Revised by Applicant August 11, 2020

## Full Environmental Assessment Form Part 1 - Project and Setting

## **Instructions for Completing Part 1**

**Part 1 is to be completed by the applicant or project sponsor.** 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

## A. Project and Applicant/Sponsor Information.

Name of Action or Project:		
Project Location (describe, and attach a general location map):		
Brief Description of Proposed Action (include purpose or need):		
Name of Applicant/Sponsor:	Telephone:	
	E-Mail:	
Address:		
City/PO:	State:	Zip Code:
Project Contact (if not same as sponsor; give name and title/role):	Telephone:	
	E-Mail:	
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):	Telephone:	
	E-Mail:	
Address:		
City/PO:	State:	Zip Code:

## **B.** Government Approvals

B. Government Approvals, Funding, or Sport assistance.)	sorship. ("Funding" includes grants, loans, tax	relief, and any other	forms of financial
Government Entity	If Yes: Identify Agency and Approval(s) Required	Application (Actual or p	
a. City Counsel, Town Board, □ Yes □ No or Village Board of Trustees			
b. City, Town or Village ☐ Yes ☐ No Planning Board or Commission			
c. City, Town or ☐ Yes ☐ No Village Zoning Board of Appeals			
d. Other local agencies □ Yes □ No			
e. County agencies □ Yes □ No			
f. Regional agencies □ Yes □ No			
g. State agencies □ Yes □ No			
h. Federal agencies □ Yes □ No			
<ul><li>i. Coastal Resources.</li><li>i. Is the project site within a Coastal Area, or</li></ul>	r the waterfront area of a Designated Inland Wat	erway?	□ Yes □ No
<ul><li>ii. Is the project site located in a community</li><li>iii. Is the project site within a Coastal Erosion</li></ul>	with an approved Local Waterfront Revitalizatio Hazard Area?	n Program?	□ Yes □ No □ Yes □ No
C. Planning and Zoning			
C.1. Planning and zoning actions.			
<ul> <li>only approval(s) which must be granted to enable</li> <li>If Yes, complete sections C, F and G.</li> </ul>	mendment of a plan, local law, ordinance, rule or ole the proposed action to proceed? nplete all remaining sections and questions in Par	•	□ Yes □ No
C.2. Adopted land use plans.			
a. Do any municipally- adopted (city, town, vill where the proposed action would be located?	lage or county) comprehensive land use plan(s) in	nclude the site	□ Yes □ No
	ecific recommendations for the site where the pro	posed action	□ Yes □ No
	ocal or regional special planning district (for exa ated State or Federal heritage area; watershed ma		□ Yes □ No
c. Is the proposed action located wholly or parts or an adopted municipal farmland protection If Yes, identify the plan(s):	ially within an area listed in an adopted municipan plan?	l open space plan,	□ Yes □ No

C.3. Zoning	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district?	□ Yes □ No
b. Is the use permitted or allowed by a special or conditional use permit?	□ Yes □ No
c. Is a zoning change requested as part of the proposed action? If Yes,	□ Yes □ No
i. What is the proposed new zoning for the site?	
C.4. Existing community services.	
a. In what school district is the project site located?	
b. What police or other public protection forces serve the project site?	
c. Which fire protection and emergency medical services serve the project site?	
d. What parks serve the project site?	
D. Project Details	
D.1. Proposed and Potential Development	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed components)?	, include all
b. 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	
c. Is the proposed action an expansion of an existing project or use?	□ Yes □ No
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, square feet)? % Units:	housing units,
d. Is the proposed action a subdivision, or does it include a subdivision?	□ Yes □ No
If Yes, <i>i.</i> Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)	
<ul><li>ii. Is a cluster/conservation layout proposed?</li><li>iii. Number of lots proposed?</li></ul>	□ Yes □ No
iv. Minimum and maximum proposed lot sizes? Minimum Maximum	
e. Will the proposed action be constructed in multiple phases?  i. If No, anticipated period of construction: months  ii. If Yes:	□ Yes □ No
<ul> <li>Total number of phases anticipated</li> <li>Anticipated commencement date of phase 1 (including demolition) month year</li> <li>Anticipated completion date of final phase month year</li> <li>Generally describe connections or relationships among phases, including any contingencies where progress determine timing or duration of future phases:</li> </ul>	

