

GENESEE COUNTY PLANNING BOARD REFERRALS

HOLLAND LAND OFFICE	NO	OTICE OF FINAL ACTION	
1802	GCDP Referral ID	T-01-LER-03-24	
TO TO THE TOTAL OF	Review Date	3/14/2024	
Municipality	LEROY, T.		
Board Name	TOWN BOARD		
Applicant's Name	LeRoy Town Board		
Referral Type	Zoning Text Amendme	nts	
Variance(s)			
Description:		to add Animal Shelter to the list of allowed uses with a General Commercial (C-2) District.	
Location	Entire Town of LeRoy		_
Zoning District	General Commercial (C	2) District	
DI 4411/17/16 DO 4 DD D	566141451156		

PLANNING BOARD RECOMMENDS:

	\sim		`TT	\sim		_			
NI		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			N		/\ L	-	N

EXPLANATION:

Due to a lack of quorum, the Genesee County Planning Board will not be able to make a formal recommendation. Non-binding Department Staff Recommendation: The proposed Zoning Text Amendments are intended to protect the health, safety, and welfare of the Town and should pose no significant countywide or inter-community impact.

March 14, 2024

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:

GENESEE COUNTY DEPARTMENT OF PLANNING

3837 West Main Street Road Batavia, NY 14020-9404 Phone: (585) 815-7901

DEPARTMENT USE ONLY: GCDP Referral # T-01-LER-03-24



* GENESEE COUNTY * PLANNING BOARD REFERRAL

RECEIVED Genesee County Dept. of Planning 3/5/2024

Required According to:

GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N (Please answer ALL questions as fully as possible)

`	
1. REFERRING BOARD(S) INFORMATION	2. Applicant Information
Board(s) LeRoy Planning Board	Name LeRoy Town Board
Address 48 Main Street	Address 48 Main Street
City, State, Zip LeRoy, NY, 14482	City, State, Zip LeRoy, NY, 14482
Phone (585) 768 - 6910 Ext. 243 Ph	one (585) 768 - 6910 Ext. 243 Email jsteinbrenner.code@leroyny
MUNICIPALITY: City Town Vi	lage of LeRoy
3. TYPE OF REFERRAL: (Check all applicable items)	
□ Area Variance □ Zoning Map □ Use Variance □ Zoning Text □ Special Use Permit □ Comprehens □ Site Plan Review □ Other:	
4. LOCATION OF THE REAL PROPERTY PERTAININ	G TO THIS REFERRAL:
A. Full Address	
B. Nearest intersecting road	
C. Tax Map Parcel Number	
D. Total area of the property	Area of property to be disturbed
E. Present zoning district(s) C-2	
5. <u>REFERRAL CASE INFORMATION:</u> A. Has this referral been previously reviewed by the G	
NO YES If yes, give date and action take	
B. Special Use Permit and/or Variances refer to the fo	llowing section(s) of the present zoning ordinance and/or law
C. Please describe the nature of this request Add Anir	nal Shelter to C-2 Uses Permitted with a Special Permit 165-19B
6. ENCLOSURES – Please enclose copy(s) of all appropria	te items in regard to this referral
☐ Site plan ☐ Location ma☐ Subdivision plot plans ☐ Elevation dr	map amendments p or tax maps awings data statement New or updated comprehensive plan Photos Other:
	the community in filling out this form (required information)
Name Jeff Steinbrenner Title CEO	ZEO Phone (585) 768 - 6910 Ext. 243
Address, City, State, Zip 48 Main Street, LeRoy, NY, 1	4482 Email jsteinbrenner.code@leroyny.org

Chapter 165. Zoning

Article IV. District Use and Bulk Requirements

§ 165-19. C-2 General Commercial District.

The C-2 General Commercial District is designed to accommodate the retail business establishments which are clearly of community service.

A. Permitted uses.

- (1) Stores and shops for conducting of wholesale or retail trade and business.
- (2) Offices, banks, restaurants.
- (3) Motor vehicle sales rooms and motor vehicle parking lots.
- (4) Motels and auto courts.
- (5) Self-storage facilities.

[Added 11-16-2000 by L.L. No. 2-2000]

B.

Uses permitted with a special permit.

