



**TOWN OF EAST HAMPTON
ARCHITECTURAL REVIEW BOARD
FOR BERM, FENCE, WALL OR GATE
APPLICATION**

Review East Hampton Town Code Section 255-11-30 - 38 "Berms, fences and walls or gate". This application must be fully completed and submitted to the Architectural Review Board, along with the following information:

1. Fees: An application fee in the form of certified check, money order or Attorney's check made payable to the "Town of East Hampton" must be submitted in accordance with the fee schedule below. Fees are entirely nonrefundable once review of the particular application has commenced.
 - \$125 for a new Berm, Fence, Wall or Gate.
 - \$200 for an existing Berm, Fence, Wall or Gate.
2. Three (3) copies (*original plus two copies*) of the completed application.
3. Three (3) copies of a CURRENT scaled survey prepared by a licensed surveyor, accurately showing the location(s) of:
 - Proposed or existing berm, fence, wall or gate area distinctly highlighted.
 - All existing structure(s) on the property.
4. Three (3) copies of complete drawings & elevations. Include on the plans a description of all exterior materials and colors.

[*All paper copies of documents, plans, maps & photos submitted to the file must also be submitted in digital form. This may be in the form of \(1\) a flash drive, \(2\) an email with PDFs or \(3\) a link to your Dropbox.*](#)

- Deadline for submission of application is the First & Third Thursday of every month by 12:00 pm.
- The Board meets the Second & Fourth Thursday of every month at 4:00 pm.

Due to COVID-19, the Board will be meeting via Zoom with applicants participating via phone conference. A call-on number will be provided to the applicant prior to the meeting.

I. APPLICATION INFORMATION:

- A. Property Owner: _____
Address: _____
Email: _____ Telephone: _____
- B. Applicant (if other than property owner): _____
Address: _____
Email: _____ Telephone: _____
- C. Agent: _____
Address: _____
Email: _____ Telephone: _____

- D. Applicant is the (check one): Property Owner Agent Other: _____
- E. CORRESPONDENCE TO BE SENT TO (Check One): A B C
- F. Is the application subject to Site Plan Review? (check one): Yes No
- G. Are there any open code violations on the property? (check one) Yes No
- H. Were you referred to ARB by the Building Department? Yes No
 If yes, please explain why: _____

II. PROPERTY IDENTIFICATION AND LOCATION

- A. Street, house Number & Hamlet: _____
- B. Suffolk county Tax Map Number (SCTM#): 300- _____ - _____ - _____
- C. Zoning District (circle one): B A A2 A3 A5 MF Other: _____

III. PROJECT INFORMATION

For Fence, Wall, or Gate:

- Is the structure proposed or existing: Proposed Existing
- Material: _____ Maximum Height: _____
- Finish (natural, paint, stain, etc.): _____ Total Length: _____

For Berm:

- Maximum Height: _____ Total Length: _____

Lighting:

- Please indicate if there is proposed or existing lighting: Proposed Existing
- Quantity: _____ Wattage: _____
- Location: _____ Type: _____

- A. What is the proposed (or existing) structure? _____

- B. Where is the proposed (or existing) structure located on the property?
 Front Yard Side Yard Rear Yard
- C. Is there fencing located off of the property? Yes No
- D. Is there fencing located on your property that does not belong to you? Yes No

I attest that the above information is complete and accurate to the best of my knowledge.

The owner, hereby authorizes the Architectural Review Board to enter the subject parcel to review the pending application for ARB approval.

Signature: _____ Date: _____