

**VILLAGE OF ROCKVILLE CENTRE**  
**BUILDING DEPARTMENT**  
110 MAPLE AVENUE  
ROCKVILLE CENTRE NEW YORK 11570  
**516-678-9247**

**APPLICATION FOR MINOR SUBDIVISION**

<b>I.</b> <b>Location of</b> <b>Subdivision</b>	At (street address)_____	<b>Zoning District</b> _____
	Section_____ Block_____ Lot(s)_____ Overall Dimensions of Lot_____	

<b>II. Identification - to be completed by all applicants (please print)</b>				
	<b>Name</b>	<b>Mailing Address (No., Street, City, State)</b>	<b>Zip Code</b>	<b>Tel. No.</b>
<b>Owner</b>				
<b>Architect</b> <b>or Engineer</b>				
<b>The owner of this parcel and the undersigned agree to conform to all applicable laws of this jurisdiction. I hereby declare that the statements made in this application are, to the best of my knowledge, correct and true. Additionally, the owner and undersigned declare that they have read, understand and have submitted all of the items stipulated in Article II and III of Chapter 330 of the RVC Code.</b>				
<b>Signature of Owner</b>				<b>Application Date</b>
<b>Project</b> <b>Description</b>				

<b>III. Number of Lots</b> _____	<b>Size of Lots</b> _____
<b>IV. Type of Use:</b> <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
<b>V. Is property within 500 ft. of a Nassau County Road:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <b>Date of Approval from Nassau County Planning Commission:</b> _____	

<b><u>Do Not Write in This Space - For Office Use Only</u></b>	
<b>Received By</b> _____	<b>Permit Fee \$</b> _____
<b>Date</b> _____	

**REFERRED TO:** Planning Board \_\_ Village Board \_\_ Zoning Board \_\_

**BD-1-SP-14**