- (1) Drive-through banks, drive-in restaurants, bowling alleys and similar community services and places of entertainment.
- (2) Gasoline stations, gasoline station-markets or public garages, under the following conditions and regulations: No lot or plot shall be used for the sale or storage of gasoline or oil until the owner has made application for and received a special permit therefor from the Town Board after a public hearing held for that purpose. The issuance of such a special permit is subject to conditions and safeguards as are deemed appropriate in the discretion of the Town Board.
- (3) Other uses of the same general character as those listed hereinabove which, in the opinion of the Board of Appeals, shall not be detrimental to the district in which they are located.¹

(4) Animal Shelter

[1]

Editor's Note: Former Subsection B(4), Planned unit development, which immediately followed this subsection, was repealed 5-11-2017 by L.L. No. 3-2017.

C.

Lot size requirements. No building used for commercial or business purposes shall be erected on a lot having a width of less than 200 feet and an area, exclusive of any area in a highway right-of-way, of less than 40,000 square feet.

D.

Yard requirements.

(1)

Maximum coverage: 40%.

(2)

Maximum building height: 40 feet.

(3)

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 project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Sponsor Information.

Name of Action or Project:		
Zoning Text amendment		
Project Location (describe, and attach a general location map):		
Town Of LeRoy		
Brief Description of Proposed Action (include purpose or need):		
Town Board would like to add Animal Shelter to C-2 uses permitted with a special us	se permit to Section 165-19B of Town	Code
Name of Applicant/Sponsor:	Telephone: 585-768-691)
Michael Risewick	E-Mail: mrisewick.code@	leroyny.org
Address: 48 Main Street	,	
City/PO: LeRoy	State: New York	Zip Code: 14482
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:	
Troperty Owner (if not same as sponsor).	E-Mail:	
A 11	E-IVIAII.	
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sport assistance.)	nsorship. ("Funding" includes grants, loans, tax	relief, and any other	r forms of financial
Government Entity	If Yes: Identify Agency and Approval(s) Required	Applicati (Actual or)	
a. City Council, Town Board, □Yes□No or Village Board of Trustees			
b. City, Town or Village ☐Yes☐No Planning Board or Commission			
c. City Council, Town or ☐Yes☐No Village Zoning Board of Appeals			
d. Other local agencies □Yes□No			
e. County agencies ☐Yes☐No			
f. Regional agencies			
g. State agencies □Yes□No			
h. Federal agencies ☐Yes☐No			
i. Coastal Resources.i. Is the project site within a Coastal Area, or	or the waterfront area of a Designated Inland Wa	terway?	□Yes ☑ No
ii. Is the project site located in a communityiii. Is the project site within a Coastal Erosion	with an approved Local Waterfront Revitalization Hazard Area?	on Program?	☐ Yes ☑ No ☐ Yes ☑ No
C. Planning and Zoning			
C.1. Planning and zoning actions.			
 only approval(s) which must be granted to enable If Yes, complete sections C, F and G. 	mendment of a plan, local law, ordinance, rule or ole the proposed action to proceed? applete all remaining sections and questions in Pa	·	∐Yes Z No
C.2. Adopted land use plans.			
a. Do any municipally- adopted (city, town, vill where the proposed action would be located?			□Yes☑No
If Yes, does the comprehensive plan include spewould be located?	ecific recommendations for the site where the pro-	oposed action	□Yes□No
b. Is the site of the proposed action within any le Brownfield Opportunity Area (BOA); design or other?) If Yes, identify the plan(s):	ocal or regional special planning district (for exa ated State or Federal heritage area; watershed m		□Yes□No
c. Is the proposed action located wholly or parts or an adopted municipal farmland protection If Yes, identify the plan(s):		al open space plan,	∐Yes ⊠ No

C.3. Zoning	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district?	∠ Yes □ No
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? If Yes, i. What is the proposed new zoning for the site?	□ Yes Z No
C.4. Existing community services.	
a. In what school district is the project site located? LeRoy Central School	
b. What police or other public protection forces serve the project site?	
Genesee County Sherrif	
c. Which fire protection and emergency medical services serve the project site? LeRoy	
d. What parks serve the project site? None	
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 components)?	d, include all
b. a. Total acreage of the site of the proposed action? acres b. Total acreage to be physically disturbed? acres	
b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?	
 c. Is the proposed action an expansion of an existing project or use? i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles square feet)? w	☐ Yes☐ No , housing units,
d. Is the proposed action a subdivision, or does it include a subdivision? If Yes,	□Yes□No
<i>i.</i> Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)	
ii. Is a cluster/conservation layout proposed?iii. Number of lots proposed?	□Yes □No
iv. Minimum and maximum proposed lot sizes? Minimum Maximum	
e. Will proposed action be constructed in multiple phases?i. If No, anticipated period of construction: monthsii. If Yes: months	□Yes□No
 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 progred determine timing or duration of future phases: 	

