

VILLAGE OF PLEASANTVILLE * BUILDING DEPARTMENT

80 Wheeler Avenue * Pleasantville, NY 10570 Phone (914) 769-1926 * Fax (914) 769-5519 www.pleasantville-ny.gov

SITE PLAN PERMIT APPLICATION

* Three (3) copies of all required documentation to be submitted fourteen (14) days * IN ADVANCE OF THE SCHEDULED PLANNING MEETING DATE SECTION I - PROJECT ADDRESS: 325 Manville Road, Pleasantville, NY 10570 SECTION II - CONTACT INFORMATION: (PLEASE PRINT CLEARLY, ALL INFORMATION MUST BE CURRENT) APPLICANT: Marville and Grove LLC ADDRESS: 394 Boolford Rd, Pleasantville, NY 10570 PHONE: 9/4-447-948CELL: _____EMAIL: _____ OWNER: Manuille and Grove LLC ADDRESS: 394 Bedford Rol, Pleasantville, NY 10570 PHONE: _____EMAIL: ___ SECTION III - Type of Work Proposed (CHECK ALL THAT APPLY) [] DECK [] DRIVEWAY / ROW PARKING [] GENERATOR [] LEGALIZATION [] NEW BUILDING [] PATIO / TERRACE | [] PARKING AREA | [] RETAINING WALL | [] SHED | [] SOLAR PANELS | [] SWIM POOL [] TEMP STRUCT / TENT [] WETLANDS DISTURBANCE SECTION IV - USE & OCCUPANCY EXISTING / CURRENT USE: ___ PROPOSED COMMERCIAL USE: (CHECK ALL THAT MAY APPLY) [] ASSEMBLY (RESTAURANTS, THEATERS) [] BUSINESS (OFFICE, BANKS) [] EDUCATIONAL (SCHOOLS) [] FACTORY / INDUSTRIAL (MANUFACTURING) [] HIGH HAZARD [] INSTITUTIONAL (ASSISTED LIVING) RESIDENTIAL GROUP (APTS, HOTELS) [] STORAGE (WAREHOUSE) [] MERCANTILE (RETAIL) PROPOSED RESIDENTIAL: [] ONE FAMILY DWELLING [] TWO FAMILY DWELLING [] TOWNHOUSE [] DETACHED ACCESSORY STRUCTURE SECTION V - SUBMISSION CHECKLIST [5] SITE PLAN APPLICATION [NOVERVIEW LETTER [] BUILDING PERMIT APPLICATION SHORT EAS FORM Survey & Detailed Drawings (Escrow Policy Affidavit (Additional Information

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SECTION VI - APPLICATION FEE: \$250 ESCROW FEE: DEPENDENT UPON SPECIFICS OF APPLICATION

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		(PLEASE PRINT CLEARLY, ALL INFOR	MATION MUST BE CURRENT)
ARCHITECT: Gallin	Beeler Desi	an Studio	
ADDRESS: 23 WOSh	ington Ave	Pleasantville, NY 10	570
		EMAIL: rbeeleragb-	
ENGINEER:			
ADDRESS:			
PHONE:	Cell:	EMAIL:	
ADDRESS:			
PHONE:	Cell:	EMAIL:	The state of the s
LEGAL COUNSEL:			
ADDRESS:			
PHONE:	CELL:	EMAIL:	
BE TRUE & CORRECT. ALL I WITH WHETHER SPECIFIE TO VIOLATE OR CANCEL TI LAND USE OR THE PERFOR SIGNATURE: X Day	PROVISIONS OF LAWS D HEREIN OR NOT, THE HE PROVISIONS OF AN RMANCE OF CONSTRUCT THE THE THE THE THE THE THE THE THE T	TRUCTIONS & EXAMINED THIS APPI & ORDINANCES COVERING THIS TY HE GRANTING OF A PERMIT DOES NO HY OTHER STATE OR LOCAL LAW REC TION.	PE OF WORK WILL BE COMPLIED OF PRESUME TO GIVE AUTHORITY GULATING CONSTRUCTION OR DATE:
Zone:	SECTION:	BLOCK:	LOT:
ADDITIONAL BOARD / DE	PT. APPROVALS REQUI	RED:	
[] ARB [] ZONING [[] WC PLANNING [] COL		g [] WCDOH [] WETLANDS [: ROAD] FLOOD DEV
BUILDING DEPARTMENT C	CHECKLIST:		
[] SITE PLAN APPLICATION	[] OVERVIEW LETTER	[] BUILDING PERMIT APPLICATION	N [] SHORT EAS FORM
[] SURVEY & DETAILED DRA	wings [] Additiona	AL INFO [] APP FEE [] ESCROW F	EE [] PUBLIC NOTICE & MAILINGS
PAYMENT: [] APP CHECK	# :	[] Cash [] Escrow Ch	ECK #:
NAME ON CHECK:	PARENCE OF THE PARENC		
		BLDG. INSPECTOR SIGN OFF:	DATE: