

TOWN OF STONY POINT
74 EAST MAIN STREET
STONY POINT, NEW YORK 10980

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arb@townofstonypoint.org

ARCHITECTURAL REVIEW BOARD APPLICATION

Project Name: _____

Section _____ **Block** _____ **Lot** _____ **Zone** _____

Property location-distance from nearest cross street. _____

Applicant: Name _____

Address: _____ Telephone: _____

Owners: Name _____

Address: _____ Telephone: _____

Architect: Name _____

Address: _____ Telephone: _____

Engineer: Name _____

Address _____ Telephone: _____

Attorney: Name _____

Address _____ Telephone: _____

Contact Person: Name _____

Address _____ Telephone: _____

ARCHITECTURAL REVIEW BOARD APPLICATION

Application is hereby made to the Architectural Review Board, acting for the General Welfare of the Residents of the Town, for approval by review and advisory report: such review to consider appearance of property with improvements, architectural features, safety of ingress and egress, type and location of mechanical equipment as indicated on the submitted architectural plans, exterior design and materials, visual compatibility with surroundings, landscaping and exterior lighting.

Signature of Applicant

Address of Applicant

Phone Number of Applicant

If owner or applicant is a corporation: names and titles of two officers and signature of duly authorized officer.

Name _____ Title _____

Name _____ Title _____

Authorized Signature _____

Title _____

1. Use and occupancy of property: (if mixed, state which)

Existing _____

Intended after improvements _____

2. Nature of work proposed: Check which is applicable

New Building () Repair () Alteration ()

Addition () Removal ()

Demolition () Other ()

ARCHITECTURAL REVIEW BOARD

AFFIDAVIT OF OWNERSHIP

**State of New York
County of Rockland
Town of Stony Point**

_____duly sworn, deposes and says that he/she

Resides at _____

In _____, **County of** _____,

In the State of _____, **that he/she is the owner in fee of all that**

certain lot, piece or parcel of land situated, lying and being in the Town of Stony

Point aforesaid and designated as Section _____ **Block** _____ **Lot** _____

Of the Town of Stony Point Tax Map and that hereby authorizes in his behalf and

that the statements of fact contained in said application are true.

Owner: _____

Mailing Address: _____

Sworn to before me this _____

Day of _____, **200**__.

Notary Public