



**Town of New Paltz  
Planning Board**

**\*\*\*SITE PLAN / SPECIAL USE APPLICATION\*\*\***

Date Received \_\_\_\_\_ Fee Paid \_\_\_\_\_ File No. PB \_\_\_\_\_

Eligible Meeting Date \_\_\_\_\_ Date Paid \_\_\_\_\_ Scheduled Meeting Date \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY – DO NOT WRITE ABOVE THIS LINE\*\*\*\*\*

**Owner/Applicant Information**

Owner of Record Name and Address \_\_\_\_\_

Applicant's Name and Address \_\_\_\_\_

Applicant's Telephone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Professional Consultant's Name and Address \_\_\_\_\_

Consultant's Telephone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

**Property Information**

Property Location \_\_\_\_\_

Tax Map SBL# \_\_\_\_\_ Current Zoning \_\_\_\_\_

Total Site Area \_\_\_\_\_ acres Property Frontage Length \_\_\_\_\_ feet

Describe current land use (i.e., vacant, woodland, farmland, developed, etc.) \_\_\_\_\_

Any easements or restrictions on the land? (If so, describe) \_\_\_\_\_

Is the property located within 500 feet of an Agricultural District? ☐ Yes ☐ No

Is the property located within 500 feet of a municipal boundary, a state or county highway, or state or county owned lands? ☐ Yes ☐ No

**Site Plan / Special Use Proposal Information**

Type of development: ☐ Business and/or professional offices ☐ Retail sales, restaurant ☐

Accessory apartment ☐ Light industrial, warehouse ☐ Mixed Use, Business park ☐ Commercial

recreation ☐ Multiple family residential ☐ Hospitality establishment ☐ Place of public assembly ☐

Other \_\_\_\_\_

Building area in sq. ft. \_\_\_\_\_ Parking spaces provided \_\_\_\_\_

Will a private road, public road, community water system or central sewer system be proposed?

☐ Yes ☐ No (If Yes, describe) \_\_\_\_\_

**Environmental Setting Information**

Site affected by (check all that apply):

- |   |  |                                     |
|---|--|-------------------------------------|
| <input type="checkbox"/> State or Federal wetland(s)  | <input type="checkbox"/> Watercourse(s)                        | <input type="checkbox"/> Floodplain |
| <input type="checkbox"/> Steep Slopes (greater than 15%)  | <input type="checkbox"/> Archaeological or Historic Resources  |                                     |
| <input type="checkbox"/> Visual Resources   | <input type="checkbox"/> Potentially Significant Habitat Areas |                                     |
| <input type="checkbox"/> Past Agricultural Pesticide Applications <input type="checkbox"/> Important Natural Features (i.e., part of contiguous forest >200 acres, shrubland, or meadow >10 acres; large rock outcrops) |  |                                     |
| <input type="checkbox"/> New Paltz Priority Biodiversity Area (available at <a href="http://arcg.is/14jDLP">http://arcg.is/14jDLP</a> ) <input type="checkbox"/> Hydric Soils   |  |                                     |

\*\*\*\*\*

I hereby certify the above information to be true and correct according to my knowledge and belief.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_



**Town of New Paltz  
Planning Board  
SITE PLAN / SPECIAL USE  
CHECKLIST**

This Checklist includes the minimum information required before the Planning Board will consider the site plan application ready for its consideration. However, this Checklist should not be construed to imply that no additional information will be required to qualify for the Board's review consideration, since unique features of certain properties and certain land uses require more detailed investigation and disclosure than others. For full plan and report requirements, the applicant must refer to applicable regulations, specifications and standards, as detailed in the Town Zoning Code (Chapter 140).

If plans are being submitted for Conceptual Review or Sketch Plan Review, indicate which items are in compliance at time of submission. Certain items may not be required at this time. This determination will be made by the Building Department and/or the Planning Board Chairperson.

