

## **Town of North Castle Planning Department**

17 Bedford Road Armonk, New York 10504 (914) 273-3542 (914) 273-3554 (fax)

## SPECIAL USE PERMIT COMPLETENESS REVIEW FORM

This form represents the standard requirements for a completeness review for all preliminary special use permit plans. Failure to provide all of the information requested will result in a determination that the special use permit application is incomplete. The review of the plan 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. A written statement describing the nature of the proposed special use and how it will serve to implement the intent and purposes of the Town Code
☐2. A complete application for special use permit approval form
☐3. Plan prepared by a registered architect or professional engineer
☐4. Map showing the applicant's entire property and adjacent properties and streets
☐5. A locator map at a convenient scale
☐6. The proposed location, use and design of all buildings and structures
☐7. Proposed division of buildings into units of separate occupancy, detailed breakdowns of all proposed floor space by type of use and floor level

## PRELIMINARY SITE PLAN COMPLETENESS REVIEW FORM

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8. Existing topography and proposed grade elevations	
☐9. Location of drives	
☐10. Location of any outdoor storage	
☐11. Location of all existing and proposed site improvements, including drains, culverts retaining walls and fences	s,
☐12. Description of method of water supply and sewage disposal and location of such facilities	s
13. Location, design and size of all signs	
☐14. Location and design of lighting, power and communication facilities	
☐15. In an industrial district, specific uses proposed, number of employees for which building are designed, type of power to be used for any manufacturing process, type of wastes of by-products to be produced by any manufacturing process and proposed method of disposal of such wastes or by-products	or
☐16. In a multifamily district, floor plans of each dwelling unit shall be shown, and elevation and cross sections also may be required	าร
☐17. The name and address of the applicant, property owner(s) if other than the applicant and of the planner, engineer, architect, surveyor and/or other professionals engaged to work	
☐ 18. Submission of a Zoning Conformance Table depicting the plan's compliance with the minimum requirements of the Zoning District	ıe
☐19. If a tree removal permit is being sought, submission of a plan depicting the location and graphical removal status of all Town-regulated trees within the proposed area of disturbance. In addition, the tree plan shall be accompanied by a tree inventory include a unique ID number, the species, size, health condition and removal status of each tree.	of es
☐20. If a wetlands permit is being sought, identification of the wetland and the 100-foot wetland buffer.	nd
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 special use permit plan have been submitted and constitute a COMPLET APPLICATION.	