



## Town of North Castle Planning Department

17 Bedford Road Armonk, New York 10504

(914) 273-3542 (914) 273-3554 (fax)

### FINAL SUBDIVISION COMPLETENESS REVIEW FORM

*This form represents the standard requirements for a completeness review for all final subdivision plans. Failure to provide all of the information requested will result in a determination that the final subdivision application is incomplete. The review of the subdivision plat for completeness will be based on the requirements of the Town of North Castle Town Code.*

Project Name on Plan:

☐ Initial Submittal ☐ Revised Preliminary

Street Location:

Zoning District: \_\_\_\_\_ Property Acreage: \_\_\_\_\_ Tax Map Parcel ID: \_\_\_\_\_

Date: \_\_\_\_\_

#### DEPARTMENTAL USE ONLY

Date Filed: \_\_\_\_\_ Staff Name: \_\_\_\_\_

##### **Preliminary Plan Completeness Review Checklist**

Items marked with a "☒" are complete, items left blank "☐" are incomplete and must be completed, "NA" means not applicable.

- ☐ 1. The final subdivision plat shall be drawn clearly and legibly on transparent tracing cloth or Mylar with black waterproof ink
- ☐ 2. Plan scale shall be no smaller than one inch equals 100 feet
- ☐ 3. Sheet size shall not exceed 36 inches by 48 inches. If the size of the proposed subdivision requires a drawing larger than this, two or more sheets may be submitted, with match lines clearly indicated, and an index map shall be prepared on the same size sheet
- ☐ 4. Proposed subdivision name or identifying title
- ☐ 5. Name and address of the owner of record and of the subdivider (if other than owner)

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- ☐ 6. Identification and seal of the registered engineer or licensed land surveyor who prepared the plat
- ☐ 7. Names of the owners of record of adjoining properties and of properties directly across the street
- ☐ 8. Graphic scale
- ☐ 9. Approximate true North point
- ☐ 10. Date of plans
- ☐ 11. The location and dimensions of all boundary lines of the proposed subdivision and all existing and proposed streets, lot lines, easements and rights-of-way, with sufficient data to readily determine the location, bearing and length of all such lines and to reproduce such lines upon the ground
- ☐ 12. The names of all existing and proposed streets
- ☐ 13. The locations of all water bodies, wetlands and watercourses
- ☐ 14. The location of all existing buildings, including identification of all buildings to be removed as a condition of plat approval
- ☐ 15. The total acreage included in the entire subdivision and the identification number and acreage of all lots and land reservations within the proposed subdivision.
- ☐ 16. The location of all existing and proposed monuments
- ☐ 17. A site location map, at a scale of one inch equals 800 feet, showing the location of the subject property with respect to neighboring properties and streets
- ☐ 18. Notations explaining any drainage, sight slope, road widening, park area or other reservations or easements, including any self-imposed restrictions or covenants
- ☐ 19. Endorsement of approval by the Westchester County Health Department
- ☐ 20. Endorsement of owner as follows:  
"Approved for filing:  
..... "  
Owner Date
- ☐ 21. Form for endorsement by Planning Board Chairman as follows:  
"Approved by a Resolution of the North Castle Planning Board  
..... "  
Chairman Date

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- More information about the items required herein can be obtained from the North Castle Planning Department. A copy of the Town Code can be obtained from Town Clerk or on the North Castle homepage: <http://www.northcastleny.com>

\_\_\_\_\_ On this date, all items necessary for a technical review of the proposed final subdivision plat have been submitted and constitute a COMPLETE APPLICATION.