



**JOINT PLANNING  
BOARD FOR THE  
TOWN AND VILLAGE  
OF GREENWICH**

**2 Academy Street,  
Greenwich, NY 12834  
518-692-7611 ext. 107**

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Dear **MAJOR** Subdivision Applicant:

Enclosed are the preliminary requirements for your application.

1. Application Form
2. Designated Agent Form to be used if applicable.
3. Agricultural Data Sheet - only needed if parcel is within an Ag District.
4. A list of required plat notes. (for your surveyor's information)
5. A checklist for Minor Applications  
*Please use this checklist to make sure you have as complete an application as possible before submitting it to the Planning Board for consideration.*
6. Realty Subdivision Checklist (fill out page 1 only)
7. Long form Environmental Assessment Form (SEQR). Please answer the questions through page 13.
8. Driveway Permit Application (only applicable if you live on a Town road)
9. Procedure to file Subdivision maps in Washington County.

**Please understand that according to Real Property Law, Article 9, Sec. 334, there shall be no "offering of any such lots, plots, blocks, or sites for sale" before the subdivision is approved and recorded with the County Clerk.**

Major Subdivision Fee Schedule:

Application Fee:	<b>\$300.00 Due at Submission</b>
Certified Mail Fees:	<b>Based on number of adjoining lots, fee will be given By the clerk following the public hearing</b>
Lot Fee:	<b>\$125.00 per lot created Due at Approval</b>
Recreation Fee:	<b>\$100.00 per lot created Due at Approval</b>
<b>(All buildable lots are subject to a recreation fee)</b>	

**Note:** Board regulations require submission of applications ten (10) days in advance of the regular meeting which is held on the third Thursday of every month. Applications may be submitted to the Town Clerk or Planning Board Clerk during regular business hours. For more information call the Planning Board Clerk, Aaron Northrup, at 518-692-7611 ex. 107 or email [planning.clerk@greenwichny.org](mailto:planning.clerk@greenwichny.org).

An applicant may come to a regular Planning Board meeting before making an application for an informal conference on the proposed subdivision at no fee. This does require that the applicant ask the Clerk to be put on the agenda ten (10) days in advance of the meeting.

**The Applicant must file the approved and signed final plat with the Washington County clerk within 30 days of approval or the approval is deemed null and void!**

**APPLICATION FOR MAJOR SUBDIVISION**

Application No. \_\_\_\_\_ (assigned by Board) Date \_\_\_\_\_

**COMPLETE ALL OF THE FOLLOWING:**

Name(s) of Property Owners \_\_\_\_\_

**Complete** Mailing Address \_\_\_\_\_

Telephone Number: \_\_\_\_\_

I/We hereby make application to the Joint Planning Board for the Town and Village of Greenwich to sell or lease lot(s) from the property described below.

**Site Location: Name of street or road:** \_\_\_\_\_

**Tax Map ID / SBL # of Property:** \_\_\_\_\_

Names & COMPLETE 911 or PO BOX ADDRESSES AND ZIP CODES (**per tax rolls**) of all adjoining property owners **including across the street** of the present total acreage.

North: \_\_\_\_\_

South: \_\_\_\_\_

East: \_\_\_\_\_

West: \_\_\_\_\_

**Zoning District:** \_\_\_\_\_ **Setbacks:** Front: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_

**Size of the present property:** \_\_\_\_\_ acres **Size of lot(s) to be subdivided:** \_\_\_\_\_ acres

Nature of transaction: Lease Sale (circle one)

**Please attach to this application a SKETCH showing:**

- 1. Present property with approximate measurements, highways, buildings, etc.
- 2. Location and size of the proposed subdivision.

This preliminary sketch does not have to be a survey or precise but should represent the location and size of the subdivision clearly. **A survey IS REQUIRED for final approval.**

**Please attach a copy of DEED.**

The undersigned hereby requests approval by the Joint Planning Board for the Town and Village of Greenwich of the above itemized subdivision and agrees to comply with the provisions of the subsequent Planning Board approval and with all applicable provisions of law and regulations with respect to development of this subdivision or portions thereof, and with applicable sections of the NYS Real Property Law.

Signature \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

**AGENCY DESIGNATION FORM - SUBDIVISION**

**The owner or his representative must be present at all meetings on this proposal.**

I, \_\_\_\_\_, the owner of property in the Town of Greenwich or Village of Greenwich (whichever is applicable) in Washington County, New York, Hereby designate \_\_\_\_\_, to act as Representative and agent in connection with any proceeding to subdivide real property in the Town of Greenwich or Village of Greenwich (whichever is applicable), in Washington County, New York and I grant to the said representative and agent the authority to fill applications, make representations and warranties as if they were my own, and in every respect act on my behalf. In making this designation I understand that the verbal and written comments, utterances or statements made by my representative and agent shall be treated and considered as if they were made by me, and I shall be bound by such comments, utterances and statements as if I made them. I make this agency designation so that my personal appearance before any governmental entity or board for the Town of Greenwich or Village of Greenwich (whichever is applicable) is not necessary, and with the understanding that my designated representative and agent shall have total authority to represent my interests.

Signature \_\_\_\_\_

Sworn to Before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

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

## **Ag & Markets Law:**

### **Article 25-AA (Agricultural Districts) Section 301**

Farm Operation: the land and on-farm buildings, equipment, manure processing and handling facilities, and practices which contribute to the production, preparation and marketing of crops, livestock and livestock products as a commercial enterprise, including a “commercial horse boarding operation” as defined in subdivision thirteen of this section. Such farm operation may consist of one or more parcels of owned or rented land, which parcels may be contiguous or noncontiguous to each other.

