

TOWN OF COBLESKILL – PLANNING BOARD
Lot Line Adjustment Review CHECKLIST

Zone: _____ Tax Map#s: _____

Applicants Name and Address: _____

Property Address and Title of Project (name of property owners involved):(Ex: Jones & Smith Lot Line Adj. # 1)

Sketch Plan Meeting Date: _____ Public Hearing Date: _____

Final Submission:

Date Received: _____

Date of Meeting: _____

Date \$50 Fee Received: _____

Name and Address of Plan Preparer: _____

Plan Requirements (check when completed or NA if not-applicable)

<input type="checkbox"/>	Location Map	<input type="checkbox"/>	Location of Significant Physical Features [Buildings, Trees, Rock Outcrops, Sink Hole(s), Marshes, Watercourses, etc.]
<input type="checkbox"/>	Name/Address of Owner	<input type="checkbox"/>	Verbiage "to be conveyed to"
<input type="checkbox"/>	Name(s) of 2 nd /3 rd Property Owner involved	<input type="checkbox"/>	Name/Address of Preparer
<input type="checkbox"/>	North Arrow	<input type="checkbox"/>	Date
<input type="checkbox"/>	Names of Adjacent Property Owners	<input type="checkbox"/>	Scale (not less than 30' to the inch)
<input type="checkbox"/>	Zoning District (s)	<input type="checkbox"/>	Zoning and Property Boundaries
<input type="checkbox"/>	Deed	<input type="checkbox"/>	Existing and Proposed Buildings and Structures
<input type="checkbox"/>	Deed Restrictions	<input type="checkbox"/>	Existing and Proposed Street Access
<input type="checkbox"/>	Survey (circle one) minimum or full	<input type="checkbox"/>	Water, Sewage and Utility Lines
<input type="checkbox"/>	Drainage System	<input type="checkbox"/>	Existing Facilities (culverts & drains)
<input type="checkbox"/>	Topography	<input type="checkbox"/>	R.O.W., Easements and Covenants
<input type="checkbox"/>	Setback lines for Existing Zones	<input type="checkbox"/>	Authorization letter from owner
		<input type="checkbox"/>	Public Hearing

