
Has municipality, district or company agreed to provide sewerage facilities? _____
17. State approximate distance to nearest public sewer main of municipal system _____
(Give name of municipality or sewer district)
18. State approximate distances to nearest well water supplies _____

DRAINAGE

- 19 Are there any low or wet areas that require drainage? YES _____ NO _____
Are there any watercourses, ditches, ravines which may be filled in? YES _____ NO _____
Is there an existing local drainage plan? _____ Have these plans been approved by drainage officials? _____

Provisions for surface drainage should be shown on plans.

GAS TRANSMISSION LINES

- 20. Does a high-pressure gas transmission line pass through or within 300 ft. of any lot in this subdivision? _____
 If so, has its location been shown accurately upon plans? _____

ADDITIONAL INFORMATION

- 21. Maximum number of bedrooms in completed house _____ Bedrooms in expansion attic _____
- 22. Cellar drainage – Are cellar or footing drains to be installed? _____
 If so, show on plans how drainage will be disposed of.
- 23. Laundry wastes – Are laundry tubs to be located in basement? _____
 If so, show on plans how waste will be disposed of.

It is hereby agreed that if the attached plans dated _____, or any amendment or revision thereof, are approved by the State Department of Health or State Department of Environmental Conservation, installation of water supply and sewage disposal facilities will be made in accordance with the details thereof as shown on such approved plans. If the subdivided lands, shown on such plans are sold before such installations are made, it is agreed that all purchasers of lots will be furnished with a legible reproduction of the approved plans and they will be notified of the necessity of making such installations in accordance with such approved plans.

Signature _____ Date _____

Official Title _____

(The statement must be signed by the owner of the land plotted for subdivision or the responsible official of the company or corporation offering the same for sale).

TO BE FILLED IN BY PROFESSIONAL ENGINEER OR LAND SURVEYOR*

The plans submitted with this application were prepared by me or under my supervision and direction. Individual water and sewerage systems, if shown on plans, were designed after careful and thorough study of local geological and existing sanitary conditions.

Name _____
(Give firm name if any)

Address _____

License & Number _____ Signature _____

*Land Surveyor only if granted exception under Section 7208n of the State Education Law

IMPORTANT NOTES:

- (1) The plans shall show all information required by the State Health Department Bulletin, Planning the Subdivision as Part of the Total Environment, and such other information as may be required because of special local features or conditions.
- (2) Plans must be prepared so as to be completely legible and to permit satisfactory reproduction by microfilming processes.
- (3) A LOCATION DIAGRAM (scale about 1"=3000') showing the situation of the subdivision with respect to main roads, prominent streams, etc... shall be included on the plans.
- (4) A KEY MAP (scale about 1"=400') shall be shown on the plans if there are several Sections of the subdivision, outlining the relative location of the subject Section with respect to the rest of the subdivision.
- (5) A stamp of approval must be placed on face of plans, a space 3"x 6" should be reserved for this purpose.
- (6) Application must be accompanied by a check made payable to the Clinton County Treasurer. See www.clintonhealth.org for the current fee schedule.