	t include new resid				□ Yes □ No
If Yes, show num	bers of units propo				
	One Family	Two Family	Three Family	Multiple Family (four or more)	
Initial Phase					
At completion					
of all phases				- <del></del> -	
D 4	1 1 1		1	1	- 77 - 77
	osed action include	new non-residentia	al construction (inclu	iding expansions)?	□ Yes □ No
If Yes,	of structures				
ii Dimensions (	in feet) of largest p	ronosed structure	height:	width; andlength	
iii. Approximate	extent of building s	space to be heated	or cooled:	square feet	
				I result in the impoundment of any	□ Yes □ No
				agoon or other storage?	□ Tes □ No
If Yes,	s creation of a water	suppry, reservoir,	, pond, lake, waste ia	igoon of other storage:	
	impoundment:				
ii. If a water imp	impoundment:oundment, the prince	cipal source of the	water:	☐ Ground water ☐ Surface water stream	s □ Other specify:
iii. If other than w	vater, identify the ty	pe of impounded/o	contained liquids and	d their source.	
iv. Approximate	size of the proposed	d impoundment.	Volume:	million gallons; surface area:	acres
v. Dimensions o	f the proposed dam	or impounding str	ucture:	height; length	
				ructure (e.g., earth fill, rock, wood, conc	rete):
D.2. Project Op	erations				
			ning on Anadaina da	i	D Vas D Na
				uring construction, operations, or both? or foundations where all excavated	□ Yes □ No
materials will r		mon, grading or in	stanation of utilities	or foundations where all excavated	
If Yes:	cmam onsite)				
	rnose of the excava	tion or dredging?			
				be removed from the site?	-
	at duration of time?				
				ged, and plans to use, manage or dispose	of them.
iv. Will there be	onsite dewatering of	or processing of ex	cavated materials?		□ Yes □ No
v What is the to	ital area to be dredg	ed or excavated?		acres	
vi What is the m	aximum area to be	worked at any one	time?	acres	
		•		feet	
	vation require blast		7 drod5m5	1001	□ Yes □ No
		<u> </u>			
				crease in size of, or encroachment	□ Yes □ No
•	ng wetland, waterb	ody, shoreline, bea	ch or adjacent area?		
If Yes:	.1 1 . 1 . 1	1.1 11.	CC 4 1 /1		
				vater index number, wetland map number	
description):					

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placem alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in sq	
iii. Will the proposed action cause or result in disturbance to bottom sediments?  If Yes, describe:	Yes □ No
<i>iv</i> . Will the proposed action cause or result in the destruction or removal of aquatic vegetation? If Yes:	□ Yes □ No
acres of aquatic vegetation proposed to be removed:	
expected acreage of aquatic vegetation remaining after project completion:	
• purpose of proposed removal (e.g. beach clearing, invasive species control, boat access):	
proposed method of plant removal:	
if chemical/herbicide treatment will be used, specify product(s):	
v. Describe any proposed reclamation/mitigation following disturbance:	
. Will the proposed action use, or create a new demand for water?	□ Yes □ No
Yes:	
i. Total anticipated water usage/demand per day: gallons/day	
ii. Will the proposed action obtain water from an existing public water supply?	□ Yes □ No
Yes:	
Name of district or service area:	
Does the existing public water supply have capacity to serve the proposal?  Let be a principle of the principle of the proposal.	□ Yes □ No
• Is the project site in the existing district?	□ Yes □ No
Is expansion of the district needed?	□ Yes □ No
Do existing lines serve the project site?  Will be a serve the project site?	□ Yes □ No
ii. Will line extension within an existing district be necessary to supply the project? Yes:	□ Yes □ No
Describe extensions or capacity expansions proposed to serve this project:	
Source(s) of supply for the district:	
iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes:	□ Yes □ No
Applicant/sponsor for new district:	
Date application submitted or anticipated:	
Proposed source(s) of supply for new district:	
v. If a public water supply will not be used, describe plans to provide water supply for the project:	
vi. If water supply will be from wells (public or private), what is the maximum pumping capacity:	_ gallons/minute.
. Will the proposed action generate liquid wastes?	□ Yes □ No
Yes:	
i. Total anticipated liquid waste generation per day: gallons/day	11 . 1
ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe a approximate volumes or proportions of each):	
approximate volumes of proportions of each).	
i. Will the proposed action use any existing public wastewater treatment facilities?  If Yes:	□ Yes □ No
Name of wastewater treatment plant to be used:	
Name of district:	
<ul> <li>Does the existing wastewater treatment plant have capacity to serve the project?</li> </ul>	□ Yes □ No
<ul> <li>Is the project site in the existing district?</li> </ul>	□ Yes □ No
<ul> <li>Is expansion of the district needed?</li> </ul>	□ Yes □ No