### **Agricultural Data Statements**

NYS Agriculture and Markets Law (Article 25 AA, Section 305), Town Law 283a and Village Law 7-739 requires applicants for subdivision approvals, site plan reviews and use variances to submit an [Agricultural Data Statement](#) if the project meets the following criteria:

- The proposed project is within an Agricultural District or;
- The boundary of the proposed project site is with 500 feet of a farm operation with in an Agricultural District.

The local municipal board must evaluate and consider the Agricultural Data Statement in its review and consider the potential impacts of the proposed project on the functioning of the farm operation.

Pursuant to Town Law 283a and Village Law 7-739, the clerk of the reviewing board must send notice to the owners identified in the Agricultural Data Statement upon receipt of the application. The cost of such mailing shall be borne by the applicant. In addition, the clerk must refer all applications (except for subdivisions, Washington County Planning Board is not authorized to review subdivisions) requiring an Agricultural Data Statement to the County Planning Board for review as required by General Municipal Law 239-m.

#### **The Agricultural Data Statement must contain the following information:**

- Name and address of applicant
- Description of the proposed project and its location
- Name and address of any owner of an active farm operation
- A tax map (or other map) showing the site of the proposed project relative to the location of the farm operation.

The clerk of the reviewing board must send notice to the owners identified in the Agricultural Data Statement upon receipt of the application.

Please note, a sample [Agricultural Data Statement](#) (pdf)

<http://www.co.washington.ny.us>



**AGRICULTURAL DATA STATEMENT**

**Washington County Planning Agency General Municipal Law §239-M Referrals**

**Municipality:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructions:** This form must be completed for any application requiring municipal review for Special Use Permit, Site Plan Approval, or Use Variance that is proposed to occur on property within 500 feet (500') of a farm operation located in an Agricultural District (Section 283-a of Town Law or 7-739 of Village Law).

**PART I (completed by Applicant)**

Applicant

Owner, if different from Applicant

Name: _____	Name: _____
Address: _____	Address: _____
Phone #: _____	Phone #: _____
Email: _____	Email: _____

1. Type of Application:  Site Plan Approval       Special Use Permit       Use Variance

2. Description of Project (purpose, acreages involved, etc.) \_\_\_\_\_

3. Location of Project: Address: \_\_\_\_\_

Tax Map Number(s) \_\_\_\_\_

4. Is this parcel actively farmed?  YES       NO    If yes, principle farm type \_\_\_\_\_

5. Is this parcel within an Agricultural District?  YES       NO (Check with your local assessor)

6. List all farm operations within 500 feet of your parcel. (Check with your local assessor)

Name: _____	Name: _____
Address: _____	Address: _____
Tax Map Number(s) _____	Tax Map Number(s) _____
Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO	Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO
Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO	Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO
Name: _____	Name: _____
Address: _____	Address: _____
Tax Map Number(s) _____	Tax Map Number(s) _____
Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO	Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO
Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO	Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO
Name: _____	Name: _____
Address: _____	Address: _____
Tax Map Number(s) _____	Tax Map Number(s) _____
Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO	Agricultural District: <input type="checkbox"/> YES <input type="checkbox"/> NO
Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO	Parcel Actively Farmed: <input type="checkbox"/> YES <input type="checkbox"/> NO

Attach a separate sheet if necessary.

Attach tax map(s) showing the site of the proposed project relative to the location of the farm operation(s) identified above.

\*To create a map use GIS Web Map/Washington County: <https://washingtoncountyny.gov/270/GIS-Web-Map>

**Washington County Planning Agency General Municipal Law §239-M Referrals**

**Agricultural Data Statement**

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**PART II (completed by Municipal Clerk)**

Municipal Clerk **must** send Notice of the Project to the above farm operations by Return Receipt/Certified Mail. The applicant **must** pay for all postage costs. Return receipts must be presented to the Municipal Review Board.

Date Notice(s) Sent: \_\_\_\_\_

\_\_\_\_\_  
Signature of Clerk

\_\_\_\_\_  
Signature of Applicant

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**PART III (completed by Municipal Review Board)**

1. The municipal review board **shall** evaluate and consider this agricultural data statement in its review of the possible impacts of the proposed project upon the functioning of farm operations listed above within such agricultural district.

Reviewed by: \_\_\_\_\_  
Signature of Municipal Official

\_\_\_\_\_  
Date

2. **All** applications requiring an Agricultural Data Statement **must** be referred to the Washington County Planning Agency in accordance with amended Section 239-m of the General Municipal Law. A copy of this completed Agricultural Data Statement must be submitted along with the referral to the County Planning Department.

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Notice of Referral to Washington County Planning Agency – Date Sent: \_\_\_\_\_

## Joint Planning Board for the Village and Town of Greenwich

### Required Plat Notes:

1. Plat note required for perc tests:
  - a. Percolation test done on the property of: \_\_\_\_\_ on (date) \_\_\_\_\_
  - b. Property perc is as follows for Washington County septic systems.  
Run 1 = \_\_\_\_\_ minutes  
Run 2 = \_\_\_\_\_ minutes  
Run 3 = \_\_\_\_\_ minutes
  - c. Name of person performing perc test \_\_\_\_\_  
Title: \_\_\_\_\_
  
2. Plat Note Required for Sanitation and Water:
  - a. All on site sanitation and water facilities must meet New York State Dept. of Health specifications.
  
