

Planning Board Application

Village of Marcellus

6 Slocombe Avenue
Marcellus, NY 13108
(315) 673-3112

APPLICATION TYPE - PLEASE SELECT ONE:

Site Plan Special Permit Sub-division Preliminary Sub-Division Final

PROJECT LOCATION INFORMATION:

Address of project: 9 Flower Lane Marcellus, NY 13108
Tax Map # 314801 006 - 03 - 08
Project Name: Coons Pond Subdivision

APPLICANT INFORMATION:

Property Owner: JAD Caster & The Caster Family Housing Trust
Address of property owner: 9 Flower Lane, Marcellus, NY 13108
Phone # Fax #

Lease Holder:
Address of property owner:
Phone # Fax #

Contact Person:
Address of property owner:
Phone # Fax #

Architect/Engineer:
Address of property owner:
Phone # Fax #

EXISTING PROPERTY INFORMATION

Current zoning classification: RA
Surrounding land use: Residential
North: Residential RA South: RA
East: RA West: RA

Total site area (sq feet or acreage): 1.05 Acres
Dimensions of property: 270 x 170 Irregular
Existing number of parking spaces:

Current land use (residential, commercial, undeveloped, etc.): Residential

Current conditions of site (buildings, brush, etc.): Single Family Home

PROPOSED PROJECT INFORMATION

Anticipated project development time: _____

Will this project be staged? NO If yes, explain: _____

Does project involve any designated wetlands? _____

Does project involve any flood plain development? NO

If yes, identify community panel: _____ Identify designation: _____

Identify State or Federal permits needed (list type and appropriate agency):

Anticipated increase in the number or residents, shoppers, employees, etc. as a result of this development:
0

Project description (please describe proposed use, demolitions, alterations and any proposed new construction):

Subdividing into 2 lots to sell the lot in the REAR of the PROPERTY to the Village of MARCELLUS, so they can MAINTAIN the Retention Pond.

I hereby certify that the statements and information provided herein are true and accurate to the best of my knowledge and belief.

Applicant's signature:  Date: 7/28/25

FOR OFFICE USE ONLY

Project # _____	Description: _____	Fee: _____
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Date application received: _____ Received by: _____

Date application found to be complete: _____

Total Fee Due: \$ _____ Date Paid: _____ Cash Receipt # _____