	ct include new resid				□Yes□No		
If Yes, show num	nbers of units propo						
	One Family	Two Family	Three Family	Multiple Family (four or more)			
Initial Phase							
At completion							
of all phases							
g. Does the propo	osed action include	new non-residentia	l construction (inclu	iding expansions)?	□Yes□No		
If Yes,			`	<i>5</i> 1 ,	– –		
i. Total number	of structures						
ii. Dimensions ((in feet) of largest p	roposed structure: _	height;	width; andlength			
				square feet			
				l result in the impoundment of any	□Yes□No		
	s creation of a wate	r supply, reservoir,	pond, lake, waste la	agoon or other storage?			
If Yes,	e impoundment:						
ii. If a water imp	e impoundment: oundment, the prin	cipal source of the	water:	Ground water Surface water strea	ms \square Other specify:		
iii. If other than v	water, identify the ty	ype of impounded/o	contained liquids an	d their source.			
iv Approximate	size of the propose	d impoundment	Volume	million gallons; surface area: _	acres		
v. Dimensions of	of the proposed dam	a impounding str	ucture:	height; length	acres		
				ructure (e.g., earth fill, rock, wood, con	crete):		
D.2. Project Op	erations						
				uring construction, operations, or both?	Yes No		
		ation, grading or in	stallation of utilities	or foundations where all excavated			
materials will i	remain onsite)						
If Yes:	imaga of the average	otion or dradging?					
ii How much ma	uterial (including ro	ation of diedging:	e etc.) is proposed t	o be removed from the site?			
				o be removed from the site:			
	nat duration of time						
				ged, and plans to use, manage or dispos	e of them.		
in Will there he	e onsite dewatering	or processing of av	agrated metarials?		Yes No		
	be						
v. What is the to	otal area to be dredg	ged or excavated? _		acres			
vi. What is the m	naximum area to be	worked at any one	time?	acres			
			r dredging?	feet			
	avation require blas				□Yes □No		
ix. Summarize sit	te reclamation goals	s and plan:					
h Would the pro	nosad sation sausa	or regult in alteration	on of increase or de	grasse in size of or angroushment			
				crease in size of, or encroachment	☐ Yes ☐ No		
If Yes:	into any existing wetland, waterbody, shoreline, beach or adjacent area? If Yes:						
<i>i.</i> Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic							
description):				<u> </u>			

<i>ii.</i> 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 proposed action cause or result in disturbance to bottom sediments? If Yes, describe:	□Yes□No	
iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation?If Yes:	☐ Yes ☐ No	
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): Describe and product is provided for the product in the product is product in the product in the product in the product is product in the product in the product in the product in the product is product in the product		
v. Describe any proposed reclamation/mitigation following disturbance:		
c. Will the proposed action use, or create a new demand for water? If Yes:	□Yes □No	
i. Total anticipated water usage/demand per day: gallons/day		
ii. Will the proposed action obtain water from an existing public water supply? If Yes:	□Yes □No	
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	
<i>iii.</i> Will line extension within an existing district be necessary to supply the project? If Yes:	□Yes □No	
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?If, Yes:	☐ Yes☐No	
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), maximum pumping capacity: gallons/mi	nute.	
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 al	l components and	
approximate volumes or proportions of each):		
iii. Will the proposed action use any existing public wastewater treatment facilities?If Yes:	∐Yes∐No	
 Name of wastewater treatment plant to be used: Name of district: 		
 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 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:	
Describe extensions of capacity expansions proposed to serve this project.	·
<i>iv.</i> 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 spec	cifying 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	□Yes□No
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?	
If Yes:	
<i>i.</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.	
::: Where will the stemposter maneff he directed (i.e. on site stemposter management facility/structures edicector	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent p	properties,
groundwater, on-site surface water or off-site surface waters)?	
If to surface waters, identify receiving water bodies or wetlands:	
• It to surface waters, identify receiving water bodies of wettailds:	
Will stormwater runoff flow to adjacent properties?	□Yes□No
<i>iv.</i> Does 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	□Yes□No
combustion, waste incineration, or other processes or operations?	
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)	
::: Stationary garage during apprehing (a.g., process amissions large hailors alectric concretion)	
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,	□Yes□No
or Federal Clean Air Act Title IV or Title V Permit?	
If Yes:	
i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet	□Yes□No
ambient air quality standards for all or some parts of the year)	
ii. In addition to emissions as calculated in the application, the project will generate:	
•Tons/year (short tons) of Carbon Dioxide (CO ₂)	
•Tons/year (short tons) of Nitrous Oxide (N ₂ O)	
•Tons/year (short tons) of Perfluorocarbons (PFCs)	
•Tons/year (short tons) of Sulfur Hexafluoride (SF ₆)	
•Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs)	
Tons/year (short tons) of Hazardous Air Pollutants (HAPs)	

