

For Town Use:

Application No.: _____

Application Fee: _____

Tax Parcel: _____

Zone: _____

PLANNING BOARD APPLICATION

Town of Marion, New York



Revision: 9/2/2012

I - A. Type of Application:

- Special Use Permit
- Use Variance
- Site Plan Approval
- Subdivision Approval

I - B. Type of Review Requested: (check one or more boxes)

- Minor Subdivision
- Major Subdivision
- Planned Unit Development
- Cluster Development
- Residential
- Commercial
- Industrial
- Other (describe) _____
- Land Conveyance
- Agricultural Use
- Site Plan Review

II - Project Scope/Details:

A. Subdivision/Project Name: _____

Address/Location: _____

Tax Map Number: _____
(From Tax Map)

B. Description of Proposed Project:

C. Configuration Details:

1. Existing Configuration - Present Total Acreage (Initially): _____

2. Proposed Configuration - Proposed Number of Lots (Ultimately): _____

>> Proposed Acreage of Each Lot (Attach a sheet detailing acreage for each lot if more than 5):

Lot # 1: _____ Lot # 2: _____ Lot # 3: _____ Lot # 4: _____ Lot # 5: _____

NOTE: Use the above numbers when completing Section 7 of the attached Environmental Assessment Form.

D. Property Details:

- 1. Are there sewers on or near the property? Yes No
- 2. Are there waterlines present on or near the property? Yes No
- 3. Are there wetlands on the property? Yes No
- 4. Is the property located in a flood hazard area? Yes No
- 5. Are there bodies of water on or near the parcel? Yes No

If marked yes, indicated type(s): Pond Lake Stream Drainage ditch

III Special Considerations:

1. Are restrictions or protective covenants contemplated? Yes No

If yes, attach a list outlining the specific details.

2. Will exceptions or waivers be requested? Yes No

If yes, list exceptions with the reason/rationale behind each exception anticipated.

IV Agricultural Data:

1. Is this parcel of land located within Agricultural District #1 Yes No

(Check with the Town's Code Enforcement Office if you do not know)

2. Is this parcel actively farmed? Yes No

3. List all farm operations within 500 feet of this parcel. (attach additional sheet if required)

Name: _____
Address: _____
Is this parcel actively farmed?
Yes No

Name: _____
Address: _____
Is this parcel actively farmed?
Yes No

Name: _____
Address: _____
Is this parcel actively farmed?
Yes No

Name: _____
Address: _____
Is this parcel actively farmed?
Yes No

V Contact Information:

Applicant: _____ Phone #: _____

Address: _____

Land Owner (if different): _____ Phone #: _____

Address: _____

Developer (if appropriate): _____ Phone #: _____

Address: _____

Engineer / Surveyor: _____ Phone #: _____

Address: _____

VI Signatures:

By my/our signatures we hereby give the Town of Marion permission to place a sign on involved property, indicating that the property is under review and we further acknowledge this property may be visited by representatives of the appropriate Town Boards during their review process.

Applicant: _____ Date: _____

Land Owner (if different): _____ Date: _____

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 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.

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.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input type="checkbox"/>
3. 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			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. 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?	NO	YES	
b. 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?	<input 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?	NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

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 type="checkbox"/> Forest <input 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?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: _____ Date: _____		
Signature: _____ Title: _____		

