

**APPLICATION FOR TRANSFER OF SANITARY FLOW CREDITS**

**APPLICATION NAME:**

\_\_\_\_\_

(Name under which application shall be known)

**SUFFOLK COUNTY TAX MAP NO.:** 1000 - \_\_\_\_ . \_\_\_\_ - \_\_\_\_ - \_\_\_\_ . \_\_\_\_  
District      Block      Lot

**A. SUBMISSION INFORMATION:**

Application is hereby made to the Southold Town Board for the transfer of a sanitary flow credit pursuant to Chapter 87 of the Town Code.

**B. GENERAL INFORMATION:**

1. Name Of Applicant(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_

If the applicant does not own the property or is a contract vendee, prepare the endorsement at the end of this form establishing owner's authorization of the applicant's request.

2. Is the applicant a contract vendee? Yes \_\_\_\_ No \_\_\_\_
3. Is the applicant a corporation or partnership? Yes \_\_\_\_ No \_\_\_\_

If yes, give the name and title of the responsible officer:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address:(if different) \_\_\_\_\_  
\_\_\_\_\_

Telephone No.: \_\_\_\_\_

3. Landowner(s): \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_

4. Name of Attorney, or Agent authorized to represent the property owner and/or applicant:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

5. All communications with regard to this application shall be addressed to the following person until further notice:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

**C. SITE/PROJECT DATA:**

1. Location of Property \_\_\_\_\_

2. Existing zoning district(s) \_\_\_\_\_

Special Overlay District(s), if applicable \_\_\_\_\_

3. Lot area: \_\_\_\_\_ sq. ft or acres \_\_\_\_\_

4. Existing: Building Area \_\_\_\_\_ sq. ft. Lot coverage \_\_\_\_\_

5. Please attach a detailed typewritten description of the project, the proposed use and operation thereof, including a detailed explanation of the design concept, the reason for the particular design, objective of the developer or project sponsor, why the credit is needed.

6. Does property have an existing cesspool and/or septic tank? \_\_\_\_\_ Yes \_\_\_\_\_ No

7. School District \_\_\_\_\_

8. An appropriate Environmental Assessment Form (EAF) must be attached. All Unlisted and Type I Actions require either a Short or Full EAF to be prepared.

**D. I hereby depose and certify that all of the above statements of information, and all statements And information contained in the supporting documents and drawings attached hereto are true and correct.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

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

\_\_\_\_\_  
NOTARY PUBLIC

**E. APPLICANT/AGENT/REPRESENTATIVE TRANSACTIONAL DISCLOSURE FORM**

The Town of Southhold’s Code of Ethics prohibits conflicts of interest on the part of Town officers and employees. The purpose of this form is to provide information which can alert the Town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME: \_\_\_\_\_  
(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person’s or company’s name.)

NAME OF APPLICATION: (Check all that apply)

Tax grievance	_____	Building	_____
Variance	_____	Trustee	_____
Change of Zone	_____	Coastal Erosion	_____
Approval of plat	_____	Mooring	_____
Exemption from plat or official map	_____	Planning	_____
Other	_____		

(If “Other”, name the activity) \_\_\_\_\_

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southhold? “Relationship” includes by blood, marriage, or business interest. “Business interest” means a business, including a partnership, in which the Town officer or employee has even a partial ownership of (or employment by) a corporation in which the Town officer or employee owns more than 5% of the shares. YES \_\_\_\_\_ NO \_\_\_\_\_

If you answered “YES”, complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southhold \_\_\_\_\_

Title or position of that person \_\_\_\_\_

Describe the relationship between yourself (the applicant/agent/representative) and the Town officer or employee. Either check the appropriate line A) through D) and/or describe in the space provided.

The Town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply):

\_\_\_\_\_ A) the owner of greater than 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation);

\_\_\_\_\_ B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation);

\_\_\_\_\_ C) an officer, director, partner, or employee of the applicant; or

\_\_\_\_\_ D) the actual applicant.

DESCRIPTION OF RELATIONSHIP

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Submitted this \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**AUTHORIZATION**

(where the Applicant is not the Owner)

I, \_\_\_\_\_ residing at \_\_\_\_\_  
\_\_\_\_\_ do hereby authorize  
\_\_\_\_\_

to apply for a transfer of sanitary flow credit on my behalf.

Owner's Signature: \_\_\_\_\_

**NOTICE TO ADJACENT PROPERTY OWNERS**  
**(Required Pursuant to Town Code §87-7)**

- A. In the case of a petition requesting a sanitary flow credit, in addition to the notice required by law, a written notice containing the following information shall be sent by the petitioner, or his agent, by either certified or registered mail, to every owner of property immediately adjacent thereto. In the event that any petitioner owns or has any interest in any property immediately adjacent to the property that is the subject of the application, then written notice shall also be given to the owners of the property adjacent to such other property of the petitioner. For the purpose of this section, the words “owner” or “property owner” mean the owner as shown on the current Southold Town assessment roll. The notice required by this section shall be mailed by petitioner, or his/her agent, within five days preceding the filing of the petition in the Town Clerk’s office. Proof of mailing of such notice in the form of a statement sworn to by petitioner or his/her agent shall be filed with the Town Clerk at the time of filing the petition. Such notice shall contain the following information:
1. A statement that the petitioner proposes to file a petition with the Southold Town Clerk requesting a sanitary flow credit.
  2. A description of the street location and the area of the property which is the subject of such petition.
  3. The present zone district classification of the property.
  4. A statement that within five days of the notice, the petition requesting such sanitary flow credit will be filed in the Southold Town Clerk’s office, Main Road, Southold, New York, and may then be examined during regular office hours.
  5. A statement that a public hearing with respect to such petition must be held by the Southold Town Board before such sanitary flow credit can be transferred to the applicant to whom the notice is addressed, or his representative, has the right to appear and be heard at such hearing; and that a notice of such hearing will be published in the official Town newspaper not less than 10 days prior to such public hearing.
- B. In lieu of complying with the provisions of this section, written verified waivers of notice executed by the persons entitled to receive such notice may be filed with the Town Clerk at the time of filing the petition.
- C. Failure to comply with the provisions of this section shall not affect the validity of any action with respect to such petition.
- D. In addition to the above notice requirement, prior to holding a public hearing on the petition, notice shall be provided pursuant to Chapter 58.