h. Will the proposed action generate or emit methane (included landfills, composting facilities)? If Yes:		□Yes□No
i. Estimate methane generation in tons/year (metric):ii. Describe any methane capture, control or elimination me electricity, flaring):		enerate heat or
i. Will the proposed action result in the release of air polluta quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., di		□Yes□No
 j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services? If Yes: i. When is the peak traffic expected (Check all that apply) Randomly between hours of	:	∏Yes∏No
iv. Does the proposed action include any shared use parkinv. If the proposed action includes any modification of exis	ting roads, creation of new roads or change in existing a	□Yes□No
vi. Are public/private transportation service(s) or facilities avii Will the proposed action include access to public transpoor other alternative fueled vehicles?viii. Will the proposed action include plans for pedestrian or pedestrian or bicycle routes?	ortation or accommodations for use of hybrid, electric	□Yes□No □Yes□No
k. Will the proposed action (for commercial or industrial profor energy?If Yes:i. Estimate annual electricity demand during operation of the commercial or industrial proformation.		∏Yes∏No
ii. Anticipated sources/suppliers of electricity for the project other):	et (e.g., on-site combustion, on-site renewable, via grid/le	ocal utility, or
iii. Will the proposed action require a new, or an upgrade to	, an existing substation?	□Yes □ No
Hours of operation. Answer all items which apply. i. During Construction: Monday - Friday: Saturday: Sunday: Holidays:	 ii. During Operations: Monday - Friday:	

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction,	□Yes□No
operation, or both? If yes:	
i. Provide details including sources, time of day and duration:	
ii. Will 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?Describe:	□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:	
p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons)	□Yes□No
or chemical products 185 gallons in above ground storage or any amount in underground storage? If Yes:	
i. Product(s) to be stored	
iii. Generally describe proposed storage facilities:	
q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides,	☐ Yes ☐No
insecticides) during construction or operation?	_
If Yes:i. Describe proposed treatment(s):	
ii. Will the proposed action use Integrated Pest Management Practices?r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal	☐ Yes ☐No☐ Yes ☐No
of solid waste (excluding hazardous materials)?	
If Yes:	
 i. Describe any solid waste(s) to be generated during construction or operation of the facility: Construction:	
• Operation : tons per (unit of time)	
ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid wast	
• Construction:	
Operation:	
iii. Proposed disposal methods/facilities for solid waste generated on-site:	
Construction:	
• Operation:	
- Optimon	

	oes the proposed action include construction or modi-	fication of a solid waste m	nanagement facility?	☐ Yes ☐ No		
If Yes:						
ı.	<i>i.</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-c	combustion/thermal treatm	nent, or			
	• Tons/hour, if combustion or thermal treatment					
	If landfill, anticipated site life:					
	ill proposed action at the site involve the commercial	generation, treatment, sto	orage, or disposal of hazardous	□Yes□No		
	raste?					
If Y	es: Name(s) of all hazardous wastes or constituents to be	generated handled or ma	naged at facility:			
ι.	value(s) of all hazardous wastes of constituents to be	generated, nandied of ma	naged at facility.			
ii.	Generally describe processes or activities involving h	azardous wastes or consti	tuents:			
iii.	Specify amount to be handled or generated to	ons/month				
	Describe any proposals for on-site minimization, recy		us constituents:			
12	Will any hazardous wastes be disposed at an existing	offeite hazardous waste f	acility?	□Yes□No		
	es: provide name and location of facility:					
If N	o: describe proposed management of any hazardous v	wastes which will not be s	ent to a hazardous waste facilit	y:		
E. S	Site and Setting of Proposed Action					
E. 1	. Land uses on and surrounding the project site					
	existing land uses.	• , •,				
	Check all uses that occur on, adjoining and near the Jrban ☐ Industrial ☐ Commercial ☐ Residu		iral (non farm)			
		(specify):				
	If mix of uses, generally describe:	\1 \ <i>7</i> \ \				
b. I	and uses and covertypes on the project site.					
	Land use or	Current	Acreage After	Change		
	Covertype	Acreage	Project Completion	(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.)					
•						
	(lakes, ponds, streams, rivers, etc.)					
•	Wetlands (freshwater or tidal)					
•	Non-vegetated (bare rock, earth or fill)					
•	Other					
	Describe:					
l						

