



TOWN OF RIVERHEAD PLANNING BOARD

201 HOWELL AVENUE, RIVERHEAD, NEW YORK 11901-2596
(631) 727-3200 EXT. 240, FAX (631) 727-9101

APPLICATION FOR FARM STAND REVIEW & APPLICATION CHECKLIST

To avoid delays in the processing of your application, be sure that all information indicated below is included (where applicable) with your application. **A complete application consists of the following:**

1. **Application Form (12 copies)** – Must be filled out completely. Be sure to include a complete project description, stating the type of structure or work proposed with specific dimensions and areas for all activities. The application must also include the Suffolk County Tax Number, the property location, and be signed by the applicant/owner and dated.
2. **Eligibility** – Applicant must submit proof that agricultural production is the principal permitted use on the subject property (see Chapter 301 Section 283.2 of the Town Code) and subject property qualifies under New York State Agricultural & Markets Law, New York State Department of Environmental Conservation, United States Department of Agriculture and lands in bona fide agricultural production.
3. **Owner's Consent Form (1 original & 2 copies)** – Must be completed by the owner of the property if the applicant is someone other than the owner of the property. (A notarized letter written by owner naming agent is acceptable)
4. **Contiguous Owners** – Provide the name and addresses of all owners of lands contiguous to lands where proposed project will take place
5. **Survey or Plot Plan and Sketch Plan of proposed farm stand (1 original & 12 copies) – Must be less than (10) years old**, showing ALL structures and improvements, proposed and currently existing on the site, including cesspool and septic locations, proposed structures (including but not limited to barns, sheds, fences, etc.), driveways, parking areas, storage location for manure, location of utilities/proposed utilities, handicapped parking spaces, lighting, signage, drainage structures, driveway/parking material. All plans must be drawn in a scale no less detailed than one inch equals forty feet or in a scale as required to meet the guidelines as required in the Riverhead Town Code. In addition, all plans must identify dimensions (length x width) and height for items listed above.
6. **Recent photos of project area (1 original & 12 copies)** – One from each view of property (north, south, east, & west). Photographs should show any relevant feature on the property (structures, driveways, parking areas, ponds). Photographs should be labeled with applicant's name, date, and the direction in which the photo was taken.
7. **This project will require the following approvals (check all that apply if known):**

Town of Riverhead

- Building Permit Zoning Board Approval Farm Stand Approval
 Conservation Advisory Council Architectural Review Board Other

Other Agencies (Submission to these agencies should be done prior to this application)**

- Suffolk County Soil Conservation and/or National Resource Conservation Service
 Suffolk County Farmland Committee S.C. Department of Health Services
 S.C. Department of Public Works New York State Department of Transportation Other
(**If there have been other agency determinations, please include a copy with your application submission)

8. **Deeds, Easements, Covenants & Restrictions (if applicable) (3 copies)** – Enclose copies of all deeds, easements, and covenants and restrictions applicable to the subject parcel.
9. **Short Environmental Assessment Form (1 original & 12 copies)** – Completed similarly to application form.
10. **\$500 Review Fee**

Commencement of work prior to obtaining necessary permits may be considered a violation of this chapter & other chapters of the Code of the Town of Riverhead and penalty provisions may include an offense punishable by a fine not exceeding \$1,000.00 or imprisonment for a period not to exceed six months, or both.



SCTM#: 600- ____-____-____-____

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Stanley Carey, Chairman
Ed Densieski, Vice Chairman

Richard M. O'Dea, Member

Joseph H. Baier, Member
George Nunnaro, Member

DO NOT WRITE IN THIS BOX: This box will be completed by the Planning Department
Fee: \$500 + (_____ sq. ft. altered/project area x \$0.10) = _____ *
Date Entire Fee Submitted: _____
Accounting Receipt Number: _____
***This fee is NOT refundable**

APPLICATION FOR FARMSTAND APPROVAL

Please type or print clearly

Designated name of proposed development or project. (If none exists, supply applicant name here):

Applicant*:	Licensed Design Professional (If Applicable)*:
Name: _____	Name: _____
Address: _____	Address: _____
E-Mail: _____	E-Mail: _____
Phone: _____	Phone: _____
Owner*:	Attorney (If Applicable)*:
Name: _____	Name: _____
Address: _____	Address: _____
E-Mail: _____	E-Mail: _____
Phone: _____	Phone: _____

- If there is more than one party in any category, please provide information for each on a separate sheet of paper.
- Suffolk County Tax Map Number: 0600-____-____-____-____
- Location of site: _____
- Current zoning classification: _____
- Description of work to be done: _____

