



TOWN OF HARRISON STEEP SLOPE APPLICATION



SITE IDENTIFICATION INFORMATION			
Application Name:		Application #	Date Submitted:
Site Address: No. Street: Hamlet:			
Property Location: (Identify landmarks, distance from intersections, etc.)			
Town of Harrison Tax Map Designation: Section Block Lot(s)		Zoning Designation of Site:	
APPLICANT/OWNER INFORMATION			
Property Owner:		Phone #: Fax#:	Email:
Owners Address: No. Street: Town: State: Zip:			
Applicant (if different than owner):		Phone #: Fax#:	Email:
Applicant Address (if different than owner): No. Street: Town: State: Zip:			
Individual/ Firm Responsible for Preparing Site Plan:		Phone #: Fax#:	Email:
Address: No. Street: Town: State: Zip:			
Other Representatives:		Phone #: Fax#:	Email:
Owners Address: No. Street: Town: State: Zip:			
PROJECT DESCRIPTION			
Describe the project, proposed use and operation thereof:			
PROJECT INFORMATION			
Lot size: Acres: Square Feet:		Square footage of all existing structures (by floor):	
# of existing parking spaces:		# of proposed parking spaces:	
# of existing dwelling units:		# of proposed dwelling units	
What is the predominant soil type(s) on the site?		What is the approximate depth to water table?	
Site slope categories:		15-25% %	25-35% % >35% %
Estimated quantity of excavation:		Cut (C.Y.)	Fill (C.Y.)
Is the site located in a designated Critical Environmental Area?			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Does a curb cut exist on the site? Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Are new curb cuts proposed? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
Is the site located within 500' of:			
□ The boundary of an adjoining city, town or village			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
□ The boundary of a state or county park, recreation area or road right-of-way			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
□ A county drainage channel line.			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
□ The boundary of state or county owned land on which a building is located			Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Is the site listed on the State or Federal Register of Historic Place (or substantially contiguous)
 Yes: No:

Is the site located in a designated floodplain?
 Yes: No:

Is the project funded, partially or in total, by grants or loans from a public source?
 Yes: No:

Will municipal or private solid waste disposal be utilized?
 Public: Private:

Is the site burdened by any existing easements, covenants or restrictions? Yes: No:
 If so, attach a copy

What is the estimated time of construction for the project?

Is the site served by the following public utility infrastructure:

- Sanitary Sewer Yes: No:
- Water Supply Yes: No:
- Storm Sewer Yes: No:
- Electric Service Yes: No:
- Gas Service Yes: No:
- Telephone/Cable Lines Yes: No:

ZONING COMPLIANCE INFORMATION

Zoning Provision	Required	Existing	Proposed
Lot Area			
Lot Coverage			
Lot Width			
Front Yard			
Side Yard (Adjoining a Residence District)			
Side Yard (Adjoining a Business District)			
Rear Yard			
Habitable Floor Area			
Buffer Strip (Front Yard-Residence District)			
Buffer Strip (Front Yard-Business District)			
Buffer Strip (Side/Rear-Residence District)			
Buffer Strip (Side/Rear-Business District)			
Height			
Floor Area Ratio			
Usable Open Space			

PROPOSED BUILDING MATERIALS

Foundation	
Structural System	
Roof	
Exterior Walls	

APPLICANTS ACKNOWLEDGEMENT

I hereby depose and certify that all the above statements and information, and all statements and information contained in the supporting documents and drawings attached hereto are true and correct.

Applicants Name _____ Applicants Signature _____

Sworn before me this _____ day of _____ 20__

 Notary Public