



TOWN OF EAST FISHKILL  
ARCHITECTURAL REVIEW BOARD  
330 Route 376  
Hopewell Junction, NY 12533

## APPLICATION FOR ARCHITECTURAL REVIEW

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

1. Title of Project: \_\_\_\_\_
2. Description of Project: \_\_\_\_\_
3. Name and Address of Record Owner: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
4. Tax Map Number: \_\_\_\_\_
5. Zoning District: \_\_\_\_\_
6. Acreage: \_\_\_\_\_ Dimension(s) of Building(s) \_\_\_\_\_
7. Name and Address of Developer/Contractor: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
8. Name, Address and License No. of Architect: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
9. Name, Address and License No. of Professional Engineer: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
10. Name, Address and License No. of Land Surveyor: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
11. Name and Address of Developer/Contractor: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
12. Name and Address of Attorney: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_
13. Has the applicant had informal discussions with the ARB regarding this project: **YES NO** (circle one)
14. If yes, when was the last date of such informal discussions: \_\_\_\_\_
15. Has this project been submitted to any other Town agency for action: **YES NO** (circle one)
16. Which agency/board: \_\_\_\_\_ When (Date): \_\_\_\_\_
17. Date of this Application: \_\_\_\_\_
18. Applicant's Signature: \_\_\_\_\_

## AFFIDAVIT TO BE COMPLETED BY CORPORATION OWNER

STATE OF NEW YORK )  
COUNTY OF DUTCHESS ) SS

\_\_\_\_\_ being duly sworn, deposes and says that he/she resides at  
\_\_\_\_\_ in the County of \_\_\_\_\_  
\_\_\_\_\_ State of \_\_\_\_\_. That he/she is the \_\_\_\_\_  
\_\_\_\_\_ of \_\_\_\_\_, the  
Corporation which is owner in fee of the property described in the foregoing application for \_\_\_\_\_  
\_\_\_\_\_ and that statements contained  
Therein are true to the best of his/her knowledge and belief.

\_\_\_\_\_  
Corporation Officers:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## AFFIDAVIT TO BE COMPLETED BY OWNER OF AGENT OF OWNER

STATE OF NEW YORK )  
COUNTY OF DUTCHESS ) SS

\_\_\_\_\_ being duly sworn, deposes and says that he/she is the owner, or  
that he/she is the agent named in the foregoing application for \_\_\_\_\_,  
And that he/she has been duly authorized by the owner in fee to make such application, and the foregoing  
statements are true to the best of his/her knowledge and belief.

Sworn before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Notary Public