

Village of Sylvan Beach

PO Box 508, Sylvan Beach, NY 13157

Property Merger and Subdivision Application

INSTRUCTIONS TO MERGE OR SUBDIVIDE ADJACENT TAX PARCELS FOR SAME OWNER(S)

Getting started

1. Fill out the form: "APPLICATION TO MERGE/SUBDIVIDE ADJACENT TAX PARCELS."
2. You must submit the application and the following supporting materials to the Planning Board at least 10 days before the Planning Board meeting at which you wish to appear. Contact the Village Clerk to be placed on the agenda. (Please note: A meeting may be cancelled if there are no agenda items or due to inclement weather).
3. All Property Taxes must be paid in full.
4. Parcels must have the same deeded owners.
5. Parcels must be located in the same Municipality, school district, fire district and zoning district.
6. Request is subject to review by the Village Planning Board.
7. For subdividing, proposed lots must be conforming lots meeting the current code of 5,000 square foot minimum.
8. The owner(s) of the parcels may be required to attend the Planning Board meeting at which the transaction will be presented.

Checklist of Material to submit to the Planning Board

1. ___ The completed application, signed by ALL owners of the parcels. – 2 copies.
2. ___ Proof of ownership of the properties involved showing ALL owners. This may take the form of deeds, surveys, or tax maps showing the contiguity of the properties.

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3. ___ The owner(s) will pay a non-refundable, non-transferable fee of \$100.00 to the Village Clerk by credit card, check or cash. Make check out to The Village of Sylvan Beach.
4. ___ Owners will be required to submit three copies of a certified survey for each property showing the merged or subdivided parcels with the proposed surveyed property descriptions. (e.g., if you are subdividing a parcel to make 3 individual lots you need 3 individual stamped surveys with 3 copies of each).
5. ___ Easements and or deed restrictions must be identified and submitted with the application. Failure to do so will result in a denial of this request.

The Planning Board Action:

Will submit the application to Oneida County Planning for final 239 review.

Approve, Conditionally Approve, or Deny the Application.

1. If approved, the applicant will be given a signed & stamped copy of the application form. Conditionally Approved, the applicant may resubmit the application when the conditions have been met and receive the form. Denied, the applicant may resubmit a new application.
2. Within 60 days of final approval, the applicant will need to submit the approved application form, a stamped copy of the approved survey and a stamped Mylar copy of the survey of the newly merged/subdivided properties all signed by the Village Planning Board Chair with the Oneida County Clerk in Property Records.

Note: Any property created from these actions will need to comply with all existing Village Codes and Zoning Regulations.

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APPLICATION TO MERGE/SUBDIVIDE ADJACENT TAX PARCELS

Contact Person(s)/Agent/Owner(s): _____

Address: _____

Email: _____ Phone/Cell: _____

Tax Parcel(s) to be MERGED/SUBDIVIDED: (list all tax map #'s below)

Parcel 1: _____ Parcel 2: _____

Parcel 3: _____ Parcel 4: _____

INFORMATION: Location of property in the Village of Sylvan Beach:

EXISTING RESTRICTIONS, EASEMENTS OR COVENANTS ON PARCEL: Yes No

If Yes, Explain _____

Are there any unpaid taxes/bills due to the County, School, Town or Village of Sylvan Beach?

Yes No

*Taxes are to be paid in full for this application to be processed by the County Clerk, County Treasurer and Village Clerk. If the answer is 'Yes', the Village will not consider the application.

- Parcels must be contiguous; not divided by the property of others.
 - Parcels must have the same deeded owners.
 - Parcels must be located in the same town, school district, fire district and any other special districts.
 - Request is subject to review by the Village of Sylvan Beach Planning Board.
- Application for Same Owner(s) to Combine Tax parcels

PROPERTY OWNERS' ACKNOWLEDGEMENT I (We) the undersigned owners of the Real Property described above request that the above-mentioned properties be combined, and I (We) understand that the reversal of this merge will not be possible without consent of the Village of Sylvan Beach Planning Board. I (We) acknowledge that the above stated requirements have been met and I (We) will hold the Village of Sylvan Beach official bodies harmless for any problems that may occur from such merge.

Signature of Owner: _____ Date: _____

Signature of Owner: _____ Date: _____

Signature of Owner: _____ Date: _____

CLASSIFIED BY SAME OWNER(S) TO COMBINE TWO OR MORE TAX PARCELS BY THE VILLAGE OF SYLVAN BEACH PLANNING BOARD:

Planning Board Action: Circle One

Approved Conditionally Approved Denied

Planning Board Chair Signature

Date submitted: _____ Determination Date: _____

Note: This Application for Combine by Same Owner(s) to Combine Two or More Tax Parcels MUST BE FILED with the Oneida County Clerk's Office, Utica, NY within Sixty-two (60) days of the Planning Board endorsement/approval. Failure to file within time frame will result in additional fees and procedures.