TOWN BOARD SPECIAL PERMIT

1. Complete the Special Permit Application.
2. Provide with the application as much information as you can about your project. You may include narratives, site plans, sketches, maps, etc. Anything that may help in understanding what you are proposing. Return the application to the Town Clerk with a check in the amount of $150.00 made payable to the Town of Gardiner.
3. Obtain names and addresses of all property owners within 250 feet of the property line. Affixed postage and address a #10 envelope for each one. Also provide a list of each property owner for the file. You may get this information from the Assessors. Each property owner will be notified of your application by first class mail. Give these to the Town Clerk.
4. All public hearings are scheduled for the Business Meeting of the Gardiner Town Board, held on the second Tuesday of each month. Applications must be received by the 1st day of the preceding month. (Example - If you wish to be on the September agenda, the application must be received by August 1.)
5. If you have any questions please feel free to contact the Town Clerk at 255-9675 Ext. 100.

(Application for Special Permit - Form B)

To: The Town of Gardiner

Governing Body: Zoning Board of Appeals

Planning Board

Town Board

Applicant's Name _____ Phone( ) _____

Applicant's address _____

Property interest of applicant:

Owner

Contract purchaser (attach copy of contract)

Use District

Tenant (attach copy of lease)

Location of Property _____

Official street number _____ Post Office street

Tax map designation: Section _____ Block _____ Lot _____

Answer all of the Following Questions:

1. Describe the use you desire to make of the property.

2. Describe the uses surrounding property owners make of their properties.

3. Will the proposed use increase traffic congestion? _____ If not, why won't it?

4. Will off-street parking be provided for customers? _____ If so, how many spaces? _____ Size of each space: _____Ft. by _____

Submit a diagram of the parking available on the site, indica entrys and exits from the public streets.

5. List any churches, schools, theaters, public buildings, parks playgrounds and recreation facilities which are located within 500 fee of the exterior property lines of the property on which the proposed use is to be located.

6. How many persons will be employed by the use?

Full-time_____ Part-time _____

7. State the maximum number of customers, clients, patients or patrons expected to be on the premises at any one time? _____

8. State the size of the lot on which the use is to be located bo in square footage and dimensions of front, side and rear lot lines.

Square footage: _____

Lot Lines: Front _____ft. Side _____ft. Rear _____ft.

9. State the dimensions of the building or structure to be used i the use. If more than one building or structure is to be used, list each individually.

Building No. ___	Building No. ___	Building No. ___
Size: _____ft.x_____ft.	Size: _____ft.x_____ft.	Size: _____ft.x_____f
No. of stories:_____	No. of stories:_____	No. of stories:_____

10. How many square feet of usable space is in each building?

Building No. ___	Building No. ___	Building No. ___
Usable Sq.Ft._____	Usable Sq.Ft._____	Usable Sq.Ft._____
Sq.Ft. to be devoted to proposed use:_____	Sq.Ft. to be devoted to proposed use:_____	Sq.Ft. to be devoted to proposed use:____

11. State the distance of the building in which the use will be located from all front, rear and side property lines. If more than one building or structure is to be used, list each individually.

Submit a drawing diagraming this information.

Building No. _____

Distance from property lines:

Front:_____Ft. Rear:_____Ft. Side:_____Ft. Side:_____Ft.

Building No. _____

Distance from property lines:

Front:_____Ft. Rear:_____Ft. Side:_____Ft. Side:_____Ft.

Building No. _____

Distance from property lines:

Front:_____Ft. Rear:_____Ft. Side:_____Ft. Side:_____Ft.

(To be completed if
(Individual Applica

STATE OF NEW YORK)
SS.
COUNTY OF ULSTER)

_____, being duly sworn deposes and s
that he is the person named as the applicant in the foregoing applicat
he has read the foregoing application and knows the contents thereof a
the same is true to his own knowledge, except as to the matters therei
stated to be alleged on information and belief and as to those matters
he believes it to be true.

SIGNED: _____

_____
(name signed must be printed beneath)

Sworn to before me
this _____ day of _____, 19 ___.

_____
Notary Public

- - - - - - - - - - - - - - - - -

(To be completed i
(Corporate Applica

STATE OF NEW YORK)
SS.
COUNTY OF ULSTER)

_____, being duly sworn deposes and s
that he is the _____
(title)

_____
(name of corporation)

a _____ corporation, the applicant name
(enter name of State of incorporation)
in the foregoing application; he has read the foregoing application a
knows the contents thereof, and the same is true to his own knowledge,
except as to matters therein stated to be alleged upon information and
belief and as to those matters he believes it to be true.

SIGNED: _____

_____
(name signed must be printed beneath)

Sworn to before me
this _____ day of _____, 19___.

_____

14-16-4 (2/87)—Text 12

PROJECT I.D. NUMBER

617.21
Appendix C
State Environmental Quality Review

SEC

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. IS PROPOSED ACTION:
☐ New ☐ Expansion ☐ 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?
☐ Yes ☐ No If No, describe briefly

9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT?
☐ Residential ☐ Industrial ☐ Commercial ☐ Agriculture ☐ Park/Forest/Open space ☐ Other
Describe:

10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?
☐ Yes ☐ No If yes, list agency(s) and permit/approvals

11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL?
☐ Yes ☐ No If yes, list agency name and permit/approval

12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION?
☐ Yes ☐ 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

OVER

PART II—ENVIRONMENTAL ASSESSMENT (To be completed by Agency)

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.12? If yes, coordinate the review process and use the FULL EAF.
☐ Yes ☐ 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.
☐ Yes ☐ No

C. COULD ACTION RESULT IN ANY 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 patterns, 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. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
☐ Yes ☐ 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.

☐ Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.

☐ Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action WILL NOT result in any significant adverse environmental impacts AND provide on attachments as necessary, the reasons supporting this determination:

Name of Lead Agency

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)

Date