-
- Proposed use(s) of site: _____
 - Total site area: _____ square feet _____ acres
 - Square feet of building area existing: _____
 - Square feet of building area to be added: _____
 - Square feet of other altered area (hard surface and/or regrading):

 - Anticipated construction time/completion date: _____
 - Will development be staged? _____ If yes, how? _____

 - Current land use of site (retail, manufacturing, etc.): _____
 - Current condition of site (vacant, wooded, developed, #of buildings, etc.):

 - Use/Character of surrounding sites (agricultural, residential, retail, etc.):

Applicant signature

Date

Print applicant name

Title, if applicable

- This application is
- Complete
 - Incomplete because: _____

Received by: _____

Date: _____

NOTE: ALL SITE PLAN SUBMISSIONS MUST BE FOLDED

Site Plan fees are NOT refundable

READ THIS DOCUMENT CAREFULLY. YOU MAY CONSULT YOUR ATTORNEY BEFORE COMPLETING.

DISCLOSURE AFFIDAVIT

State of New York)

ss:

County of Suffolk)

I, _____ an applicant for the following relief:

and being duly sworn, deposes and says:

That I make and complete this affidavit under the penalty of perjury and swear to the truth thereof.

That I understand that this affidavit is required by Section 809 of the GENERAL MUNICIPAL LAW and that a knowing failure to provide true information is punishable as a misdemeanor. Being so warned, I state:

That _____, is a State Officer, is an officer or employee of Riverhead Town, and

That this person has an interest in the person, partnership, or association requesting the above stated relief.

That for the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant where he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them

- (a) is an applicant,
- (b) is an officer, director, partner or employee of the applicant,
- (c) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association, applicant, or
- (d) is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered dependent or contingent upon the favorable approval of such application, petition, or request.

That ownership of less than five (5) percent of the stock of a corporation whose stock is listed on the New York or American Stock Exchange shall not constitute an interest for the purpose of this section.

(SIGNATURE)

Sworn to before me this _____ day

of _____, 20____

NOTARY PUBLIC

Please note: If ownership is held jointly or in partnership, each owner and/or partner must sign a separate owner's endorsement. If the owner or owners are making the application, this endorsement is not required.

OWNER'S ENDORSEMENT

STATE OF NEW YORK)

ss:

COUNTY OF SUFFOLK)

Application/Project Name: _____

Project Address: _____

_____, being duly sworn, deposes and says:

I am: (check one) ___ a part owner in fee
 ___ the sole owner in fee
 ___ an officer of the corporation which is the owner in fee of the premises described in the foregoing application.

I reside at _____

Mailing Address

Hamlet/Post Office/Village State Zip Code

I have authorized _____ to make the foregoing application (described above) to the Riverhead Town Board and/or Planning Board for site plan/subdivision approval as described herein.

I hereby affirm under penalty of perjury that information provided on this application is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law. As a condition to the issuance of a permit, the applicant accepts full legal responsibility for all damage, direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless the Town from suites, actions, damages and costs of every name and description resulting from the said project.

Signature

(If owner is a corporation, please indicate name of corporation and the title of the corporate officer whose signature appears above)

Sworn before me this

_____ day of _____, 20____

Notary Public

PROJECT I.D. NUMBER

SEQR

617.21

Appendix C

State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
For UNLISTED ACTIONS Only

PART I – Project Information (To be complete by Applicant or Project sponsor)

1. Applicant / Sponsor

2. Project Name

Empty text box for Applicant / Sponsor and Project Name

3. Project location: Municipality

County

Empty text box for Municipality and County

4. Precise location (Street address and road intersections, prominent landmarks, etc. or provide map)

Empty text box for Precise location

5. Is proposed action:

() NEW () EXPANSION () MODIFICATION / ALTERATION

6. Describe project briefly:

Empty text box for Describe project briefly

7. Amount of land affected:

Initially: acres ;

Ultimately: acres

8. Will proposed action comply with existing or other existing land use restrictions: () YES () NO If No, describe briefly:

Empty text box for land use restrictions

9. What is present land use in vicinity of project: (describe):

() Residential () Industrial () Commercial () Agricultural () Park/Forest/Open Space () Other

10. Does action involve a permit approval or funding, now or ultimately from any other Governmental agency, (Federal, State or Local) ?

() YES () NO If Yes, list agency(s) and permit/approvals:

11. Does any aspect of the action have a currently valid permit or approval?

() YES () NO If Yes, list agency(s) and permit/approvals:

12. As a result of proposed action, will existing permit/approval require modification?

() YES () NO If Yes, list agency(s) and permit/approvals:

I certify that the information provided above is true to the best of my knowledge

Applicant / Sponsor Name: Date:

Signature: