



VILLAGE OF SAGAPONACK

PO Box 600
3175 Montauk Highway
Sagaponack, NY 11962
www.sagaponackvillage.org
631-537-0017 631-537-0612 (FAX)

APPLICATION FOR A AGRICULTURAL FENCE PERMIT

1. Completed Agricultural Fence Application to include:
 - Completed application form
 - A survey showing the location of the fence and gate(s)
 - Property owners authorization for the installation of the fence
 - Fee of \$600.00
2. Applicant should become familiar with Village Code 245-49 (D) which includes the following requirements:
 - The fence and poles can be no higher than eight (8) feet with round wood poles no greater than 6" diameter
 - Fence must be removed by property owner if the field is not farmed after 2 years
 - Any fencing on road frontage must be kept clear of any vegetation
 - If the property owner changes and the property is still being farmed, or the farmer changes, an updated application will have to be submitted and re-approved
 - Where alternatives to location of gates on road frontage fencing are available, those options should be used
 - If property is not in current cultivation, the farmer must plant the fields with a cash crop within twelve (12) months of the fence permit approval or the permit may be revoked and the fence will be removed.

PART I – PROPERTY and OWNER INFORMATION

1. Name of Owner: _____
2. If owner is a corporation or LLC, name of person authorized to act on behalf of Corporation or LLC:

3. Owner's Mailing Address: _____
4. Owner's E-Mail Address: _____
5. Owner's Telephone/Cell Number: _____
6. Property Address: _____ Tax Map# 473615-____ - ____ - ____.
7. Property Size: _____

PART II – FARMER INFORMATION:

1. Name of Farmer: _____
2. Farmer's Mailing Address: _____
3. Farmer's E-Mail Address: _____
4. Farmer's Telephone/Cell Number: _____

PART III – ATTORNEY INFORMATION – if applicable

- 1. Name of Attorney: _____
- 2. Attorney’s Mailing Address: _____
- 3. Attorney’s E-Mail Address: _____
- 4. Attorney’s Telephone/Cell Number: _____

PART IV – AGENT INFORMATION – if applicable

- 1. Name of Agent: _____
- 2. Agent’s Mailing Address: _____
- 3. Agent’s E-Mail Address: _____
- 4. Agent’s Telephone/Cell Number: _____

PART V – CONTRACTOR INFORMATION:

- 1. Name of Contractor: _____
- 2. Contact for Contractor: _____
- 3. Contractor Mailing Address: _____
- 4. Contractor E-Mail Address: _____
- 5. Contractor Telephone/Cell Number: _____

Contractor will be required to file current liability and workers compensation insurance with the Village prior to issuance of a permit.

PART VI – FARMING INFORMATION:

Describe the current farming operation of farmer who will be farming the property where fence is proposed to be installed. (proposed location of crops may be sketched by applicant on the survey)

If the application is for a start-up farm operation, please describe in detail the business plan for the first year of operation including capital investments, crops to be planted, and where the planting will occur. (proposed location of crops may be sketched by applicant on the survey) – attach separate sheet if necessary

Describe the economic loss that will occur to crops without the approval of this application.

Describe alternative types of fencing and gates that have been considered and why each is unacceptable.

By signing this application I acknowledge that I have read the application and attachments concerning agricultural fencing:

Print Name

Signature of Property Owner/Farmer

Date

Sworn to before this
___ day of _____, 20__

Notary Public

For Administrative Use Only

Date Received: _____

Permit Number: _____

Date Issued: _____

Building Inspector

Date

APPLICATION CHECK LIST

This application is submitted as follows: **(Initial each, as applicable)**

- (1) In three (copies) inclusive of one (1) original ()
- (2) Notarized properly ()
- (3) With written authorization signed by the owner if applicant is not owner ()
- (4) With three (3) accurate original surveys prepared by a NY State Licensed Surveyor showing all existing buildings, fences, easements and rights of ways. ()
- (5) With three (3) copies of every certificate of occupancy or completion issued for this property. ()
- (6) With the \$600.00 filing fee payable to the Village of Sagaponack ()
- (7) Copy of recorded deed and any easements ()
- (8) If within 300 feet of tidal wetlands, a NY State Dept. of Environmental Conservation determination or no jurisdiction letter is required ()
- (9) If Village Code Chapter 225 – Wetlands is applicable, a Southampton Town Conservation Board determination or no jurisdiction letter is required ()
- (10) Photographs or samples of fence materials ()
- (11) Applicant affirms that he/she will notify all property owners within a two hundred (200) foot radius by Certified Mail, return receipt requested. Notice must be at least ten (10) days prior to the scheduled review of the application by the Village Board of Trustees. Original receipts of the certified mailings must be submitted to the Village Clerk five (5) days prior to the review date and the signed returned receipt cards must be submitted to the Village Clerk at or prior to the review date. ()

CERTIFICATION OF APPLICANT

_____ states as follows:

(insert name)

- (1) I am interested in an application for a special permit now pending before the Village of Sagaponack Board of Trustees.
- (2) I reside at: _____
- (3) The nature of my interest in the aforesaid application is as follows:

- (4) If applicant or owner is a corporation, list officers:
 President: _____
 Vice President: _____
 Secretary: _____
 Treasurer: _____
- (5) Do any of the following individuals have an interest, as defined below, in the owner or applicant:
 (A) Any New York State officer, or
 (B) Any officer or employee of the Village of Sagaponack, Southampton Town or Suffolk County.

An officer or employee shall be deemed to have an interest in the owner or applicant when a relative is either a spouse, brother, sister, parents, children, grandchildren or the spouse of any of them:

- (1) Is the applicant or owner, or
- (2) Is an officer, director, partner or employee of the applicant or owner, or
- (3) Legally or beneficially owns or controls stock of a corporate applicant or owner, or
- (4) Is a party to an agreement with such and applicant or owner, express or implied, whereby he (she) may receive any payment or other benefit, whether or not for services rendered dependent or contingent upon the favorable approval of such application.

If the answer to any of the questions in Section 5 above is yes, then state the name, address, and nature and extent of the interest of such individual.

(Name)	(Address)
--------	-----------

(Extent of Interest)

A person who knowingly and intentionally fails to make such disclosure shall be guilty of a misdemeanor as provided for in General Municipal Law, Section 809



VILLAGE OF SAGAPONACK

PO Box 600
3175 Montauk Highway
Sagaponack, NY 11962
www.sagaponackvillage.org
631-537-0017 631-537-0612 (FAX)

AFFIDAVIT OF MAILING
AGRICULTURAL FENCE PERMIT

STATE OF NEW YORK)

)ss:

COUNTY OF SUFFOLK)

I, _____, being duly sworn, deposes and says:

1. I reside at _____

2. Pursuant to the provisions of Section 245-49 (D) (3) (a) of the Village of Sagaponack Code, deponent notified neighbors within 200 feet of the perimeter of subject properties of proposed Agricultural Fence Permit Application by certified mail, return receipt requested, addressed as set forth on the annexed original postmark receipts.

Signature of Deponent

Sworn to before me this
_____ day of _____, 20____.

Notary Public



VILLAGE OF SAGAPONACK

PO Box 600
3175 Montauk Highway
Sagaponack, NY 11962
www.sagaponackvillage.org
631-537-0017 631-537-0612 (FAX)

OWNER’S AUTHORIZATION

For Installation of Agricultural Fencing

STATE OF NEW YORK)

)ss:

COUNTY OF SUFFOLK)

_____, being duly sworn, depose and say, that I reside at _____, that I am the owner (or an officer of the corporation, which is the owner) of the property located at _____ where an agricultural fence is proposed to be installed, and hereby grant permission to _____ who is currently farming my property, to install the agricultural fence for the purpose of protecting his/her crops. I further acknowledge that if my property ceases to be used for agriculture, that I am responsible for the removal of the eight foot agricultural fencing.

Signature of Owner

Sworn to before me this _____ day of _____, 20____

Notary Public