3. If any land is in or adjacent to an Agricultural District, the following Plat Note is required:

The land plotted herewith lies within (adjacent to) Washington County Agricultural District No. \_\_\_ wherein the use of highest priority is commercial agriculture by N.Y.S. law. Residents may be subject to the noises, odors, dusts and vapors, lights and potentially harmful farm chemicals associated with commercial agricultural operations and farm management practices at any time of day or night.

4. Plat Note Required: a box 4" x 5" to be reserved for Planning Board purposes.
  
5. Plat Note Required: To be put within the 4" x 5" box:

“Approval of Subdivision number \_\_\_\_\_ of the Joint Planning Board for the Town and Village of Greenwich, New York, is herewith granted on the \_\_\_ day of \_\_\_, 20\_\_\_ and is subject to all requirements and conditions of said motion. Any change, erasure, modification or revision of the Plat as approved, shall void this approval.”

Signed this \_\_\_ day of \_\_\_\_\_, 20\_\_\_,  
by \_\_\_\_\_, Chairman  
or \_\_\_\_\_, Clerk.

**JOINT PLANNING BOARD FOR THE VILLAGE AND TOWN OF GREENWICH, NY**

**Checklist of required information for MAJOR Subdivisions**

Major # \_\_\_\_\_ (assigned by Planning Board) Date: \_\_\_\_\_ Payment: \_\_\_\_\_

1. \_\_\_\_ Application completed, signed and dated, including name, address and phone number of the applicant and the tax ID number identifying the parcel to be subdivided.
2. \_\_\_\_ Copy of Deed
3. \_\_\_\_ Zoning District – Noting Town or Village
4. \_\_\_\_ Zoning Use - Refer to Zoning Ordinance - Table 1 & Table 2 for Town, or Attachment 1 in Village Zoning Law for Village
5. \_\_\_\_ Percent of lot coverage
6. \_\_\_\_ Names and COMPLETE 911 OR PO BOX ADDRESSES WITH ZIP CODES of adjoining landowners from the Tax rolls; including across the road and water courses.
7. \_\_\_\_ Application Fee - Due at Submission
8. \_\_\_\_ Preliminary sketch of property showing:
  - a) \_\_\_\_ Entire tract plus lot pattern
  - b) \_\_\_\_ Features (streams, roads, etc.)
  - c) \_\_\_\_ Utilities, proposed or existing
  - d) \_\_\_\_ Existing easements, deed covenants, etc.
  - e) \_\_\_\_ Agricultural District number, if applicable
  - f) \_\_\_\_ Contours extending 100' off site
9. \_\_\_\_ Designated Agent Form signed notarized and dated, if needed.
10. \_\_\_\_ Environmental Assessment Form (SEQR) part 1 only.
11. \_\_\_\_ Number of Subdivisions within the last 3 years including contiguous lots.
12. \_\_\_\_ 300 ft. road frontage on all lots (for Town) or 400 ft. road frontage on all lots (for Village)
13. \_\_\_\_ Five (5) Paper copies and One (1) Digital copy of the plat map 24" x 36" showing in addition to the above sketch:
  - a) \_\_\_\_ Description of boundary lines. Tax Map ID #
  - b) \_\_\_\_ Date, North arrow, scale, surveyor's certification
  - c) \_\_\_\_ Sanitation, water sites

- d) \_\_\_\_ Percolation test sites, results and person who performed the testing
- e) \_\_\_\_ Site Location
- f) \_\_\_\_ Existing house or building (s) site, well, septic and driveway locations
- g) \_\_\_\_ Proposed house or building site, well, septic and driveway locations
- h) \_\_\_\_ Sketch plan (not to scale) of entire tract plus lot(s) pattern(s)
- i) \_\_\_\_ Setbacks - see Zoning ordinance - Table 2 Use for Town Applications or Attachment 2 in the Village Zoning law for Village
- j) \_\_\_\_ Battenkill/Hudson River 100 ft. setbacks
- k) \_\_\_\_ Agricultural Data Statement - if needed
- l) \_\_\_\_ Subdivision Number
- m) \_\_\_\_ Planning Board Approval Box - see application packet
- n) \_\_\_\_ Required Plat notes - see application packet
- o) \_\_\_\_ All adjacent subdivisions including later phases of original plot.
- p) \_\_\_\_ Driveway approval from appropriate agency, State, County, Village, or Town
- q) \_\_\_\_ Cluster plan - required if parcel is located on prime agricultural soils and/or soils of statewide importance in any Zoning District. (Board may request a plan at their discretion in any Zoning District.
- r) \_\_\_\_ Proposed parcels of land proposed for public use and the conditions of such dedication (Village only)

**PLEASE SEE PAGE TWO OF THIS FORM FOR FINAL REQUIRMENTS**

**14. \_\_\_\_ MAJOR Subdivision FINAL**

- a) \_\_\_\_ 1 Mylar and 5 paper copies of final plat with signature with survey same as above items plus:
  - 1. Location and bearing of all streets, lots, and boundary lines.
  - 2. Curves, angles and dimensions.
- b) \_\_\_\_ Department of Health, (State or County) approval for septic system(s)
- c) \_\_\_\_ Lot fee(s), number of lots x \$125 = \_\_\_\_
- d) \_\_\_\_ Recreation fee(s) number of lots x \$100 = \_\_\_\_
- e) \_\_\_\_ Final Application Fee \$300.00

