

# TOWN OF HUNTINGTON

DEPARTMENT OF PLANNING AND ENVIRONMENT

## APPLICATION FOR REMOVAL OF EXCESS MATERIAL

PURSUANT TO LOCAL LAW NO. 34-2015

PLEASE TYPE OR PRINT CLEARLY

1. NAME OF FILED MAP / SITE PLAN:	
2. FILED MAP NUMBER & DATE / SITE PLAN APPROVAL DATE:	
3. PROPERTY ADDRESS / TIE DISTANCE:	
4. SCTM #:	
5. OWNER’S NAME, ADDRESS & PHONE NUMBER:	
6. DEVELOPER’S NAME, ADDRESS & PHONE NUMBER:	
7. DESIGN PROFESSIONAL’S NAME, LICENSE NO., ADDRESS & PHONE NUMBER:	
8. WILL EXCESS MATERIAL BE REMOVED? (SAND, GRAVEL, BANKRUN, ETC.) <b>YES / NO</b>	9. AMOUNT OF MATERIAL TO BE REMOVED IN <b>CUBIC YARDS</b> :
10. FEE REQUIRED? <b>YES / NO</b>	11. FEE TOTAL @ <b>\$2.00/CUBIC YARD</b> : \$
12. CUT & FILL ANALYSIS WITH NYS LICENSED PROFESSIONAL SEAL ( <b>PLAN NAME &amp; DATE PREPARED</b> ):	
<u>OWNER</u> STATE OF NEW YORK} SS: COUNTY OF SUFFOLK}  _____ Owner’s Name  _____ Owner’s Signature  Sworn to before me this ____ day of _____, 20____  Notary Public:	<u>APPLICANT</u> STATE OF NEW YORK} SS: COUNTY OF SUFFOLK}  _____ Applicant’s Name  _____ Applicant’s Signature  Sworn to before me this ____ day of _____, 20____  Notary Public:
FOR TOWN USE ONLY (LEAVE BLANK)	
PLANNING DEPT. FILE #:	
PRE-CONSTRUCTION MEETING DATE:	
INITIAL FEE REQUIRED: \$	DATE RECEIVED:
ADDITIONAL FEE REQUIRED: \$	DATE RECEIVED:
BALANCE RETURNED: \$	DATE RETURNED: