



PERMIT FEES NOT REFUNDABLE OR TRANSFERABLE  
APPLICATION FOR MINOR SUBDIVISION or  
PRELIMINARY PLAT APPROVAL (FOR MAJOR SUBDIVISION)

\_\_\_ Minor Subdivision \_\_\_ Major Subdivision

Application No.: \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Tax Map #: \_\_\_\_\_ Fee: \_\_\_\_\_

1. Subdivision Name (if any): \_\_\_\_\_
2. **Applicant** Name: \_\_\_\_\_ **Plans Prepared by:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Email: \_\_\_\_\_
3. **Location (address)** of Proposed Subdivision: \_\_\_\_\_
4. **Current Zoning Classification:** \_\_\_\_\_
5. **State and Federal Permits needed:** \_\_\_\_\_
6. **Easements or other Restrictions** on Property (Generally describe and attach copy of legal documentation).  
\_\_\_\_\_  
\_\_\_\_\_
7. **Total Acreage of site:** \_\_\_\_\_
8. **Number of Proposed Lots:** \_\_\_\_\_
9. Anticipated Construction Time (If applicable): \_\_\_\_\_
10. Will the development be staged? \_\_\_\_\_
11. Building types, and approximate size and cost of buildings (If applicable)  
\_\_\_\_\_  
\_\_\_\_\_
12. On-site water supply or sewage facilities assurance (**complete only if such facilities are proposed**):

I hereby certify that the proposed on-site water supply and sewage facilities have been designated to meet the specifications and standards recommended by the NYS Dept. of Health.

\_\_\_\_\_  
(Signature of preparer of plans)

\_\_\_\_\_  
(Date)

13. **Attach three copies of a preliminary plat map**, drawn to scale, at a scale of 1 in to 100 feet unless otherwise specified by the Planning Board, showing all information required by Sections 410 and 430 of the Subdivision Control Law of the Town of Vienna.
14. **Three copies of all plans, designs or drawings required by Section 430** of the Subdivision Control Law of the Town of Vienna.
15. **Attach a copy of tax map(s)** showing the proposed subdivision site.
16. Attach draft Environmental Assessment Form **(if needed)**.
17. **Attach required Tax Search Certificate** obtained through County Department of Finance.
18. Contact Planning Board Secretary for any questions or additional forms needed.

The undersigned hereby requests approval by the Planning Board of the above identified preliminary subdivision plat.

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

**APPENDIX - TOWN OF VIENNA SUBDIVISION  
LAW**

- I. **PURPOSE:** The purpose of this appendix is to set forth the plat requirements for both minor and major subdivisions, and shall be provided by the sub-divider, to the surveyor performing the plat effort.
- II. **PLAT REQUIREMENTS:** The plat shall contain the following information:
  - A. A **title block** containing subdivision name, name of town, and county, date (different for each revision), scale, surveyor's name/company.
  - B. A **certification block** with the following statement:

As owner I hereby certify that I have caused the land described by this plat to be surveyed, divided, mapped, dedicated, and access rights reserved as represented on the plat.

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Owner Signature*

- C. A **stamp or seal** from the surveyor (and engineer if appropriate) showing license number.
- D. The following **statement** for signature by the planning board chairman:

Plat Approved: \_\_\_\_\_  
*Town of Vienna Planning Board Chairman* \_\_\_\_\_ *Dated*
- E. **Notes** containing any covenant and deed restrictions.

- F. The plat itself should cover all of the land being sub-divided, including any residual land retained by the owner, and shall meet the following requirements:
  - 1. Scale should be not more than 100 feet per inch and not less than 50 feet per inch.
  - 2. Plat should list the name of all subdivisions and owners of record for lots immediately adjacent to the parcel being subdivided.
  - 3. Plat should show the following boundaries, if they exist, in the area adjacent to the subdivision or on the parcel, zoning boundaries, municipal boundaries, flood hazard areas, all wetlands (not just DEC designated wetlands), property boundaries, easements, right-of-way.
  - 4. Plat should show parcels to be dedicated to public use and conditions. Plat should show buildings, water courses, wells, septic systems and sewer lines, wooded areas, and other significant features on the parcel and adjacent parcels.
  - 5. Plat should show contour intervals of 5 feet (or 2 feet when required by the Board).
  - 6. Plat should show width and location of streets and roads and shall indicate the names of all existing and proposed streets and roads.
  - 7. Plat should show location of all proposed facilities.
  - 8. Plat should show storm drainage, culverts (with sizes indicated) and arrows indicating direction of flow.
  - 9. Plat should include details such as cross-sections, plans, drains, etc.
  - 10. Plat should show lot lines of all proposed lots, including bearings, distances, corners, and monuments (with descriptions).
  - 11. Plat should indicate area of each lot (not to include area inside public right-of- ways).
  - 12. North point shall be prominently indicated on the plat and oriented to coincide with the locator map.

