

## TOWN OF AUSTERLITZ APPLICATION FOR SITE PLAN REVIEW

Dear Applicant,

The attached application for site plan review assist you in providing the information needed by the Planning Board to make a determination concerning your request for a multi-family residential or non-residential use in the Town of Austerlitz. Site plans will not be officially considered until the attached application form is completed. It is strongly recommended,

however, that you prepare a sketch plan of your request and meet with the Planning Board prior to beginning the formal application process.

All applications for site plan review must be accompanied by a check made out to the Town of Austerlitz. The fee for an in-home business is \$50.00. The fee for all other applications is \$250.00.

The purpose behind the site plan review is to ensure that the business locating, relocating or expanding in Austerlitz do so in a way that is beneficial to the health, safety and general welfare of the citizens and property owners of Austerlitz. In that respect, a complete application is the beginning of what is likely to be a broader discussion; the Planning Board may request more material or require changes to the site plan. (For example, an applicant may be asked to adjust the location or design of buildings or to add trees or do other landscaping to screen parking, outdoor storage or buildings, etc., as a condition of approval.)

Completed forms with all necessary documentation and the appropriate fee should be left at the Town Hall during normal business hours (M-T-F 9-12, W-TH 9-2) at least ten days prior to the Planning Board meeting. The Planning Board meets at 7 p.m. on the first Thursday of every month. Applications that are not submitted to the Planning Board by the deadline will not be considered until the following month.

The sooner the applicants submit all forms and information to the Planning Board the better. Applicants should expect the process to take a minimum of six weeks once a completed form has been submitted, longer if supplemental information is required, or if the applicant fails to provide all the information requested in the application form.

It is very important that applicants provide all the information requested on the form. If there are any questions about that information, they should be addressed as soon as possible to the Planning Board. Failure to provide all the required information will likely result in a delay of official consideration of the site plans.

For more information, contact Charles Knauss (392-1529), Chairman of the Austerlitz Planning Board.

**Town of Austerlitz Planning Board**  
**Application for Site Plan Review/Special Use Permit**

Application Date: \_\_\_/\_\_\_/\_\_\_

Approval Request for: (check all that apply)

Site Plan \_\_\_\_\_ Site Plan Amendment \_\_\_\_\_ Special Use Permit \_\_\_\_\_

Applicant: Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Owner: If different than applicant, if more than one owner provide information for each on separate sheet  
Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Project Information: Tax Map Number: \_\_\_\_\_ Parcel Acreage \_\_\_\_\_

Location of Project/Street Address: \_\_\_\_\_  
\_\_\_\_\_

Current Land Use of Site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Condition of Site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Character of abutting parcels: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed Use(s) of site:

- Utilities                       Multi-family project
- In-Home Business             Commercial Project       Other (describe use below)

Detailed Description of Proposed Use, including primary and secondary uses (use separate sheet if necessary):

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Description of buildings to be used height, number of stories, square feet:

For residential projects include the number of dwelling units and size in square feet

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Is the property within 500 feet of ?

- 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 County or for which channel lines have been established
- Active farm operation within an Agricultural District

If any of the above is true the site plan must also be reviewed by the County Planning Board.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Project ID: \_\_\_\_\_

Preliminary Review Date: \_\_\_\_\_ Final Review Date: \_\_\_\_\_

Final Decision:     Site Plan Unnecessary                       Approved  
                           Approved with conditions                       Denied

## SHORT ENVIRONMENTAL ASSESSMENT FORM

### INSTRUCTIONS:

- A) In order to answer the questions in this short EAF it is assumed that the preparer will use currently available information concerning the project and the likely impacts of the action. It is not expected that additional studies, research or other investigations will be undertaken.
- B) If any question has been answered **YES**, the project may be significant and a completed Environmental Assessment Form is necessary.
- C) If all questions have been answered **NO**, it is likely that this project is **not** significant.

### Environmental Assessment

1. Will project result in a large physical change to the project site or physically alter more than ten acres of land? Yes \_\_\_\_ No \_\_\_\_
2. Will there be major change to any unique or unusual land form found on the site? Yes \_\_\_\_ No \_\_\_\_
3. Will project alter or have a large effect on an existing body of water? Yes \_\_\_\_ No \_\_\_\_
4. Will project have a potentially large impact on ground water quality? Yes \_\_\_\_ No \_\_\_\_
5. Will project significantly effect drainage flow on adjacent sites? Yes \_\_\_\_ No \_\_\_\_
6. Will project affect any threatened or endangered plant or animal species? Yes \_\_\_\_ No \_\_\_\_
7. Will project result in a major adverse effect on air quality? Yes \_\_\_\_ No \_\_\_\_
8. Will project have a major effect on visual character of the community or scenic views or vistas known to be important to the community? Yes \_\_\_\_ No \_\_\_\_
9. Will project adversely impact any site or structure of historic, pre-historic, or paleontological importance or any site designated as a critical environmental area by local agency? Yes \_\_\_\_ No \_\_\_\_
10. Will project have a major effect on existing or future recreational opportunities? Yes \_\_\_\_ No \_\_\_\_
11. Will project result in major traffic problems or cause a major effect to existing transportation systems? Yes \_\_\_\_ No \_\_\_\_
12. Will project regularly cause objectionable odors, noise, glare, vibration, or electrical disturbance as a result of the project's operation? Yes \_\_\_\_ No \_\_\_\_
13. Will project have any impact on public health or safety? Yes \_\_\_\_ No \_\_\_\_
14. Will project affect the existing community by directly causing a growth in permanent population of more than 5% over a one year period **OR** have a major negative effect on the character of the community or neighborhood? Yes \_\_\_\_ No \_\_\_\_
15. Is there public controversy concerning the project? Yes \_\_\_\_ No \_\_\_\_

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

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

**Appendix C**  
**State Environmental Quality Review**  
**SHORT ENVIRONMENTAL ASSESSMENT FORM**  
**For UNLISTED ACTIONS Only**

**PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)**

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION: Municipality _____ County _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres      Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No      If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor name: _____	Date: _____
Signature: _____	

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment**

**PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)**

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF. <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No	
C. COULD ACTION RESULT IN <b>ANY</b> ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible) C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:  C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:  C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:  C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:  C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:  C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:  C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	

**PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)**

**INSTRUCTIONS:** For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

<input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which <b>MAY</b> occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action <b>WILL NOT</b> result in any significant adverse environmental impacts <b>AND</b> provide, on attachments as necessary, the reasons supporting this determination.	
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)