Applicants or their professional consultants must fill out this Checklist, certifying that all of the items have been addressed, and attach a written explanation which provides the specific reason why a particular item might not be applicable due to site-specific circumstances. Until all Checklist items have been completed, along with specific explanations for all items not included, the application will not be eligible for the Board's consideration of Sketch Plan Review. This Checklist (and written explanation of omitted items, if applicable) must be submitted with the **original Site Plan / Special Use Application form and nine additional paper copies of the application and all documents** before it can be scheduled for review by the Planning Board. **A digital copy of each document must also be submitted at the time of submission.**

Additionally, the Applicant must submit a written **Project Description Narrative**, which concisely describes the proposed project, addressing: 1) its location; 2) a general description of existing adjacent and neighborhood uses; 3) the type and purpose of the proposed development; 4) the property's existing condition and use; 5) the zoning district in which it is located; 6) the scope of the proposed development (i.e., project acreage, number, size and use of buildings, parking facilities and expected traffic generation, hours of operation, total area of land disturbance); 7) any potential impact on the immediate area (i.e., aesthetics, drainage, natural resources, compatibility with neighboring uses, etc.), and 8) potential impacts on community services (i.e., school, traffic network, utilities, emergency services, etc.). This required Narrative should be limited to one typewritten page. **The required Narrative must be submitted with the Site Plan / Special Use Checklist (including written explanation of omitted items, if applicable) and Site Plan / Special Use Application form before the project can be scheduled for review by the Planning Board.**

**NAME OF PROPOSED PROJECT:** \_\_\_\_\_

**LOCATION OF PROPOSED PROJECT:** \_\_\_\_\_

**NAME OF APPLICANT:** \_\_\_\_\_

**1. LAND USE INFORMATION**

LAND USE DESCRIPTION	YES	NO	N/A
Access to Public Street provided?			
Land for proposed development lies totally within the Town?			
Variance(s) required <input type="checkbox"/> and/or granted <input type="checkbox"/> (check boxes that apply)			
Previous site plan approvals granted, approved map copy provided?			
County Planning Board referral required?			
Town Street, County or State Highway access approval required?			
Town Street, Private Road, Public Water or Sewer proposed?			
County Health Dept. approval required?			
<b>LAND USE DESCRIPTION (continued)</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>

NYSDEC Stormwater Discharge Permit required?			
NYSDEC Wastewater SPDES Discharge Permit required?			
Property located within the designated floodplain area?			
Wetland (State or Federal) Disturbance Permit or Stream Disturbance Permit(s) or Water Quality Certification required?			

## 2. ENVIRONMENTAL INFORMATION (Check boxes which apply.)

	Type I	Type II	Unlisted	Exempt
SEQRA Classification				
	Short EAF	Full EAF	Not Applicable	
Environmental Assessment Form Submitted				

**3. SKETCH PLAN CHECKLIST INFORMATION:** (sheet size shall be 22" X 34", 30" X 42" or 36" X 48", folded to 8 1/2" X 11"). All information to be shown at a scale not less than 1" = 100', or larger. When the plan consists of multiple sheets with match lines, a 1" = 200' overall plan must also be submitted.

If plans are being submitted for Conceptual Review or Sketch Plan Review, indicate which items are in compliance at time of submission. Certain items may not be required at this time. This determination will be made by the Building Department and/or the Planning Board Chairman.

**Please submit a map created using the Ulster County Parcel Viewer (available at <http://ulstercountyny.gov/maps/parcel-viewer/>) showing the highlighted parcel with the following map layers turned on:**

- **FEMA Adopted Flood Hazards**
- **Freshwater Wetlands**
- **National Wetlands Inventory**
- **Hydric Soils**
- **Habitat Cores**
- **Biologically Important Areas**

**Note that on the basis of this information and the location and extent of the proposed project, the Planning Board may request a habitat assessment be completed following the Town's Habitat Assessment Guidelines, available on the Planning Board website.**

Plans shall ultimately include the following:

	MAP INFORMATION (ITEM A-G MUST BE COMPLETED AT TIME OF SUBMISSION PER § 140-52 OF THE TOWN CODE)	YES	NO
A.	The name and address of the owner of record of the property and the name, address and professional seal of the individual preparing the site plan.		
B.	The names of all owners of record of adjacent properties, including those across streets, roadways, rights of way and easements, including Tax Map SBL #s.		
C.	The accurate location of the boundaries of the applicant's property and any existing lot lines, streets, easements or other reservations located within it.		
D.	The location of all existing buildings, structures, sidewalks, landscaped areas and other man-made features of the site and related setback dimensions, as well as those on adjacent properties within 100 feet of the property boundary. (Setback dimensions for structures on adjacent properties need not be shown if unavailable.)		
E.	The proposed location, use, floor area and design of all buildings and structures with proposed		

	setback dimensions.		
F.	A tabular analysis of the proposed use of all floor space, clearly indicating the proposed type of use by floor level and the proposed division of buildings into units of separate occupancy.		
G.	The location and design of all driveways and parking and loading areas, including improvements to adjoining streets designed to facilitate the safe and convenient flow of traffic to and from the site.		
H.	The location and design of the proposed water supply and sewage disposal and stormwater drainage systems, along with an analysis of the impact of the proposed site development upon them.		
I.	The location and design of all other proposed improvements, including signs, exterior lighting, recreational facilities, fences, walls, refuse enclosure, buffer screening and landscaping.		
J.	The proposed nature and location of any uses which will not be located within a building or structure including storage and display areas, if any.		
K.	Existing and proposed contours, with vertical intervals of not more than two feet, unless waived by the Planning Board, extending at least 50 feet beyond the site boundaries, and reference to the United States Geological Survey datum or other approved benchmark.		
L.	The nature and location of all other existing site features including water bodies, streams, watercourses, wetlands, floodplain boundaries, wooded areas, rock outcrops and single trees with a diameter at breast height (dbh) of 12 or more inches with any and all regulated buffer areas. The plan shall clearly indicate which site features are to be retained and which will be removed or altered.		
M.	Appropriate plans for the protection of the site's environment during the course of construction, including soil erosion and sedimentation control, protection of existing vegetation, noise control, limits on hours of operation, access routes for construction vehicles and other similar measures as may be appropriate in each individual case.		
N.	The name and address of the developer, if other than the owner.		
O.	A vicinity map at a scale of not less than 1" = 2000' and an area (tax) map showing the tax parcels within 500' of the site.		
P.	North arrow and graphic map scale		
Q.	Existing zoning district, with district boundaries on or within 300' of the site.		
R.	The location of all utilities (water, sewer, electric, telephone and gas) on or nearby the property.		
S.	The location of all culverts and drainage facilities on or nearby the property, with pipe sizes, materials and grades.		
T.	Approximate limits of proposed clearing and grading		
U.	Bulk Standards Schedule, indicating zoning district dimensional standards compliance, listed as both "required" and "provided"		
V.	Schematic rendering of building elevation, including general architectural style, dimensions, construction materials, color, etc.		
W.	Sight distance dimensions at intersections with existing streets and roadways, location of proposed highway improvements.		
X.	Proposed utilities (water, sewer, electric, telephone, etc.) and schematic drainage analysis with the approximate size and location of proposed stormwater management facilities, location of proposed utility and drainage easements.		
Y.	Location of proposed open spaces and recreation areas, location of buffer areas and screening devices.		
Z.	Location of proposed pedestrian trails and sidewalks		
AA.	Location of proposed outdoor storage and refuse handling provisions		
BB.	Location and detail of all proposed site signage (including size, color, illumination, etc.)		
CC.	Location, type, wattage and type of shielded site lighting		
DD.	Proposed landscaping, including species type, size and spacing		
EE.	Proposed grading, indicating a minimum 2 feet contour intervals		
FF.	Stamp and signature of licensed engineer or architect		

GG.	Any other information that is clearly necessary to determine compliance with the provisions of this law		

**\*\*\*\* APPLICANT'S SUBMITTAL INFORMATION COMPLETENESS CERTIFICATION \*\*\*\***

I hereby certify that I have carefully reviewed the above-listed Town's requirements for the review of site plan / special use applications, including each of the checklist items listed above, have accurately addressed these requirements and certify to the best of my knowledge and belief that all requirements have been met. I further understand that any required item that is determined by the Town Planning Board to have been inadequately addressed will delay the processing of the attached original application with twelve copies and will result in additional review expense.