**15. \_\_\_\_ Realty Subdivision Checklist**



## Washington County Office of the County Clerk

Washington County Municipal Center

383 Broadway, Fort Edward, NY 12828

Tel: (518) 746-2170, Fax: (518) 746-2177, TDD: (518) 746-2146

Stephanie C. Lemery, County Clerk

Vanita Z. LaFarr, Deputy Clerk

# COUNTY CLERK REQUIREMENTS FOR FILING SUBDIVISION MAPS

1. Map must be on mylar.
2. Planning Board has signed the map or signature is on its letterhead (we do NOT check dates.)
3. Real Property Certification
4. 10 year Tax Search from Treasurer's Office. If taxes have been levied, we also need a copy of Paid Taxes.
5. DOH Certificate
6. Surveyor's Seal (Signed)
7. Surveyor's Certification (Signed) – This can be on the map or on letterhead.

We will then send a letter to the Planning Board stating the date and map number.

Please make sure the ink is dry on the mylar as it could rub off, removing lines.

## PROCEDURE TO FILE MAPS IN WASHINGTON COUNTY

After Planning Board Approval, most towns require maps to be recorded at the County Clerks office within a specified time, usually 30, 60 or 90 days. Be sure the map has the following stamped or attached on separate stationery:

- (A) Surveyor's certification and seal, both signed.
- (B) Town Planning Board Approval, seal and/or signatures.
- (C) Compliance with Sect. 1115 of the New York State Public Health Law  
(This form can be obtained from the County Clerk)

Required steps to file maps are as follows:

1. Obtain a Tax Map Maintenance Certificate [WCRPTS 503 (7)] from Real Property Tax Service. Mylar map and tax map number of parcel(s) are required. Certificates are issued within a few minutes. Fees for certificates are as follows:

1-3 Lot	\$25.00
4-9 Lot	50.00
10 or more	100.00

If paid by check, make check payable to **Washington County Treasurer**.

**NOTE: If the Planning Board considers the revision to be a "boundary line adjustment", there will be a fee charged and certificate issued since the revision necessitates a change to the tax map.**

2. Obtain a 10 year tax search from the Washington County Treasurer. Name & tax map number of parcel(s) are required. Fee for tax search is \$20.00. If paid by check, make payable to **Washington County Treasurer**. It may take the Treasurer's Office a few days or up to two weeks to complete, depending on current work load.

**NOTE: Upon receipt of search, check bottom to see if there is a notation about the search not covering a specific tax bill. If there is such notation, be sure you have a copy of that PAID receipt with you when you file your map with the County Clerk.**

3. Bring the mylar map, tax map maintenance certificate and 10 yr. tax search to the County Clerk's office for recording. Fee for recording a map is \$10.00. If paid by check, make payable to **Washington County Clerk**.

# Realty Subdivision Checklist

To be completed by owner/ applicant (or designated agent).

Please answer the following questions regarding your subdivision application:

- 1) Number of lots\* created by this subdivision: \_\_\_\_\_
  - 2) Number of lots to be created of 5 acres or less: \_\_\_\_\_
  - 3) Has this tract\* of land been subdivided within the past 3 consecutive years? \_\_\_\_\_
  - 4) If yes, please state the date(s) when the plats (maps) were filed with the Washington County Clerk's Office: \_\_\_\_\_
  - 5) Numbers of lots created by all previous subdivision(s) of 5 acres or less: \_\_\_\_\_
  - 6) Will the total number of lots of 5 acres or less from all subdivisions (including the subdivision currently being created) exceed 5 lots: \_\_\_\_\_
- 

I, \_\_\_\_\_ hereby certify that the  
*(Please print)*  
Information given above and contained in this form is true and accurate.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**\*Definitions:**

*The term lot(s) shall mean all lots, including non-contiguous lots, which are less than one-half mile from any point on the boundary of any other lot in the tract of land to be subdivided.*

*The term tract refers to "any body of land, including contiguous parcel of land under one ownership or under common control of any group of persons acting in concert as part of a common scheme or plan."(Public Health Law, Article 11, Section 1115 Subsection 2).*

**Compliance with Public Health Law**

*Applicant; please read the following and proceed according:*

If the answer to either question number 2 or 5 of the Realty Subdivision Checklist exceeds five (5) or if the answer to question number 6 is yes, then the applicant is creating a realty subdivision. Applicants creating a realty subdivision must apply to the New York State Department of Health for approval of the water supply and sewage service facilities in compliance with Public Health Law (Article 11, Title II).

Please use enclosed New York State Department of Health (NYSDOH) "Applicant's Checklist for Proposed Realty Subdivisions" and contact the NYSDOH for further information and instructions:

**Glens Falls District Office  
77 Mohican Street  
Glens Falls, NY 12801  
Phone (518) 793-3893**

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**For office use:**

If the applicant does not appear to meet the criteria of a realty subdivision and your municipality has determined that this subdivision does not require NYSDOH approval, please sign the statement below and attach this checklist to the approved subdivision plat (maps) for filing with the Washington County Clerk's Office. The municipal board with the authority to make the final decision regarding subdivision reviews should complete and sign the following statement:

The **Planning Board, Town Board or Village Board of Trustees** of the **Town/ Village**  
*(Circle One)* *(Circle One)*  
of \_\_\_\_\_ has determined that this subdivision does not meet the criteria of a Realty Subdivision as defined by Article 11 Title II Section 1115 of Public Health Law; therefore, does not require approval of the New York State Department of Health.

