

Town of Southeast

**Application for Site Plan Approval/Special Permit/Wetland Permit/
Subdivision Approval/Lot Line Adjustment/Conditional Use Permit**

Applicant Information:

Applicant Name: P.L.I. LLC
(If a proprietorship or partnership, give name of owners. If a corporation, give name of officers)
Address: 1699 Route 6, Suite 1, Carmel, NY 10512
Phone Number: (845) 228-1400 Fax: (845) 228-5400
E-mail: crillc@comcast.net
Applicant's Relationship to property: Owner

Name of Property Owner
(if different from above): _____
Address: _____
Phone Number: _____ Fax: _____
Has the property owner been notified of the proposed action? Yes: X No: _____

Applicant's Primary Representative (Architect/Engineer/Lawyer): Jeffrey J. Contelmo, PE
Address: Insite Engineering, Surveying & Landscape Architecture, P.C. 3 Garrett Place, Carmel, NY 10512
Phone Number: (845) 225-9690 Fax: (845) 225-9717
E-mail: jcontelmo@insite-eng.com

Application Information:

Project Name: Stateline Retail Center/Restaurant Depot
Address: US Route 6
Land is recorded by Deed or Deeds in the County Clerk's Office as follows:
Date 4/18/08 & 4/24/08 Liber: 1802 Page: 142 & 136 (Respectively)
Tax Map No(s): 68. Block No(s): 2 Parcel No(s): 48.1 & 48.2
Acres: 43.96 +/- Number of Parcels: 2
Zoning District: SR-6 School District: Brewster Central

Are there any waivers of Town of Southeast regulations required for this Project?
(If yes, please request in writing and specify the code section in your request.) Yes: X No: _____

Does the project site contain wetlands, wetland buffers, or other controlled areas
as defined by Chapter 78 of the Code of the Town of Southeast? (If yes, please
complete the Wetland Permit Section) Yes: X No: _____

Wetland Permit:

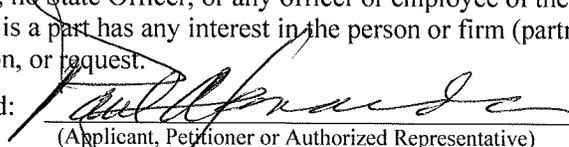
Type of area and acreage to be affected:
Wetland: 0 AC Watercourse: 0 AC Wetland Buffer: 541,913
Description of the Proposed Activity: See Attached Cover Letter

Disclosure Statement (pursuant to Section 809 of the General Municipal Law)

A. Nature and Extent of Interest of any State Official or Municipal Officer or Employee in this Application, Petition, or Request (set forth in detail):
None

B. Statement that no State Official or Municipal Officer or Employee in this Application, Petition, or Request:
None

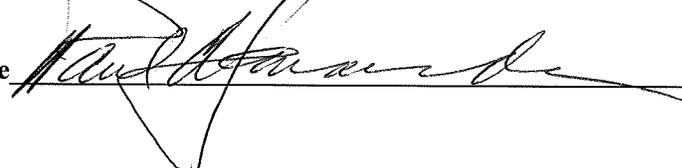
The undersigned Applicant, Petitioner or Person (Firm) making this request certifies by signature on this Disclosure Statement that, in accordance with the Provisions of §809 of the General Municipal Law, except as stated in A above, no State Officer, or any officer or employee of the Town of Southeast or any municipality of which the Town is a part has any interest in the person or firm (partnership or association) making the above application, petition, or request.

Signed: 
(Applicant, Petitioner or Authorized Representative)

By: Paul Camarda,
(Name and Title)

Date: 12/23/19

The above information is complete and factually correct to the best of my knowledge:

Applicant's Signature  Date 12/23/19

FOR OFFICE USE ONLY (DO NOT WRITE BELOW THIS LINE):

Identification of Application, Petition, or Request:

To (please check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Southeast Town Board | <input type="checkbox"/> Southeast Building Inspector |
| <input type="checkbox"/> Southeast Planning Board | <input type="checkbox"/> Southeast Wetlands Inspector |
| <input type="checkbox"/> Southeast Zoning Board of Appeals | <input type="checkbox"/> Architectural Review Board |

For (please check all that apply):

- | | | | |
|---|-------------------|---|-------------------|
| <input type="checkbox"/> Site Plan Approval | <i>Fee:</i> _____ | <input type="checkbox"/> Subdivision Approval | <i>Fee:</i> _____ |
| <input type="checkbox"/> Special Permit | _____ | <input type="checkbox"/> Lot Line Adjustment | _____ |
| <input type="checkbox"/> Wetland Permit | _____ | | |

Date: _____ Total Application Fee: _____