

ARCHITECTURAL REVIEW BOARD QUICK FORM

Incorporated Village of Plandome Heights
37 Orchard Street Manhasset, N.Y. 11030
(516) 627-1136

Submission Date: _____
Application fee of \$50 required at time of submission. PAID: _____ (date)
PLEASE SUBMIT A PHOTO OF YOUR HOUSE WITH THE APPLICATION.

Owner's Name: _____

Owner's Address: _____

Section No.: _____ Block No.: _____ Lot No.: _____

Owner's Phone No.: _____ Owner's Cell: _____

Contractors Name: _____ Phone Number: _____

DESCRIPTION/ DETAILS OF WORK:

Miscellaneous: _____

Submit catalogue cuts and samples with application.

FENCE: (Finished surface must face out)

Material: Wood PVC Wrought Iron

Height: _____ (maximum height 4ft.)

Style: _____ (attach catalogues/brochure with picture)

SHED:

Structure: New Modified Shed Rebuilt/replacement

Height: _____ (maximum height 9 ft. to highest point of roof)

Dimensions/Floor area: _____ x _____ = _____

(cannot exceed 80 ft.)

(Shed continued)

Rear Yard Calculation: Length of rear yard : _____

Width of rear yard: x _____
=====

Rear yard total = _____
x 3.2%
=====

Maximum Shed
Floor Area = _____

(Floor area of shed cannot exceed 3.20% of rear yard or 80 sf whichever is less)

Roof pitch: _____ in _____ (Gabled roof minimum pitch 1 in 3)

Distance from rear and side lot line:

Rear: _____, Side: _____ (rear/side no less than 3ft and no more than 5 ft)

Note: shed has to be a minimum of 10 ft from rear wall of main building.

Planting buffer Zone: No. of evergreens: _____

Height: _____ (min. 4 ft)

Note: Building Permit application to be attached to this form.

Approved by ARB: _____
(Name and Title)

Date: _____