**Planning Board Chair, Town Supervisor or Village Mayor**  
*(Circle One)*

\_\_\_\_\_  
*Name (Please Print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**Full Environmental Assessment Form**  
**Part 1 - Project and Setting**

**Instructions for Completing Part 1**

**Part 1 is to be completed by the applicant or project sponsor.** Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either “Yes” or “No”. If the answer to the initial question is “Yes”, complete the sub-questions that follow. If the answer to the initial question is “No”, proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

**A. Project and Applicant/Sponsor Information.**

Name of Action or Project:		
Project Location (describe, and attach a general location map):		
Brief Description of Proposed Action (include purpose or need):		
Name of Applicant/Sponsor:		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Project Contact (if not same as sponsor; give name and title/role):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

**B. Government Approvals**

**B. Government Approvals, Funding, or Sponsorship.** (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, or Village Board of Trustees <input type="checkbox"/> Yes <input type="checkbox"/> No		
b. City, Town or Village Planning Board or Commission <input type="checkbox"/> Yes <input type="checkbox"/> No		
c. City, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input type="checkbox"/> No		
d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
<p>i. Coastal Resources.</p> <p><i>i.</i> Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>ii.</i> Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>iii.</i> Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		

**C. Planning and Zoning**

**C.1. Planning and zoning actions.**

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed?  Yes  No

- **If Yes**, complete sections C, F and G.
- **If No**, proceed to question C.2 and complete all remaining sections and questions in Part 1

**C.2. Adopted land use plans.**

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located?  Yes  No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located?  Yes  No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)  Yes  No

If Yes, identify the plan(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan?  Yes  No

If Yes, identify the plan(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**C.3. Zoning**

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance.  Yes  No  
If Yes, what is the zoning classification(s) including any applicable overlay district?

\_\_\_\_\_

\_\_\_\_\_

b. Is the use permitted or allowed by a special or conditional use permit?  Yes  No

c. Is a zoning change requested as part of the proposed action?  Yes  No

If Yes,

i. What is the proposed new zoning for the site? \_\_\_\_\_

**C.4. Existing community services.**

a. In what school district is the project site located? \_\_\_\_\_

b. What police or other public protection forces serve the project site?  
\_\_\_\_\_

c. Which fire protection and emergency medical services serve the project site?  
\_\_\_\_\_

d. What parks serve the project site?  
\_\_\_\_\_  
\_\_\_\_\_

**D. Project Details**

**D.1. Proposed and Potential Development**

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)?  
\_\_\_\_\_

b. a. Total acreage of the site of the proposed action? \_\_\_\_\_ acres  
b. Total acreage to be physically disturbed? \_\_\_\_\_ acres  
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? \_\_\_\_\_ acres

c. Is the proposed action an expansion of an existing project or use?  Yes  No  
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % \_\_\_\_\_ Units: \_\_\_\_\_

d. Is the proposed action a subdivision, or does it include a subdivision?  Yes  No

If Yes,

i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)  
\_\_\_\_\_

ii. Is a cluster/conservation layout proposed?  Yes  No

iii. Number of lots proposed? \_\_\_\_\_

iv. Minimum and maximum proposed lot sizes? Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

e. Will the proposed action be constructed in multiple phases?  Yes  No

i. If No, anticipated period of construction: \_\_\_\_\_ months

ii. If Yes:

- Total number of phases anticipated \_\_\_\_\_
- Anticipated commencement date of phase 1 (including demolition) \_\_\_\_\_ month \_\_\_\_\_ year
- Anticipated completion date of final phase \_\_\_\_\_ month \_\_\_\_\_ year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

f. Does the project include new residential uses?  Yes  No  
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion	_____	_____	_____	_____
of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)?  Yes  No  
 If Yes,

i. Total number of structures \_\_\_\_\_

ii. Dimensions (in feet) of largest proposed structure: \_\_\_\_\_ height; \_\_\_\_\_ width; and \_\_\_\_\_ length

iii. Approximate extent of building space to be heated or cooled: \_\_\_\_\_ square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage?  Yes  No  
 If Yes,

i. Purpose of the impoundment: \_\_\_\_\_

ii. If a water impoundment, the principal source of the water:  Ground water  Surface water streams  Other specify: \_\_\_\_\_

iii. If other than water, identify the type of impounded/contained liquids and their source.  
 \_\_\_\_\_

iv. Approximate size of the proposed impoundment. Volume: \_\_\_\_\_ million gallons; surface area: \_\_\_\_\_ acres

v. Dimensions of the proposed dam or impounding structure: \_\_\_\_\_ height; \_\_\_\_\_ length

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):  
 \_\_\_\_\_

**D.2. Project Operations**

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both?  Yes  No  
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)  
 If Yes:

i. What is the purpose of the excavation or dredging? \_\_\_\_\_

ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?