By: \_\_\_\_\_  
Applicant or Agent for the Applicant

Date: \_\_\_\_\_

**NAME OF PROPOSED PROJECT:** \_\_\_\_\_

**LOCATION OF PROPOSED PROJECT:** \_\_\_\_\_

**NAME OF APPLICANT:** \_\_\_\_\_

**\*\*\*\* FOR PLANNING BOARD USE ONLY \*\*\*\***

Date SITE PLAN / SPECIAL USE REVIEW CHECKLIST, EAF, LETTER OF AGENT and PROJECT DESCRIPTION NARRATIVE Submitted: \_\_\_\_\_

Date CHECKLIST Checked: \_\_\_\_\_ Checked By: \_\_\_\_\_

**Site Plan / Special Use Application Submittal Review Completion Status**

SUBMISSION ITEM	YES	NO	DATE ACCEPTED	COMMENTS
Site Plan /Special Use Application Form complete				
Letter of Agent attached (if required)				
Project Description Narrative				
Environmental Assessment Form (from DEC Mapper)				
Site Plan / Special Use Checklist complete				
Application review fee paid				

# **OWNER'S AFFIDAVIT**

The undersigned states and declare(s) that:

1. I am the owner of property ("the Property") located at:  
Street Address: \_\_\_\_\_  
Tax Map Section-Lot-Block No. \_\_\_\_\_
2. I have attached a copy of the deed giving me a fee title interest in the Property, which is recorded in the Office of the Ulster County Clerk at 244 Fair Street, 2<sup>nd</sup> Floor, Kingston, NY 12401.
3. I am making, or if I am not the applicant, have agreed and consented to allow: \_\_\_\_\_  
\_\_\_\_\_ to make an application to the Town of New Paltz for land use approval(w) from the Town of New Paltz Planning Board and/or Zoning Board of Appeals that will, if granted benefit the Property.
4. I have the legal right to make or authorize the making of said application.
5. To the best of my knowledge and belief, the statement made in that application are true and correct.
6. I hereby authorize \_\_\_\_\_ to act as my representative in all matters regarding said application(s).
7. I expressly grant permission to the Planning Board/Zoning Board of Appeals and its authorized representatives to enter upon the Property, at all reasonable times for the purpose of conducting inspections and becoming familiar with site conditions. I acknowledge and agree that I may revoke this grant of permission **in writing**, and that such revocation will constitute an immediate withdrawal of my land use application(s) and no further action will be taken until or unless a new application is submitted to, and accepted by, the Town of New Paltz Building Department.
8. I acknowledge and agree that the Town of New Paltz may incur substantial costs in review of any land use application, and that the applicant and the property owner are jointly and severally responsible for the payment of all application fees, application review fees, and inspection fees incurred by the Town during the review of this application, including all reasonable engineering, legal and consultant review fees and related costs, that are necessary for the complete and proper review of this application, including environmental review fees.

Applicant's Acknowledgment Signature: \_\_\_\_\_

9. I acknowledge and agree that while the Town will endeavor to have the person or entity who made the land application reimburse the Town for those fees, costs, or other expenses, in the event that they are not promptly paid, the owner is responsible if they are not promptly paid by the applicant, and if they are not promptly paid by the owner, the Town Board may determine that the fees, costs, or other expenses paid by the Town for which the Town has not been reimbursed shall be assessed, levied and collected as provided in Article VIII of Chapter 127 of the Town Code, and impose such costs upon the Property in the same manner as a Town tax.

