

**NORTH GREENBUSH PLANNING BOARD  
DOCUMENTATION OF APPLICATION PACKET DISTRIBUTION**

Applicants for new or revised **Site Plan** applications, **Minor** or for **Major Subdivision**, **must submit this completed checklist with application**. Information needs to be sent to the agencies below: **Mark the method it was sent to each agency.**

PROJECT NAME: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_  
PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**ELECTRONIC DOCUMENTS ARE PREFERRED**

CHECK ONE FOR EACH Hand Delivery Electronic Delivery Mail Date

- |  |                          |                          |       |
|--|--------------------------|--------------------------|-------|
| 1. Laberge Group (only at the direction of the Building Department)                              | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 4 Computer Drive West, Albany, NY 12205  |                          |                          |       |
| <a href="mailto:Rflaberge@labergegroup.com">Rflaberge@labergegroup.com</a>                       |                          |                          |       |
| 2. North Greenbush Police:   | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 133 Bloomingrove Drive, Troy, NY 12180   |                          |                          |       |
| <a href="mailto:Info@NorthGreenbushPolice.org">Info@NorthGreenbushPolice.org</a>                 |                          |                          |       |
| 3. North Greenbush Fire Dist # 1   | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 350 North Greenbush Road, Troy, NY 12180   |                          |                          |       |
| <a href="mailto:adminassistant@ngfd.org">adminassistant@ngfd.org</a>                             |                          |                          |       |
| 4. North Greenbush Ambulance   | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 409 Main Avenue, Wynantskill, NY 12198   |                          |                          |       |
| <a href="mailto:president@northgreenbushambulance.com">president@northgreenbushambulance.com</a> |                          |                          |       |

**WHEN NECESSARY** – If permits or approvals from these departments will be needed as part of the project, please send to:

- |  |                          |                          |                          |       |
|--|--------------------------|--------------------------|--------------------------|-------|
| 5. North Greenbush Highway Dept.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <a href="mailto:mmartinez@northgreenbush.org">mmartinez@northgreenbush.org</a> |                          |                          |                          |       |
| 6. Renss. County Highway Dept.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <a href="mailto:klangley@rensco.com">klangley@rensco.com</a>                   |                          |                          |                          |       |
| 7. NYS DOT (Region 1)  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 50 Wolf Road, Albany, NY 12232, Attn: Guy Tedesco PE                           |                          |                          |                          |       |
| <a href="mailto:Gaetano.Tedesco@dot.ny.us">Gaetano.Tedesco@dot.ny.us</a>       |                          |                          |                          |       |
| 8. NYSDOT (Renss. County Residency)  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| 288 Troy Road, Rensselaer, NY 12144, Attn: Mark Saunders PE Resident Engineer  |                          |                          |                          |       |
| <a href="mailto:Mark.Saunders@dot.ny.us">Mark.Saunders@dot.ny.us</a>           |                          |                          |                          |       |
| 9. Renss. County Health Dept.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <a href="mailto:Relder@rensco.com">Relder@rensco.com</a>                       |                          |                          |                          |       |
| 10. Renss. County Sewer Dept.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <a href="mailto:dgardner@rensco.com">dgardner@rensco.com</a>                   |                          |                          |                          |       |
| Water Street, Troy, NY 12180, Attn: Derrick Gardner                            |                          |                          |                          |       |

BY: \_\_\_\_\_  
PRINT NAME SIGNATURE DATE