Town of Berne

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MINOR SUBDIVISION CHECKLIST FOR SUBMITTAL TO THE TOWN OF BERNE PLANNING BOARD

Name of Applicant: Application #:		
Name of Proposed Subdivision:		
Name of Property Owner:		
Parcel I.D. # and Location:		
	,	FINAL PLAN
Note:	All inf	ormation requested in the Preliminary Sketch Plan should be carried over to the Plan/Survey Map.
	1.	Seven (7) Copies of Survey/Plan Stamped by a Licensed Land Surveyor (and Professional Engineer, If Necessary), Including the Following Information:
		Location Map
		Name of Subdivision or Property Owner
		Name of Town and County
		Date of Map/Plat
		Scale Not Less Than 1" = 200'
		North Arrow
		Contour Intervals Not More Than 10'
		Survey of Boundary Lines Including Bearings and Distances
		Final Location of Existing and/or Proposed Wells
		Final Location of Percolation Test Pits and Existing and/or Proposed Septic Systems
	2.	Two (2) Copies of Completed Application
	3.	Well Information (Hydrogeologic Assessment) If Available and/or Applicable (See Planning Board Members for Clarification), Including the Following:
		Well and Septic System Approval by the Albany County Health Department in the Form of an Official Letter
	4.	SEQR Requirements Fulfilled
	5.	Approval Fee and Recreation Fee for Final Lots Approved, Paid to the Secretary of the Planning Board at the Time of the Final Approval
	6.	Final Plat Plan Filed by the Applicant with the Albany County Clerk's Office**

Rev. 2/03

^{**} Please refer to the attached instructions for Filing Final Subdivision Plats.