- Volume (specify tons or cubic yards): \_\_\_\_\_
- Over what duration of time? \_\_\_\_\_

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.  
 \_\_\_\_\_  
 \_\_\_\_\_

iv. Will there be onsite dewatering or processing of excavated materials?  Yes  No  
 If yes, describe. \_\_\_\_\_  
 \_\_\_\_\_

v. What is the total area to be dredged or excavated? \_\_\_\_\_ acres

vi. What is the maximum area to be worked at any one time? \_\_\_\_\_ acres

vii. What would be the maximum depth of excavation or dredging? \_\_\_\_\_ feet

viii. Will the excavation require blasting?  Yes  No

ix. Summarize site reclamation goals and plan: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area?  Yes  No  
 If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): \_\_\_\_\_  
 \_\_\_\_\_

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes  No

If Yes, describe: \_\_\_\_\_

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?  Yes  No

If Yes:

- acres of aquatic vegetation proposed to be removed: \_\_\_\_\_
- expected acreage of aquatic vegetation remaining after project completion: \_\_\_\_\_
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): \_\_\_\_\_
  
- proposed method of plant removal: \_\_\_\_\_
- if chemical/herbicide treatment will be used, specify product(s): \_\_\_\_\_

v. Describe any proposed reclamation/mitigation following disturbance: \_\_\_\_\_

c. Will the proposed action use, or create a new demand for water?  Yes  No

If Yes:

i. Total anticipated water usage/demand per day: \_\_\_\_\_ gallons/day

ii. Will the proposed action obtain water from an existing public water supply?  Yes  No

If Yes:

- Name of district or service area: \_\_\_\_\_
- Does the existing public water supply have capacity to serve the proposal?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No
- Do existing lines serve the project site?  Yes  No

iii. Will line extension within an existing district be necessary to supply the project?  Yes  No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_
  
- Source(s) of supply for the district: \_\_\_\_\_

iv. Is a new water supply district or service area proposed to be formed to serve the project site?  Yes  No

If Yes:

- Applicant/sponsor for new district: \_\_\_\_\_
- Date application submitted or anticipated: \_\_\_\_\_
- Proposed source(s) of supply for new district: \_\_\_\_\_

v. If a public water supply will not be used, describe plans to provide water supply for the project: \_\_\_\_\_

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: \_\_\_\_\_ gallons/minute.

d. Will the proposed action generate liquid wastes?  Yes  No

If Yes:

i. Total anticipated liquid waste generation per day: \_\_\_\_\_ gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): \_\_\_\_\_

iii. Will the proposed action use any existing public wastewater treatment facilities?  Yes  No

If Yes:

- Name of wastewater treatment plant to be used: \_\_\_\_\_
- Name of district: \_\_\_\_\_
- Does the existing wastewater treatment plant have capacity to serve the project?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No

• Do existing sewer lines serve the project site?  Yes  No  
 • Will a line extension within an existing district be necessary to serve the project?  Yes  No  
 If Yes:  
 • Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?  Yes  No  
 If Yes:  
 • Applicant/sponsor for new district: \_\_\_\_\_  
 • Date application submitted or anticipated: \_\_\_\_\_  
 • What is the receiving water for the wastewater discharge? \_\_\_\_\_

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?  Yes  No  
 If Yes:  
 i. How much impervious surface will the project create in relation to total size of project parcel?  
     \_\_\_\_\_ Square feet or \_\_\_\_\_ acres (impervious surface)  
     \_\_\_\_\_ Square feet or \_\_\_\_\_ acres (parcel size)  
 ii. Describe types of new point sources. \_\_\_\_\_  
 \_\_\_\_\_

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 • If to surface waters, identify receiving water bodies or wetlands: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 • Will stormwater runoff flow to adjacent properties?  Yes  No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?  Yes  No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?  Yes  No  
 If Yes, identify:  
 i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)  
 \_\_\_\_\_  
 ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)  
 \_\_\_\_\_  
 iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)  
 \_\_\_\_\_

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit?  Yes  No  
 If Yes:  
 i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year)  Yes  No  
 ii. In addition to emissions as calculated in the application, the project will generate:  
 • \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide (CO<sub>2</sub>)  
 • \_\_\_\_\_ Tons/year (short tons) of Nitrous Oxide (N<sub>2</sub>O)  
 • \_\_\_\_\_ Tons/year (short tons) of Perfluorocarbons (PFCs)  
 • \_\_\_\_\_ Tons/year (short tons) of Sulfur Hexafluoride (SF<sub>6</sub>)  
 • \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflouorocarbons (HFCs)  
 • \_\_\_\_\_ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?  Yes  No

If Yes:

*i.* Estimate methane generation in tons/year (metric): \_\_\_\_\_

*ii.* Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): \_\_\_\_\_

---

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?  Yes  No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): \_\_\_\_\_

---

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services?  Yes  No

If Yes:

*i.* When is the peak traffic expected (Check all that apply):  Morning  Evening  Weekend  
 Randomly between hours of \_\_\_\_\_ to \_\_\_\_\_.

*ii.* For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): \_\_\_\_\_

*iii.* Parking spaces: Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Net increase/decrease \_\_\_\_\_

*iv.* Does the proposed action include any shared use parking? Yes No

*v.* If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: \_\_\_\_\_

*vi.* Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site?  Yes  No

*vii.* Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles?  Yes  No

*viii.* Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes?  Yes  No

---

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy?  Yes  No

If Yes:

*i.* Estimate annual electricity demand during operation of the proposed action: \_\_\_\_\_

*ii.* Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): \_\_\_\_\_

*iii.* Will the proposed action require a new, or an upgrade, to an existing substation?  Yes  No

---

l. Hours of operation. Answer all items which apply.

