

**CHECK APPROVAL(S) REQUESTED**

- Minor Subdivision (includes lot line adjustments)
- Major Subdivision
- Site Plan Review (SPR)
- Special Permit with Site Plan Approval (SP/SPR)

**FOR OFFICIAL USE:**

Date Rec'd \_\_\_\_\_ PB# \_\_\_\_\_  
 Building Permit Application # \_\_\_\_\_  
 Fee Paid: \_\_\_\_\_

Date: January 11, 2019Tax Map No(s): 19-1-57.111

Note: for lot line adjustments, incl. TM# of adjoining parcel(s) involved

Project Name: Thomas M. and Carol F. BensonSite Location: County Route 5Total number of lots being created: 2Total Land Area: 60 acres**Applicant Information**Name of Applicant (please print): Thomas M. and Carol F. BensonMailing address: 2503 County Route 5Phone: 518-794-9624

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

Signature: Thomas M. BensonSignature: Carol F. Benson

\*if the applicant is not the property owner, please submit owner authorization

**Property Owner Information**

Name if Different from Applicant: (please print) \_\_\_\_\_

Mailing Address Different from Applicant: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

Signature: \_\_\_\_\_

**Surveyor Information**Surveyor Name: Brian R. Hilbrunner, P.L.S.License No. 50.326Company Name & Address: Land Surveying and Site DevelopmentPhone: 518-753-7592

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

**Engineer Information**

Engineer Name: \_\_\_\_\_

License No. \_\_\_\_\_

Company Name &amp; Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

PLEASE CHECK APPROPRIATE SPACE: I consent to the extension of the 62-day Public Hearing and review period. (See instruction item #4).  Yes  No

Please describe the nature of your proposed project, including the proposed use and a construction schedule (attach additional paper if needed):

Simply, a land transfer to our two daughters by changing property lines

Yes  No **Is the access road to the project a Town/County or State Road or highway?**  
(New York State Town Law: § 280-a)

Yes  No **Is any of the property within the flood plain?** If yes, the flood plain area will need to be clearly labeled and lightly shaded on your survey map. (The County will not except dark shading).

Yes  No **Is any of the property within a DEC regulated wetland?** If yes, you may be required to contact DEC to conduct a site visit to flag the area.

Yes  No **Is any of the property within an ACOE regulated wetland?** (ACOE = Army Corps. Of Engineers)

Yes  No **Will one or more acres be disturbed by this project?** If yes, you will be required [under NYS DEC regulations] to develop a Storm Water Pollution Prevention Plan SWPPP in order to obtain coverage under the State Pollutant Discharge Elimination System (SPDES) General Permit for Stormwater Discharges from Construction Activity.

**The project occurring within 500 feet of (Check all that may apply):**

- A municipal Boundary
- County or State Park or recreation either existing or proposed
- State or County road or right-of-way, either existing or proposed
- State or County owned building or institution
- Stream or drainage channel owned by the County or for which channel lines have been established
- Active farm operation within a County Defined Ag. District

**BY SIGNING THIS APPLICATION, THE UNDERSIGNED DOES HEREBY GRANT PERMISSION TO MEMBERS OF THE TOWN OF NEW LEBANON PLANNING/BUILDING DEPARTMENT TO ENTER UPON MY PROPERTY FOR THE PURPOSE OF EXAMINING SAME BY REASON OF AN APPLICATION NOW PENDING BEFORE SAID BOARD**

STATE OF NEW YORK    }  
COUNTY OF COLUMBIA    } ss  
TOWN OF NEW LEBANON    }

I, \_\_\_\_\_ hereby depose and say that all statements contained in the papers submitted herewith are true.

SWORN to before me this \_\_\_\_\_ day  
Of \_\_\_\_\_, 20\_\_\_\_\_.

NOTARY PUBLIC \_\_\_\_\_  
\_\_\_\_\_

Submit this at mtg.

RECEIVED

JAN 11 2019

NEW LEBANON BUILDING DEPT.

Short Environmental Assessment Form
Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Form with sections: Part 1 - Project and Sponsor Information, Name of Action or Project, Project Location, Brief Description of Proposed Action, Name of Applicant or Sponsor, Telephone, E-Mail, Address, City/PO, State, Zip Code, and numbered questions 1-4 regarding legislative adoption, permits, acreage, and land uses.

5. Is the proposed action, a. A permitted use under the zoning regulations?	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> N/A
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
10. Will the proposed action connect to an existing public/private water supply?  If No, describe method for providing potable water: _____	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
11. Will the proposed action connect to existing wastewater utilities?  If No, describe method for providing wastewater treatment: _____	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
16. Is the project site located in the 100 year flood plain?	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	<input type="checkbox"/> NO	<input type="checkbox"/> YES	

Project:

Date:

**Short Environmental Assessment Form  
Part 2 - Impact Assessment**

**Part 2 is to be completed by the Lead Agency.**

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:		
a. public / private water supplies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p><b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor name: <u>Thomas M. and Carol F. Benson</u> Date: <u>1/11/19</u></p> <p>Signature: <u>Thomas M. Benson Carol F. Benson</u></p>		



