

**Town of Berne (Revised Draft February 2019)**  
**Minor Subdivision Application**  
**For Final Subdivision Plat**  
*(To Be Filled Out by the Property Owner or Applicant)*

This is an application for a subdivision of land into two but not more than four lots. The property owner(s) or the Applicant is responsible for providing all of the following information in order for this application to be considered by the Berne Planning Board.

Two copies of this application and seven copies of the Final Subdivision Plat stamped by a Licensed Surveyor (and Professional Engineer, if necessary) must be submitted to the Planning Board Secretary at the Berne Town Hall at least 14 days prior to the next regular Planning Board meeting in order for it to be placed on the Planning Board's meeting agenda.

**Please print the following:**

**Property Owner(s):**

Name(s) \_\_\_\_\_; \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Applicant (if different from owners):**

Name: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Describe your legal interest in the property (e.g., purchase or lease agreement, gift :)**

\_\_\_\_\_

**Subject Property:**

Name or other identification of site (address): \_\_\_\_\_

Situated on the \_\_\_\_\_ side of \_\_\_\_\_ (Road)

Distance in feet \_\_\_\_\_ from the intersection of \_\_\_\_\_ (Road)

Tax map parcel #: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Current Acreage: \_\_\_\_\_ acres Current land use(s): \_\_\_\_\_

**Authorized Representative:**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact: Building Code Administration, Administrative Assistant  
Telephone: 518-872-1448 x106 / Email: bernebandzba@gmail.com  
Rev. 6/19

**1. Describe the final number of lots to be created and the size of each lot:**

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**2. Describe the final proposed ownership of each lot (to be retained, leased, sold, gifted, etc.):**

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**3. Describe the final proposed uses of each lot:**

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**4. Prepare a Subdivision Plat that meets the criteria of Subdivision Regulations § 170-22 as follows:**

The final Subdivision Plat shall include the following information:

- A. A copy of such covenants or deed restrictions as is intended to cover all or part of the tract.
- B. An actual field survey of the boundary lines of the tract, giving complete descriptive data by bearings and distances, made and certified to by a licensed land surveyor. The corners of the tract shall also be located on the ground and marked by monuments, iron pins, or other markers as approved by the Town Engineer, and shall be referenced and shown on the plat.
- C. All on-site sanitation and water supply facilities shall be designed to meet the minimum specifications of the State Department of Health, and a note to this effect shall be stated on the plat and signed by a licensed engineer.
- D. The proposed subdivision name; name of the Town and county in which it is located.
- E. The date, North point, map scale, name and address of the record owner and subdivider.
- F. The applicant shall comply with all the requirements of the State Environmental Quality Review Act as directed by the Board.
- G. The final plat to be filed with the Albany County Clerk shall comply with § 334 of the New York State Real Property Law.

**5. Attach as a required part of this application all of the following:**

**ATTACHMENT A** – seven (7) copies of the Subdivision Plat meeting the above stated requirements

**ATTACHMENT B** – a copy of Hydrogeological Assessment and any other well information for each proposed well

**ATTACHMENT C** – Official letter from the Albany County Health Department approving the well and septic systems

**ATTACHMENT D** – a copy of the signed receipt from the Building Code Administration or the Planning Board Secretary that all applicable required fees have been paid, including those for the final lots approved, any recreation fees and any Town Engineer fees for review or inspection required by the Planning Board

**ATTACHMENT E** - a copy of the signed Minor Subdivision Plat Checklist

**Signature(s) of all current Property Owner(s) (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_

**Signature of Applicant (required if different than the property owners):** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_

**To be completed by Planning Board Secretary:**

***Note: The application shall not be accepted unless all of the required information is provided, including all listed attachments.***

***Date application received and stamped in:*** \_\_\_\_\_

***Assigned Minor Subdivision Plat IPS Application Number:*** \_\_\_\_\_

Minor Subdivision Plat Application – ATTACHMENT D

TOWN OF BERNE  
MINOR SUBDIVISION FINAL PLAT APPLICATION  
FEE RECEIPT

Name of Current Landowners: \_\_\_\_\_

Name of Applicant (if different from Landowners): \_\_\_\_\_

Name of Proposed Subdivision: \_\_\_\_\_

Number of new lots created: \_\_\_\_\_

Public Hearing Newspaper Legal Notice - \$12.00 \$ \_\_\_\_\_

Certified Letter Postage \$( )/letter x \_\_\_\_\_ letters \$ \_\_\_\_\_

Final Approval: \$50.00 fee + 50.00/lot x ( ) Lots \$ \_\_\_\_\_

Recreation: \$100.00 x ( ) Lots \$ \_\_\_\_\_

Town Engineer Review \$ \_\_\_\_\_

Town Engineer Inspection \$ \_\_\_\_\_

TOTAL DUE: \$ \_\_\_\_\_

Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

Payment Received By:

Town Clerk \_\_\_\_\_

Planning Board Secretary \_\_\_\_\_

Building Code Administration \_\_\_\_\_ IPS #: \_\_\_\_\_

*Note: The Town employee accepting the application at Berne Town Hall will review the application package to see if all of the required attachments are with the completed application form. The application should not be accepted unless the fee is paid.*

*The Town employee receiving the payment shall note the date received and Check # on this ATTACHMENT D form. A photocopy of this form will be then be made and furnished to the applicant as a disclosure of fees due and as a receipt of payment made.*

Minor Subdivision Plat Application - ATTACHMENT E

TOWN OF BERNE  
MINOR SUBDIVISION PLAT APPLICATION CHECKLIST

Name of Current Property Owner(s): \_\_\_\_\_

Name of Applicant (if different from property owners): \_\_\_\_\_

Name of Proposed Subdivision: \_\_\_\_\_

**I/We certify that we have compiled the following documents and labeled and provide them as required attachments to the Minor Subdivision Application:**

**Yes \_\_\_ No \_\_\_ Attachment A** - seven copies of the Final Subdivision Plat that meets the requirements of the Town Of Berne Zoning Code Section 170-21

**Yes \_\_\_ No \_\_\_ Attachment B** - a copy of the Hydrogeological Assessment and any other well information

**Yes \_\_\_ No \_\_\_ Attachment C** – a copy of the Official letter from the Albany County Health Department approving the well and septic systems

**Yes \_\_\_ No \_\_\_ Attachment D** - a copy of the receipt from the **Building Code Administration** or the Planning Board Secretary that the required fees have been paid.

**Yes \_\_\_ No \_\_\_ Attachment E** – a copy of the signed Minor Subdivision Plat Application Checklist

**Signature(s) of all current Property Owner(s) (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Signature of Applicant (if different than the property owners) or Authorized Representative:**

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

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Authorized Representative