10. Under penalty of perjury I declare that I have examined this affidavit and that it is true and correct.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name/Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 )ss.:  
COUNTY OF \_\_\_\_\_ )

On \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/h/er/their capacity, and that by his/her/their signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

The Department of Environmental Conservation requires you complete and submit a Short Environmental Assessment Form (SEAF) Part 1 with your application.

This form must be completed online and can be found at:

<https://gisservices.dec.ny.gov/eafmapper/>

This online form requires your parcel information be added.

It will then generate a fillable PDF form specific to your property and some answers will have been answered by the software.

You must supply the remainder of information requested.

NOTE: Certain answers require additional information and detailed explanation.

Any “Yes” response must also include related details.

All fields must be filled in.

Print, and sign the last page prior to submission to the Planning/Zoning Secretary.

Questions? 845-255-0604 X 5



## Town of New Paltz Planning Board Application Review and Administrative Fees

**Effective January 2024** (*adopted January 4, 2024*)

Per Article IX – Planning and Zoning Fees of Town of New Paltz Code  
Planning Board fees are non-refundable and subject to other requirements per  
§140-59 to §140-62; §140-63; §140-66 to §140-69

**Planning Board escrow deposits are subject to §140-60.1**

FEE TYPE	DETAILS
<b>Conceptual Review</b> (not requiring consultants)	One conceptual review with the Planning Board will be granted at no charge.
<b>Conceptual Review with Consultants*</b>	At the discretion of the Planning Board Chair, a conceptual review requiring consultants may be granted. The fee of \$500.00 per consultant will be collected prior to the review. The conceptual review will not exceed ONE (1) hour.
<b>Clearing and Grading</b>	<b>\$250.00 base fee, PLUS</b> \$125.00 for each additional meeting after the first two (2) meetings, PLUS \$150.00 for each site visit required by the Planning Board Engineer.
<b>Sign-related application review</b> (separate from Building Department Permit fees)	A) <u>Individual sign application review</u> : \$150.00 B) <u>Master Sign Plan application review</u> : \$150.00 base fee PLUS \$50.00 per sign. C) <u>Simplified Sign Plan</u> (request for waiver of Sign Plan review by Planning Board: \$50.00)
<b>Site Plan Review</b>	A) <u>Residential</u> : \$500.00 base fee, PLUS \$150 per dwelling unit. B) <u>Non-residential</u> : \$150.00 base fee PLUS, fee per square foot Up to 1,000 SF: \$250.00 1,001-10,000 SF: \$2,500.00 10,001-20,000 SF: \$5,000.00 20,001+ SF: \$7,500.00 C) <u>Non-residential site changes only</u> : \$500.00 D) <u>Farm/Agriculture Site Plan</u> : \$450.00
<b>Simplified Site Plan Review</b> (waiver of site plan review)	\$550.00 Application must be in accordance with §140-51.3 and §140-51.4 of the Zoning Code.
<b>Wetland Permit Short Form</b>	No Charge
<b>Wetland Permit Long Form</b>	\$250.00
<b>Steep Slope/Clearing Fee</b>	\$250.00
<b>Special Use Permit Applications</b>	As determined by the Building Inspector.
<b>Subdivision Review</b>	A) <u>Subdivision application with no net gain of lots</u> : \$600.00 B) <u>Subdivision application creating one (1) or more lots</u> : \$750.00 PLUS \$200.00 for each additional lot.
<b>Wireless Communications Facility</b>	A) <u>Minor Facility</u> : \$575.00 base fee for the first three meetings and \$185.00 for each additional meeting. B) <u>Major Facility</u> : \$1400.00 for the first three (3) meetings and \$300.00 for each additional meeting.
<b>Other Fees</b>	Dormant Application Fee required after 12 months of no activity by the applicant, an application will be considered dormant. In order for the review process to begin again, a <b>reinstatement fee of one-half of the initial application fee</b> will be charged. 90 Day Extension Fee: \$75.00
<b>Escrow Deposits</b>	Escrow deposits will be determined upon initial application review. (As defined in Town Code Section §140-60.1)
<b>Recreation Trust Fund Fees</b> (in lieu of parkland set-aside)	\$5,500.00 for each additional lot created by subdivision or each dwelling unit created by site plan.





