

## PLANNING BOARD SITE PLAN REVIEW APPLICATION

236 Third Street, Greenport, New York, 11944 (631) 477-0248

www.villageofgreenport.org

Date of Application 10 12 202

All information below is to be completed by the applicant. This completed application is to be accompanied by the proposed Site Plan, Copies of Covenants and/or Restrictions, where applicable, Environmental Assessment Form, building plans showing elevations, setbacks, floor plans, room dimensions, current survey and quality of material, where applicable.

THE OWNER OF THE PROPERTY IS						
THE OWNER OF THE PROPERTY IS: (PLEASE PRINT CLEARLY)						
Kathleen First Name	MCDowell Last Name	(Wolff)	KATES Busines	CHEE ss Name, if a	E Co.	
19 FRONT Mailing Address	ST	GREENPO City/ Town/ Vill	92 age	NY State	11944 zip	
Phone#		E-Mail Add	dress			
CONTACT PERSO	N (if different from c	owner)		· · · · · · · · · · · · · · · · · · ·		
The person to receive a	ll correspondence:					
SAME AC	2 Above					
First Name	Last Name	* * *	Business	Name, if ap	nlicable	
	W K				phoablo	
Mailing Address	7	City/Town/XIII		A.A.		
	2 36	City/ Town/ Villa	ige	State	Zip	
	3 (2)		*		. N	
Phone#		E-Mail Add	dress		**************************************	
IF ANYONE OTHER THAN THE OWNER COMPLETES THIS APPLICATION, WRITTEN CONSENT FROM THE OWNER MUST BE SUBMITTED WITH THIS APPLICATION.						
Location:	e 3 s					
Suffolk County Tax Map Number: 1001 Section: 5 Block: 4 Lot 29						
Street Address: 19 FRONT 38. Greenport, New York, 11944						
Zoning District: [] WC [] R1 [] R2 [] PD [] CR [] CG  Is property located within the Historic District? [] Yes [] No						
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**Project Information:** 

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□ Residential Commercial
Proposed Starting Date: ASAP
Project Description: Please describe project in detail. (Use an additional sheet if necessary)  Outside secting in real of building for  CUStomers purchasing food.  Red slashes around perimeter indicated  POP UP tent or awning.  Will comply with either gas heater  or covered fire pt
Please check the following boxes for permits this project will require:
☐ Building Permit
☐ Wetlands Permit
☐ Suffolk County Planning Board
□ New York State D.E.C.
☐ United States Army Corps of Engineers
□ Suffolk County Health Department
☐ New York State Department of State Coastal Flood Management
Does this application require a Zoning Roard of Apricals Variones? Two XIN-

## **AFFIDAVIT**

Village of Greenport	)
Town of Southold	)
County of Suffolk	) 55
State of New York	)

I swear that to the best of my knowledge and belief that the statements contained in this application, together with the plans and specifications submitted, are true and complete statements of proposed work to be done on the described premises and that all provisions of the Building Code, Zoning Code, and all other laws pertaining to the proposed work shall be complied with, whether specified of not, and that such work and inspections are authorized by the owner. The Village of Greenport is hereby granted permission to enter the property listed as the "Location" for the purposes of inspecting my property for a site visit. I understand that if approved, Site Plan approval will be granted and accepted on condition that the provisions of Federal, State and Local rules and regulations, and any additional requirements of the Site Plan are complied with. I understand that any approval granted will be deemed null and void if any information pertaining to restrictions and/or covenants prior to the date of this application are discovered after Site Plan approval is granted. Any violation of all applicable codes, or deviations from the approved Site Plan will result in the immediate revocation of this Site plan approval & legal action will be taken against me. No responsibility rests upon the Village of Greenport, Code Enforcement Official or the Fire Department by reason of this application and permit.

Sworn to be before this\_

\_\_\_\_ day

Signature

wner or Applicant

Notary Public, Suffolk County, New York

JEANMARIE CDDON Notary Public, State of New York No. 010D6251238

Qualified in Suffolk County
Commission Expires November 14, 20

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