<p><i>i.</i> During Construction:</p> <ul style="list-style-type: none"> <li>• Monday - Friday: _____</li> <li>• Saturday: _____</li> <li>• Sunday: _____</li> <li>• Holidays: _____</li> </ul>	<p><i>ii.</i> During Operations:</p> <ul style="list-style-type: none"> <li>• Monday - Friday: _____</li> <li>• Saturday: _____</li> <li>• Sunday: _____</li> <li>• Holidays: _____</li> </ul>
---	--

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?  Yes  No  
 If yes:  
 i. Provide details including sources, time of day and duration:  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

---

n. Will the proposed action have outdoor lighting?  Yes  No  
 If yes:  
 i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

---

o. Does the proposed action have the potential to produce odors for more than one hour per day?  Yes  No  
 If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage?  Yes  No  
 If Yes:  
 i. Product(s) to be stored \_\_\_\_\_  
 ii. Volume(s) \_\_\_\_\_ per unit time \_\_\_\_\_ (e.g., month, year)  
 iii. Generally, describe the proposed storage facilities: \_\_\_\_\_  
 \_\_\_\_\_

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q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?  Yes  No  
 If Yes:  
 i. Describe proposed treatment(s):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will the proposed action use Integrated Pest Management Practices?  Yes  No

---

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?  Yes  No  
 If Yes:  
 i. Describe any solid waste(s) to be generated during construction or operation of the facility:  
 • Construction: \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)  
 • Operation : \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)  
 ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:  
 • Construction: \_\_\_\_\_  
 \_\_\_\_\_  
 • Operation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

iii. Proposed disposal methods/facilities for solid waste generated on-site:  
 • Construction: \_\_\_\_\_  
 \_\_\_\_\_  
 • Operation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

s. Does the proposed action include construction or modification of a solid waste management facility?  Yes  No  
 If Yes:  
 i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): \_\_\_\_\_  
 ii. Anticipated rate of disposal/processing:  
 • \_\_\_\_\_ Tons/month, if transfer or other non-combustion/thermal treatment, or  
 • \_\_\_\_\_ Tons/hour, if combustion or thermal treatment  
 iii. If landfill, anticipated site life: \_\_\_\_\_ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste?  Yes  No  
 If Yes:  
 i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 ii. Generally describe processes or activities involving hazardous wastes or constituents: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 iii. Specify amount to be handled or generated \_\_\_\_\_ tons/month  
 iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility?  Yes  No  
 If Yes: provide name and location of facility: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:  
 \_\_\_\_\_  
 \_\_\_\_\_

**E. Site and Setting of Proposed Action**

**E.1. Land uses on and surrounding the project site**

a. Existing land uses.  
 i. Check all uses that occur on, adjoining and near the project site.  
 Urban  Industrial  Commercial  Residential (suburban)  Rural (non-farm)  
 Forest  Agriculture  Aquatic  Other (specify): \_\_\_\_\_  
 ii. If mix of uses, generally describe:  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Land uses and covertypes on the project site.

Land use or Covertypes	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces			
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____ _____			

c. Is the project site presently used by members of the community for public recreation?  Yes  No  
i. If Yes: explain: \_\_\_\_\_

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d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  Yes  No  
If Yes,  
i. Identify Facilities:  
\_\_\_\_\_

---

e. Does the project site contain an existing dam?  Yes  No  
If Yes:  
i. Dimensions of the dam and impoundment:  

- Dam height: \_\_\_\_\_ feet
- Dam length: \_\_\_\_\_ feet
- Surface area: \_\_\_\_\_ acres
- Volume impounded: \_\_\_\_\_ gallons OR acre-feet

ii. Dam's existing hazard classification: \_\_\_\_\_  
iii. Provide date and summarize results of last inspection:  
\_\_\_\_\_

---

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility?  Yes  No  
If Yes:  
i. Has the facility been formally closed?  Yes  No  

- If yes, cite sources/documentation: \_\_\_\_\_

ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:  
\_\_\_\_\_

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g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste?  Yes  No  
If Yes:  
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  
\_\_\_\_\_

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h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?  Yes  No  
If Yes:  
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:  Yes  No  
 Yes – Spills Incidents database Provide DEC ID number(s): \_\_\_\_\_  
 Yes – Environmental Site Remediation database Provide DEC ID number(s): \_\_\_\_\_  
 Neither database  
ii. If site has been subject of RCRA corrective activities, describe control measures: \_\_\_\_\_  
\_\_\_\_\_

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iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?  Yes  No  
If yes, provide DEC ID number(s): \_\_\_\_\_  
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):  
\_\_\_\_\_

v. Is the project site subject to an institutional control limiting property uses?  Yes  No

- If yes, DEC site ID number: \_\_\_\_\_
- Describe the type of institutional control (e.g., deed restriction or easement): \_\_\_\_\_
- Describe any use limitations: \_\_\_\_\_
- Describe any engineering controls: \_\_\_\_\_
- Will the project affect the institutional or engineering controls in place?  Yes  No
- Explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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**E.2. Natural Resources On or Near Project Site**

a. What is the average depth to bedrock on the project site? \_\_\_\_\_ feet

b. Are there bedrock outcroppings on the project site?  Yes  No  
 If Yes, what proportion of the site is comprised of bedrock outcroppings? \_\_\_\_\_%

c. Predominant soil type(s) present on project site: \_\_\_\_\_ %  
 \_\_\_\_\_ %  
 \_\_\_\_\_ %

d. What is the average depth to the water table on the project site? Average: \_\_\_\_\_ feet

e. Drainage status of project site soils:  Well Drained: \_\_\_\_\_ % of site  
 Moderately Well Drained: \_\_\_\_\_ % of site  
 Poorly Drained \_\_\_\_\_ % of site

f. Approximate proportion of proposed action site with slopes:  0-10%: \_\_\_\_\_ % of site  
 10-15%: \_\_\_\_\_ % of site  
 15% or greater: \_\_\_\_\_ % of site

g. Are there any unique geologic features on the project site?  Yes  No  
 If Yes, describe: \_\_\_\_\_  
 \_\_\_\_\_