c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain:	□Yes□No
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? If Yes, i. Identify Facilities:	□Yes□No
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: Surface area: feet acres 	
 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 facil If Yes:	□Yes□No lity?
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:	
iii. Describe any development constraints due to the prior solid waste activities:	
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? If Yes:	□Yes□No
<i>i.</i> Describe waste(s) handled and waste management activities, including approximate time when activities occurred	ed:
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? If Yes:	□Yes□ No
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☐ Neither databaseProvide DEC ID number(s):	
ii. If site has been subject of RCRA corrective activities, describe control measures:	
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?If yes, provide DEC ID number(s):	□Yes□No
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:	
E.2. Natural Resources On or Near Project Site	
a. What is the average depth to bedrock on the project site? fee	t
b. Are there bedrock outcroppings on the project site? If Yes, what proportion of the site is comprised of bedrock outcroppings?	☐ Yes ☐ No
	-
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
<u> </u>	_% 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, □Yes□No
ponds or lakes)?	, fivers,
ii. Do any wetlands or other waterbodies adjoin the project site?	□Yes□No
If Yes to either <i>i</i> or <i>ii</i> , continue. If No, skip to E.2.i.	<u> </u>
iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any	federal, ☐Yes☐No
state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the following	a information:
Streams: Name Class	
• Lakes or Ponds: Name Class	
• Wetlands: Name Appr	oximate 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 ☐Yes ☐No
waterbodies?	-impaired resivo
If yes, name of impaired water body/bodies and basis for listing as impaired:	
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
1. Is the project site located over, or immediately adjoining, a primary, principal or sole source ac	quifer?
If Yes: i. Name of aquifer:	
i. Traine of aquiter.	

m. Identify the predominant wildlife species that occupy	or use the project site:		
n. Does the project site contain a designated significant nIf Yes:i. Describe the habitat/community (composition, function)	on, and basis for designation):	□Yes □No	
, ,	acres acres acres acres		
o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as YesNo endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species?			
p. Does the project site contain any species of plant or ar special concern?	nimal that is listed by NYS as rare, or as a species of	□Yes□No	
q. Is the project site or adjoining area currently used for h If yes, give a brief description of how the proposed action		□Yes□No	
E.3. Designated Public Resources On or Near Project	t Site		
a. Is the project site, or any portion of it, located in a desi Agriculture and Markets Law, Article 25-AA, Section If Yes, provide county plus district name/number:	n 303 and 304?	∏Yes∏No	
b. Are agricultural lands consisting of highly productive s i. If Yes: acreage(s) on project site? ii. Source(s) of soil rating(s):	·	□Yes□No	
	ctantially contiguous to, a registered National Community	□Yes□No	
d. Is the project site located in or does it adjoin a state list If Yes: i. CEA name:		□Yes□No	
ii. Basis for designation:			

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places? If Yes: i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District ii. Name: iii. Brief description of attributes on which listing is based:	☐ Yes☐ No
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?	□Yes□No
g. Have additional archaeological or historic site(s) or resources been identified on the project site? If Yes: i. Describe possible resource(s): ii. Basis for identification:	□Yes□No
 h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? If Yes: i. Identify resource: 	∐Yes ∐No
ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail o etc.):	r scenic byway,
iii. Distance between project and resource: miles.	
 i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation: 	☐ Yes ☐ No
ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	∐Yes ∐No
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 in measures which you propose to avoid or minimize them.	npacts plus any
G. VerificationI certify that the information provided is true to the best of my knowledge.	
Applicant/Sponsor Name Michael Risewick Date 7 March 2024	
Signature Title Code Enforcement Officer	