Do existing sewer lines serve the project site?	□ Yes □ No
Will a line extension within an existing district be necessary to serve the project?	□ Yes □ No
If Yes:	
Describe extensions or capacity expansions proposed to serve this project:	
in Will a new westewater (sawage) treatment district he formed to serve the project site?	□ Yes □ No
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? If Yes:	
Applicant/sponsor for new district:	
Date application submitted or anticipated:	
• What is the receiving water for the wastewater discharge?	
v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specire receiving water (name and classification if surface discharge or describe subsurface disposal plans):	ifying proposed
vi. Describe any plans or designs to capture, recycle or reuse liquid waste:	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point	□ Yes □ No
sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?	
If Yes:  i. How much impervious surface will the project create in relation to total size of project parcel?	
(-)1,190 acres (impervious surface)	
+/- 374,616 Square feet or acres (parcel size)	
ii. Describe types of new point sources.	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent progroundwater, on-site surface water or off-site surface waters)?	
If to surface waters, identify receiving water bodies or wetlands:	
Will stormwater runoff flow to adjacent properties?	□ Yes □ No
<i>iv.</i> Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?	□ Yes □ No
f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?	□ Yes □ No
If Yes, identify:	
i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)	
ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)	
iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)	
g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit,	□ Yes □ No
or Federal Clean Air Act Title IV or Title V Permit?	
If Yes: <i>i.</i> Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet	□ Yes □ No
ambient air quality standards for all or some parts of the year)	□ 1 C5 □ 1NO
ii. In addition to emissions as calculated in the application, the project will generate:	
•Tons/year (short tons) of Carbon Dioxide (CO <sub>2</sub> )	
•Tons/year (short tons) of Nitrous Oxide (N <sub>2</sub> O)	
•Tons/year (short tons) of Perfluorocarbons (PFCs)	
•Tons/year (short tons) of Sulfur Hexafluoride (SF <sub>6</sub> )	
•Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs)	
• Tons/year (short tons) of Hazardous Air Pollutants (HAPs)	

h. Will the proposed action generate or emit methane (included landfills, composting facilities)?  If Yes:		□ Yes □ No
<ul><li>i. Estimate methane generation in tons/year (metric):</li><li>ii. Describe any methane capture, control or elimination meanietricity, flaring):</li></ul>	asures included in project design (e.g., combustion to ge	enerate heat or
Will the proposed action result in the release of air pollutar quarry or landfill operations?  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations and nature of emissions (e.g., die proposed action)  If Yes: Describe operations are the proposed action of the proposed action (e.g., die proposed action)  If Yes: Describe operations are the proposed action (e.g., die proposed action)  If Yes: Describe operations are the proposed action (e.g., die proposed action)  If Yes: Describe operations are the proposed action (e.g., die proposed action)  If Yes: Describe operation (e.g., die proposed action)  If Ye		□ Yes □ No
j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services?  If Yes:  i. When is the peak traffic expected (Check all that apply):  □ Randomly between hours of to to	☐ Morning ☐ Evening ☐ Weekend 	□ Yes □ No
<ul> <li>iii. Parking spaces: Existing</li></ul>	ting roads, creation of new roads or change in existing a vailable within ½ mile of the proposed site? ortation or accommodations for use of hybrid, electric	Yes No
<ul> <li>k. Will the proposed action (for commercial or industrial profor energy?</li> <li>If Yes: <ul> <li>i. Estimate annual electricity demand during operation of the</li> </ul> </li> <li>ii. Anticipated sources/suppliers of electricity for the project other):</li> <li>iii. Will the proposed action require, a new, or an upgrade, to</li> </ul>	t (e.g., on-site combustion, on-site renewable, via grid/lo	
Nouring Construction:     Monday - Friday:     Saturday:     Sunday:     Holidays:	<ul> <li>ii. During Operations:</li> <li>Monday - Friday:</li></ul>	

