

**TOWN OF WINDHAM
PLANNING BOARD**

**P.O. Box 96
Hensonville, NY 12439
(518) 734-4170**

For office use only:

Application # _____ Fee paid _____
Date of receipt of sketch plan: _____
Official Submission date: _____
First Planning Bd. Meeting after date of
receipt: (date) _____

APPLICATION FOR REVIEW OF MAJOR SUBDIVISION PLAT

Note: An application in it's entirety with fee must be received by the Town Clerk ten (10) days prior to regular Planning Board Meetings. Planning Board Meetings are held on the first and third Thursdays of each month.

1. Name or Title of Subdivision: _____
2. Name of Owner (s): _____
Address: _____

Phone: ____ (____) _____ and ____ (____) _____
3. If an Agent, or if Owner is a Corporation, give name of person acting for and supply a letter of permission to act as such:
Name: _____
Address: _____
Phone: ____ (____) _____ and ____ (____) _____
4. Licensed Land Surveyor and/or Engineer:
Name of Surveyor: _____
Address: _____

Phone: ____ (____) _____ and ____ (____) _____
Fax number: ____ (____) _____

4. Name of Engineer: _____

Address: _____

Phone: (____) _____ and (____) _____

Fax Number: (____) _____

5. Location of Proposed Subdivision: _____

Tax I.D. # : _____ Libre: _____ Page: _____

Entire Parcel Acreage: _____

Total Area of Subdivision: _____ Number of Lots: _____

Area of Each Lot: A. _____ B. _____

C. _____ D. _____

Linear Feet of New Roadway: _____

6. Will there be any deed restrictive covenants, easements, or other restrictions on subdivided property? No _____, Yes _____.

If yes, describe: _____

Attach a copy of deed restrictions and/or covenants and easements

7. Names and Addresses of abutting owners, and owners directly across adjoining streets adjoining streets/roads:

Name:

Address:

A. _____

B. _____

C. _____

D. _____

E. _____

F. _____

G. _____

H. _____

8. Do you intend to build houses on these lots? No _____, Yes _____

Only sell lots? No _____, Yes _____. If "Yes", attach a statement of the details.

9. Do you intend to subdivide balance of property (if any) in the future? No _____, Yes _____. If yes, when? _____

10. Have you read the Subdivision Regulations of the Town of Windham?
No _____, Yes _____.

The under signed hereby requests review by the Town of Windham Planning Board of the above identified Major Subdivision Plat.

Signature: _____

Printed Name: _____

Title: _____ Date: _____

APPLICANT CHECK LIST:

- _____ Application submitted within six months of sketch plan review?
- _____ Sketch Plan, (~~6~~ ^{Six} copies), 10 days before regular meeting?
- _____ Application fee \$24.00 per lot?
- _____ Compliance with SEQR requirements (EAF or EIS submitted)?
- _____ ~~Five~~ (~~6~~ ^{Six}) copies of Subdivision Plat?
- _____ Copies of all covenants and deed restrictions submitted?
- _____ Location map with all adjacent property owners identified?
- _____ Contours shown, if required?
- _____ Designated Wetlands and/or Flood Hazard boundaries shown?
- _____ Drainage plan and easements on property and on adjacent property?
- _____ Water supply information and well locations? Adjacent leach field and water source locations?
- _____ Percolation tests as necessary; deep hole locations noted, dates and results?
Septic system designs included (if required)?
- _____ Notification of adjacent landowners?
- _____ Road improvement specifications? Type of road: If public, date of approval: _____
or, if private, copy of road maintenance agreement? Do not include road names for private
roads at this time. All road names must be approved by the Town Board. See Town Clerk.
- _____ Utility Easements?
- _____ Special Districts: Is property in any of the following Special Districts?
- | | |
|----------------------|-------------------------|
| Water District _____ | Lighting District _____ |
| Fire District _____ | Historic District _____ |
| Sewer District _____ | Other Districts _____ |
- _____ Public Hearing: Sub-divider notified adjacent landowners of Public Hearing
Public Hearing held: _____ Date: _____

FOR PLANNING BOARD USE:

____ Public Hearing Held? _____ Date: _____

____ Comments: _____

Major Subdivision Plat: _____ Date: _____

____ Approved, ____ Disapproved

Reasons: _____

Planning Board Chairman Signature: _____

Date: _____

Note: No final maps shall be signed until all conditions are fulfilled or modifications made.

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?			NO
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.			YES
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO
If Yes, list agency(s) name and permit or approval:			YES
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:			
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)			
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Specify):			
☐ Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	☐	☐	☐
b. Consistent with the adopted comprehensive plan?	☐	☐	☐
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	☐	☐	
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: _____	☐	☐	
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?	☐	☐	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	☐	☐	
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: _____ _____	☐	☐	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	☐	☐	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	☐	☐	
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?	☐	☐	
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?	☐	☐	
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: ☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional ☐ Wetland ☐ Urban ☐ 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
	☐	☐
16. Is the project site located in the 100-year flood plan?	NO	YES
	☐	☐
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	☐	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	☐	☐
If Yes, briefly describe: _____ _____		
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
_____ _____	☐	☐
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
_____ _____	☐	☐
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
_____ _____	☐	☐
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		