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?  Yes  No

ii. Do any wetlands or other waterbodies adjoin the project site?  Yes  No  
 If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?  Yes  No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Lakes or Ponds: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Wetlands: Name \_\_\_\_\_ Approximate Size \_\_\_\_\_
- Wetland No. (if regulated by DEC) \_\_\_\_\_

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?  Yes  No  
 If yes, name of impaired water body/bodies and basis for listing as impaired: \_\_\_\_\_  
 \_\_\_\_\_

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i. Is the project site in a designated Floodway?  Yes  No

j. Is the project site in the 100-year Floodplain?  Yes  No

k. Is the project site in the 500-year Floodplain?  Yes  No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?  Yes  No  
 If Yes:  
 i. Name of aquifer: \_\_\_\_\_

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____          _____          _____</p>	
<p>n. Does the project site contain a designated significant natural community? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:  <i>i.</i> Describe the habitat/community (composition, function, and basis for designation): _____          _____  <i>ii.</i> Source(s) of description or evaluation: _____  <i>iii.</i> Extent of community/habitat:              • Currently: _____ acres              • Following completion of project as proposed: _____ acres              • Gain or loss (indicate + or -): _____ acres</p>	
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:  <i>i.</i> Species and listing (endangered or threatened): _____          _____          _____</p>	
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:  <i>i.</i> Species and listing: _____          _____</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If yes, give a brief description of how the proposed action may affect that use: _____          _____</p>	
<p><b>E.3. Designated Public Resources On or Near Project Site</b></p>	
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  <i>i.</i> If Yes: acreage(s) on project site? _____  <i>ii.</i> Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:  <i>i.</i> Nature of the natural landmark:      <input type="checkbox"/> Biological Community      <input type="checkbox"/> Geological Feature  <i>ii.</i> Provide brief description of landmark, including values behind designation and approximate size/extent: _____          _____          _____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:  <i>i.</i> CEA name: _____  <i>ii.</i> Basis for designation: _____  <i>iii.</i> Designating agency and date: _____</p>	

<p>e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site      <input type="checkbox"/> Historic Building or District</p> <p style="margin-left: 20px;">ii. Name: _____</p> <p style="margin-left: 20px;">iii. Brief description of attributes on which listing is based: _____</p>
<p>f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>
<p>g. Have additional archaeological or historic site(s) or resources been identified on the project site? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe possible resource(s): _____</p> <p style="margin-left: 20px;">ii. Basis for identification: _____</p>
<p>h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify resource: _____</p> <p style="margin-left: 20px;">ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____</p> <p style="margin-left: 20px;">iii. Distance between project and resource: _____ miles.</p>
<p>i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify the name of the river and its designation: _____</p> <p style="margin-left: 20px;">ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>

**F. Additional Information**

Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

**G. Verification**

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

**TOWN OF GREENWICH HIGHWAY DEPARTMENT**

**DRIVEWAY PERMIT APPLICATION**

(Section 213 of the Highway Law)

Check One:

\_\_\_\_\_ Driveway or Culvert

\_\_\_\_\_ Repair or Install Water Main Pipe

\_\_\_\_\_ Repair or Install Sewer Pipe

\_\_\_\_\_ Repair or Install Gas Pipes

**TAX MAP #** \_\_\_\_\_

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

To: Town of Greenwich Highway Superintendent:

Applicant's Name: \_\_\_\_\_

Applicant resides at (address): \_\_\_\_\_

Applicant's home phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

Applicant's business address: \_\_\_\_\_

Applicant's business phone: \_\_\_\_\_

Applicant is applying to (perform what type of work and at what address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This work will cross over or under a Town Highway situated in the Town of Greenwich, Washington County, known as \_\_\_\_\_ (road name) in accordance with the requirements as specified by the Town Superintendent of Highways, of the Town of Greenwich, which are hereinafter set forth; all forming a part hereof.

The work is to be performed between \_\_\_\_\_ and \_\_\_\_\_ 20\_\_.

Signature and authorization (if other than applicant) \_\_\_\_\_

**PERMIT  
(under section 213 of the Highway Law)**

Permission is hereby granted to \_\_\_\_\_ (name) to proceed as set forth and represented in the foregoing application, and at the particular location described therein, in accordance with the requirements specified and pursuant to the conditions and regulations whether general or special which are hereinafter set forth; all forming a part hereof; to wit:

1. This permit shall not be assigned or transferred without the written consent of the Town Superintendent of Highways.
2. The work authorized by this permit shall be performed in a manner satisfactory to the Town Superintendent of Highways.
3. Traffic shall be maintained by the applicant on the said section of Highway while the work is in progress and until its final completion.
4. The said Permittee shall be responsible for all damages resulting in bodily injury,

