



WESTCHESTER COUNTY DEPARTMENT OF HEALTH
Sherlita Amler, MD, Commissioner
25 Moore Avenue, Mount Kisco, NY 10549
914-864-7330

APPLICATION AND INFORMATION RELATING TO REALTY SUBDIVISIONS

Section I GENERAL DESCRIPTION

Pursuant to the provisions of Article X of the Sanitary Code of the Westchester County Health District. the following application is made and submitted with a plat for approval of the methods described herein for providing water, drainage and sewerage in the realty subdivision to be known as:

Title of Subdivision _____

Location _____ Section: _____ Block _____ Lot (s) _____
 (City, Village or Town)

Name and Address of Owner _____
 (If other than individual. given name and address of any joint owner, every officer of a firm, association or corporation. using separate sheet if necessary.)

Name and Address of Developer, if not Owner _____

Survey prepared by _____ L.S. NYS Lic. No. _____

Utilities designed by _____ P.E. NYS Lic. No. _____

Area of entire tract to be subdivided _____

Area of section proposed for subdivision under this application _____

Number of lots _____ Average size of lots _____

Do you intend to sell lots only? (Yes/No); Bldgs & Lots?(Yes/No);
 Both?(Yes/No).

Indicate local zoning and type of occupancy permitted _____

Does project conform to existing zoning?(Yes/No) If No, explain _____

SECTION II WATER SUPPLY (use appropriate section)

State whether property lies within or adjacent to a water district _____

NAME OF PUBLIC SUPPLY _____

Existing main (give location) _____

Extension of mains from (give connection points) _____

New mains to be installed by _____

PRIVATE WATER SUPPLY

Indicate type of wells proposed _____ Anticipated Depth _____
Average yield sought _____ gallons/minute. Source of Information _____

Section III SEWAGE AND SEWAGE DISPOSAL (use appropriate section)

Watershed on which property is located _____
Is tract in existing local sewer district? _____
Is tract adjacent to an existing local sewer district? _____
Is tract in county sewer district? _____

NAME OF PUBLIC SEWER DISTRICT _____

Existing main (give location) _____
Extension of mains from (given connection points) _____
New Sewer mains to be installed by _____

SEPARATE SEWAGE DISPOSAL SYSTEMS

Note: Individual approval is required for each system installed.

Nature of soil to depth of 7 feet _____
How determined _____ By whom _____
Soil information to be provided on Department design data sheet.

Section IV LAND DRAINAGE

Is regrading proposed? (yes/no) If regrading is proposed existing and pro- posed topography must be indicated on the plan.

State proposed method and indicate on the plans routing of surface and sub- surface water from streets, roofs, land and other areas. _____

Section V SIGNATURE

Sworn to before me this _____
day of _____ 20 _____
Signature _____

Notary Public

Signature _____
(Preparer)
Signature _____
Title _____

Application shall be made by and signed by persons as set forth in Chapter 8773, Article III, Section 873.300 of the Westchester County Sanitary Code.S.D.18