

# TOWN OF EAST HAMPTON ARCHITECTURAL REVIEW BOARD

## Changes to Commercial Site Approval Application



Please consult with Town Code Section 255-7-30 (E). 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.

- \$200 for a proposed change
- \$350 for work that has commenced prior to obtaining proper approval.

2. **Four (4) copies (original plus 2 copies) of the completed application form**

3. **Four (4) copies of a CURRENT scaled survey and site plan** prepared by a licensed surveyor, accurately showing the location(s) of

- All existing structure(s) on the property
- Proposed improvement drawn to scale
- Proposed landscaping

4. **One (1) copy of complete architectural site drawings and four (4) 11" x 17" copies**, with elevations drawn to the scale:  $\frac{1}{4}'' = 1'$ . Note: Include on the plans a description of all exterior materials and color. These include roofing, millwork, doors, railings, masonry, lighting, etc. If applicable – four (4) 11"x17" color photorealistic 3D architectural renderings.

5. 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 flashdrive, (2) an email with pdfs or (3) a link to your Dropbox.

### I. APPLICANT INFORMATION

Applicant or Applicant's agent is required to attend Architectural Review Board meeting for review of application

Deadline for submission of Application is the first and third Thursday by Noon

A. **Property Owner:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ **Facsimile:** \_\_\_\_\_

B. **Applicant** (if other than Property Owner): \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Facsimile:** \_\_\_\_\_

C. **Agent:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ **Facsimile:** \_\_\_\_\_

D. **CORRESPONDENCE TO BE SENT TO:** (check one)  A  B  C

E. **Is this application subject to Site Plan Review?** (check one)  Yes  No

A. **Are there any open code violations on the property?** (check one)  Yes  No

If yes, please explain the nature of the violation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NOTE: The Board meets the second & fourth Thursday of every month at 6:00 pm in the Court Room at 159 Pantigo Road, East Hampton, NY 11937.**

**II. PROPERTY IDENTIFICATION AND LOCATION**

A. Street, House Number & Hamlet: \_\_\_\_\_

B. Suffolk County Tax Map Number: 300- \_\_\_\_\_

C. Zoning District (circle one): B A A2 A3 A5 MF Other: \_\_\_\_\_

**III. PROJECT INFORMATION**

**Description of proposed (or existing) exterior changes:**

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

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_