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction,	□ Yes □ No
operation, or both? If yes:	
i. Provide details including sources, time of day and duration:	
	<del></del>
<i>ii.</i> Will the proposed action remove existing natural barriers that could act as a noise barrier or screen?	□ Yes □ No
Describe:	
n. Will the proposed action have outdoor lighting? If yes:	□ Yes □ No
<ul><li>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</li></ul>	
<i>ii.</i> Will proposed action remove existing natural barriers that could act as a light barrier or screen?	□ Yes □ No
Describe:	
o. Does the proposed action have the potential to produce odors for more than one hour per day?	□ Yes □ No
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest	
occupied structures:	
p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons)	□ Yes □ No
or chemical products 185 gallons in above ground storage or any amount in underground storage?	
If Yes:	
<ul><li>i. Product(s) to be stored</li></ul>	
iii. Generally, describe the proposed storage facilities:	
q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides,	□ Yes □ No
insecticides) during construction or operation?	
<ul><li>If Yes:</li><li>i. Describe proposed treatment(s):</li></ul>	
ii. Will the proposed action use Integrated Pest Management Practices?	□ Yes □ No
r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal	□ Yes □ No
of solid waste (excluding hazardous materials)? If Yes:	
<i>i.</i> Describe any solid waste(s) to be generated during construction or operation of the facility:	
• Construction: tons per (unit of time)	
• Operation : tons per (unit of time)	
<ul><li>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</li><li>Construction:</li></ul>	
Construction.	
Operation:	
iii. Proposed disposal methods/facilities for solid waste generated on-site:	<del></del>
Construction:	
Operation:	

<ul><li>s. Does the proposed action include construction or mod</li><li>If Yes:</li><li>i. Type of management or handling of waste proposed</li></ul>	I for the site (e.g., recycling	g or transfer station, compostin	☐ Yes ☐ No g, landfill, or
other disposal activities):	-combustion/thermal treatm		
t. Will the proposed action at the site involve the comme waste?  If Yes:  i. Name(s) of all hazardous wastes or constituents to be			
<i>ii.</i> Generally describe processes or activities involving	hazardous wastes or consti	tuents:	
<ul><li>iii. Specify amount to be handled or generatedt</li><li>iv. Describe any proposals for on-site minimization, red</li></ul>	cycling or reuse of hazardo	us constituents:	
v. Will any hazardous wastes be disposed at an existing If Yes: provide name and location of facility:			□ Yes □ No
If No: describe proposed management of any hazardous	wastes which will not be s	ent to a hazardous waste facilit	ty:
E. Site and Setting of Proposed Action			
E.1. Land uses on and surrounding the project site			
a. Existing land uses.  i. Check all uses that occur on, adjoining and near the  ☐ Urban ☐ Industrial ☐ Commercial ☐ Resio  ☐ Forest ☐ Agriculture ☐ Aquatic ☐ Othe  ii. If mix of uses, generally describe:		,	
b. Land uses and covertypes on the project site.	** All values based as as as	of disturbance of 94,480 SF **	
Land use or	Current	Acreage After	Change
Covertype	Acreage	Project Completion	(Acres +/-)
<ul> <li>Roads, buildings, and other paved or impervious surfaces</li> </ul>			
• Forested			
Meadows, grasslands or brushlands (non- agricultural, including abandoned agricultural)			
Agricultural     (includes active orchards, field, greenhouse etc.)			
<ul> <li>Surface water features (lakes, ponds, streams, rivers, etc.)</li> </ul>			
Wetlands (freshwater or tidal)			
Non-vegetated (bare rock, earth or fill)			
Other     Describe:			
	1		I