## Town of New Paltz Planning Board

Adele Ruger (Chair), Lyle Nolan (Deputy Chair), Adrian Capulli, Matthew DiDonna, Lauren McPadden, Jane Schanberg, & Jennifer Welles  
[planzoneboard@townofnewpaltz.org](mailto:planzoneboard@townofnewpaltz.org)

In-Person, Live-streamed/Recorded at 7:00 p.m. usually on the second and fourth Monday of each month, at the Justice Court: 59 N. Putt Corners Road, New Paltz. Live streamed on YouTube:

[https://www.youtube.com/channel/UCx\\_gKl1M\\_G1YAumRIihs\\_Q](https://www.youtube.com/channel/UCx_gKl1M_G1YAumRIihs_Q)

## 2024 MEETING SCHEDULE

SUBDIVISION & SITE PLAN SUBMISSION DEADLINE AT NOON	SIGN PLAN DEADLINE AT NOON	PLANNING BOARD MEETING DATE
December 22, 2023, Friday	December 29, 2022, Friday	January 8, Monday
January 8, Monday	January 16, Tuesday	January 22, Monday
January 29, Monday	February 5, Monday	February 12, Monday
February 12, Monday	February 20, Tuesday	February 26, Monday
February 26, Monday	March 4, Monday	March 11, Monday
March 11, Monday	March 18, Monday	March 25, Monday
March 25, Monday	April 1, Monday	April 8, Monday
April 11, Thursday	April 18, Thursday	April 25, Thursday
April 29, Monday	May 6, Monday	May 13, Monday
May 16, Thursday	May 23, Thursday	May 30, Thursday
May 28, Tuesday	June 3, Monday	June 10, Monday
June 10, Monday	June 17, Monday	June 24, Monday
June 24, Monday	July 1, Monday	July 8, Monday
July 8, Monday	July 15, Monday	July 22, Monday
July 29, Monday	August 5, Monday	August 12, Monday
August 12, Monday	August 19, Monday	August 26, Monday
August 26, Monday	September 3, Tuesday	September 9, Monday
September 9, Monday	September 16, Monday	September 23, Monday
October 15, Tuesday	October 21, Monday	October 28, Monday
October 31, Thursday	November 7, Thursday	November 14, Thursday
November 12, Tuesday	November 18, Monday	November 25, Monday
November 25, Monday	December 2, Monday	December 9, Monday

## Town of New Paltz Planning Board

**NOTE: Only one  
(1) original of  
this form should  
be submitted  
with your  
application.**

### PROJECT SUMMARY FORM

Date Received: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Escrow Initial Deposit: \_\_\_\_\_

Replenishment: \_\_\_\_\_

Name of Project: \_\_\_\_\_

Project Property Address: \_\_\_\_\_

Tax Map S-B-L: \_\_\_\_\_

PB#: \_\_\_\_\_

***(Office use only – do not write above this line)***

Owner Name: \_\_\_\_\_

Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Escrow Guarantor/Payor: \_\_\_\_\_

Name/Title/Contact No. \_\_\_\_\_

Tax ID for Escrow Account: \_\_\_\_\_ *(must complete W-9)*

\_\_\_\_\_  
Signature of Owner/Applicant (or authorized agent)

\_\_\_\_\_  
Date

*NOTE: This form is used for bookkeeping purposes only.  
It is **not** part of the public record of the Planning Board Application file.  
This information will be used for monthly escrow billing only.*

**NOTE: ONLY (1) ONE SIGNED ORIGINAL W-9 SHOULD BE FILED WITH YOUR APPLICATION**

Form **W-9**  
(Rev. October 2018)  
Department of the Treasury  
Internal Revenue Service

## Request for Taxpayer Identification Number and Certification

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the  
requester. Do not  
send to the IRS.**

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>	
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
or	
<b>Employer identification number</b>	
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign  
Here**

Signature of  
U.S. person ▶

Date ▶

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

For more information visit the IRS website: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>