



Greene County Planning Board

Planning and Zoning (239 Review) Referral Form

County Use Only

Date Received: _____ Referral ID: _____

Planning Board Comments due by: _____

REFERRING AGENCY: _____
(Town/Village Board, Planning Board, ZBA)

1. Referral Name (landowner/purchaser etc.) _____ Parcel ID #: _____
2. Street Address/Municipality/Location _____
3. Zoning District and General Land Use Classification _____ Ag District No. 124: YES / NO
(Circle)
4. Type of Referral
☐ New Zoning Law and Map ☐ Site Plan Review ☐ Area Variance ☐ Moratorium ☐ Other
☐ Amended Zoning Law/Map ☐ Special Use Permit ☐ Use Variance ☐ New or Amended Comprehensive Plan
5. General Description of proposed project: _____

6. This referral is required because the property is located within 500 feet of a:
☐ Boundary of the Village of _____ or Town of _____
☐ Boundary of this existing or proposed county or state park or recreation area: _____
☐ Right-of-way of the following existing or proposed state or county highway or road: _____
☐ Existing or proposed right-of-way of any stream or drainage channel owned by the county or for which the county has established channel lines.
☐ Existing or proposed boundary of state or county owned land on which a public building/institution is located.
☐ Boundary of a farm operation in an agricultural district.
7. Anticipated Public Hearing Date: _____ Time: _____ Location: _____
8. To be deemed complete a referral should be supplemented by the following as applicable (check all that apply):
☐ Application ☐ Applicable Zoning Law or section of Zoning Law ☐ Location Map ☐ Site Map or Plan
☐ Supporting Planning and Zoning Board Letters or Reports ☐ SEQR Documents ☐ Other (Specify)
9. SEQR Action: ☐ Type I ☐ Type II ☐ Unlisted Lead Agency: _____
10. If referral involves a variance, give reason why variance is needed (e.g., 5 foot side yard request while law requires 10 feet, required parking not provided, etc.) _____

Official Completing this form: Name _____ Title _____
Address _____ Municipality _____ Zip Code _____
Phone _____ Email _____

**Please email completed form with supporting material to: planning@greencountyny.gov, or mail to:
Greene County Planning Board, 411 Main Street, Suite 419, Catskill, NY, 12414, Phone (518) 719-3290**

The Greene County Planning Board meeting is held every third Wednesday of the month. The referral with supporting documentation must be received 12 days prior to the County Planning Board's meeting to allow adequate time for review and to be placed on the monthly agenda. By law, the Greene County Planning Board has 30 days after the receipt of a complete referral to review an application and offer recommendations. Therefore 30 day notice is recommended to ensure proper review. This 30 day period begins after staff determines the referral submittal to be complete.

In accordance with [General Municipal Law](#), all referrals must be accompanied by "full statement" of the proposed action, which means all materials required by and submitted to the referring body as an application on the proposed action, including a completed environmental assessment form and all other materials required by the referring body to make its determination on significance pursuant to the state environmental quality review act. A completed Part I of the SEQR Environmental Assessment Form, or Environmental Impact Statement, Negative Declaration, or indication of SEQR Type II Status must be included with all referrals.

Within thirty days after the referring agency takes final action, a report of the final action must be filed with the county. A referring body which acts contrary to a recommendation of modification or disapproval of a proposed action shall set forth the reasons for the contrary action in such report. A referral is not deemed complete until referring agency submits a Notice of Final Action.