G. **Additional Markings Required to be Displayed on the Plat.** One or more may be selected as determined by the planning board.

1. **WETLANDS RESTRICTIONS APPLY**  
Lot(s) \_\_\_\_\_ subject to any development, housing, building and use restrictions under Article 24, State of New York Environmental Conservation Law.
2. **FLOODPLAIN RESTRICTIONS APPLY**  
Lot(s) \_\_\_\_\_ subject to any development, housing, building and use restrictions under National Flood Insurance Program.
3. **SUBDIVISION RESTRICTIONS APPLY**  
Further Subdivision of Lot(s) \_\_\_\_\_ prohibited as an agreed on condition for approval of this plat.
4. **BUILDING RESTRICTIONS APPLY**  
Lot(s) \_\_\_\_\_ subject to building restrictions as an agreed on condition for approval of this plat. Restriction is as follows:
5. **WATER SUPPLY/SANITATION CERTIFICATION**  
All sanitation and water supply facilities are designed to meet the minimum specifications of the Oneida County Department of Health.  
Licensed Engineer Name \_\_\_\_\_  
License Number \_\_\_\_\_ Date \_\_\_\_\_
6. **CERTIFICATION OF MONUMENTATION**  
Surveyor certifies that monuments have been set as shown on the plat.

H. **Locator Maps:** One or more locator maps shall be included on the plat to clearly locate the subdivision of interest. As a minimum, the Town of Vienna map shall be used in all cases (see example in Figure 1). If additional detail is required, then a secondary locator map may be required (see example in Figure 2).

I. **Conflicts of Requirements:** If conflicts between this Appendix A and the primary Subdivision Law occur, the planning board shall be contacted for resolution.

J. **Waiver of Plat Requirements:** The planning board may waive any of the requirements in this Appendix A in the event that the information is not applicable or necessary.

**FOR OFFICE USE ONLY  
TOWN OF VIENNA  
SUBDIVISION REVIEW PROCEDURE**

Applicant Name and Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone \_\_\_\_\_

Application # \_\_\_\_\_  
 Tax Map# \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date:

Fee paid to Town Clerk \_\_\_\_\_  
 Received by Planning Board \_\_\_\_\_  
 Sketch plan presented \_\_\_\_\_  
 EAF form submitted \_\_\_\_\_  
 Type of SEQR action: \_\_\_\_\_  
      Type I  
      Unlisted  
      other  
 SEQR Review determined to be \_\_\_\_\_  
      Coordinated  
      Uncoordinated  
 Environmental Significance determined to be \_\_\_\_\_  
      Positive declaration  
      Negative declaration  
      Conditional negative declaration  
 (NOTE: positive declaration will initiate steps not on this checklist)  
 Application/Plat accepted as complete \_\_\_\_\_  
 Resolution to hold/waive public hearing \_\_\_\_\_  
 Notice of hearing published in newspaper \_\_\_\_\_  
 Application sent to County Planning/DEC/DOT \_\_\_\_\_  
 County/DEC/DOT Response Received \_\_\_\_\_  
 Public Hearing held \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Action taken to: \_\_\_\_\_  
      conditionally approve  
      conditionally approve with modifications  
      disapprove or  
      grant final approval of plat  
 Resolution for action taken and addressing county review \_\_\_\_\_  
 Report filed with county planning \_\_\_\_\_  
 Tax Search certificate obtained through County dept. of Finance \_\_\_\_\_  
 Conditionally approved plat mailed to sub-divider \_\_\_\_\_  
 Approved plat filed with County Clerk/Assessor/Zoning Officer \_\_\_\_\_