i. If Yes: explain:  d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  If Yes,  i. Identify Facilities:	i. If Yes: explain:  d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  If Yes:  i. Identify Facilities:  Does the project site contain an existing dam?  if Yes:  i. Dimensions of the dam and impoundment:  i. Dam height:  i. Dam height:  i. Dam length:  i. Dam length:  i. Dam length:  ii. Dam serving hazard classification:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Describe the location of the project site relative to the boundaries of the solid waste management facility:  iii. Describe the location of the project site relative to the boundaries of the solid waste management facility:  iii. Describe any development constraints due to the prior solid waste activities:  iii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Posteribe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Posteribe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Posteribe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Posteribe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Is supportion of the site don the NYSDEC Spills Incidents database or Environmental Site or law and provide Database?  iii. If site has been subject of RCRA corrective activities, descr		
day care centers, or group homes) within 1500 feet of the project site?  If Yes:  i. Identify Facilities:	day care centers, or group homes) within 1500 feet of the project site? If Yes,  I. Identify Facilities:	c. Is the project site presently used by members of the community for public recreation?  i. If Yes: explain:	□ Yes □ No
e. Does the project site contain an existing dam?  If Yes:  i. Dimensions of the dam and impoundment:  • Dam height:  • Dam height:  • Dam length:  • Surface area:  • Volume impounded:  iii. Drive existing hazard classification:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Describe the project site adjoin property which is now, or was at one time, used as a solid waste management facility?  iii. Describe the location of the project site relative to the boundaries of the solid waste management facility:  iiii. Describe any development constraints due to the prior solid waste activities:  iiii. Describe any development constraints due to the prior solid waste activities:  iiii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Provide Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  iii. Is supportion of the site listed on the NYSDEC Spills Incidents database or Environmental Site or have any waste of the proposed site?  If Yes:  i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site or have any waste of the proposed site?  If Site has been subject	E. Does the project site contain an existing dam?  If Yes:  i. Dimensions of the dam and impoundment:  • Dam height:  • Dam height:  • Dam length:  • Surface area:  • Volume impounded:  iii. Dam's existing hazard classification:  iii. Provide date and summarize results of last inspection:  iii. Provide date and summarize results of last inspection:  iii. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility;  If Yes:  i. Has the project site adjoin property which is now, or was at one time, used as a solid waste management facility?  If Yes:  i. Has the facility been formally closed?  • If yes, cite sources/documentation:  iii. Describe the location of the project site relative to the boundaries of the solid waste management facility:  iiii. Describe any development constraints due to the prior solid waste activities:  g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste?  If Yes:  i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?  If Yes:  i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site  Remediation database? Check all that apply:  Yes = Spills Incidents database Provide DEC ID number(s):  No Height and such a property within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?  No Hyes, provide DEC ID number(s):	If Yes,	□ Yes □ No
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If yes, provide DEC ID number(s):	If yes, provide DEC ID number(s):	ii. If site has been subject of RCRA corrective activities, describe control measures:	
			□ Yes □ No

v. Is the project site subject to an institutional control limiting property uses?		□ Yes □ No
If yes, DEC site ID number:		
Describe the type of institutional control (e.g., deed restriction or easement):      Describe only used limitations:		
<ul><li>Describe any use limitations:</li><li>Describe any engineering controls:</li></ul>		
Will the project affect the institutional or engineering controls in place?		□ Yes □ No
Explain:		= 103 = 140
2.1pmin.		
E.2. Natural Resources On or Near Project Site		
a. What is the average depth to bedrock on the project site?	feet	
	1001	
b. Are there bedrock outcroppings on the project site?	0/	□ Yes □ No
If Yes, what proportion of the site is comprised of bedrock outcroppings?	%	
c. Predominant soil type(s) present on project site:	%	
	%	
	%	
d. What is the average depth to the water table on the project site? Average:f	eet	
e. Drainage status of project site soils:   Well Drained:  "% of site		
□ Moderately Well Drained:% of site		
□ Poorly Drained% of site		
f. Approximate proportion of proposed action site with slopes:   0-10%:	% of site	
□ 10-15%:	% of site	
□ 15% or greater:	% of site	
g. Are there any unique geologic features on the project site?  If Yes, describe:		□ Yes □ No
If Tes, describe.		
h. Surface water features.		
i. Does any portion of the project site contain wetlands or other waterbodies (including st	reams, rivers,	□ Yes □ No
ponds or lakes)?  ii. Do any wetlands or other waterbodies adjoin the project site?		□ Yes □ No
If Yes to either <i>i</i> or <i>ii</i> , continue. If No, skip to E.2.i.		
•	y any fadaral	□ Yes □ No
<i>iii.</i> Are any of the wetlands or waterbodies within or adjoining the project site regulated b state or local agency?	y any rederar,	□ Tes □ No
<i>iv.</i> For each identified regulated wetland and waterbody on the project site, provide the fo	llowing information.	
Streams: Name	•	
Lakes or Ponds: Name		
Wetlands: Name	Approximate Size	
<ul> <li>Wetland No. (if regulated by DEC)</li> </ul>		
v. Are any of the above water bodies listed in the most recent compilation of NYS water of	luality-impaired	$\square$ Yes $\square$ No
waterbodies?		
If yes, name of impaired water body/bodies and basis for listing as impaired:		
i. Is the project site in a designated Floodway?		□ Yes □ No
j. Is the project site in the 100-year Floodplain?		□ Yes □ No
k. Is the project site in the 500-year Floodplain?		□ Yes □ No
1. Is the project site located over, or immediately adjoining, a primary, principal or sole sou If Yes:	arce aquifer?	□ Yes □ No
i. Name of aquifer:		
1		

m. Identify the predominant wildlife species that occupy	or use the project site:	
n. Does the project site contain a designated significant na If Yes:  i. Describe the habitat/community (composition, function)	atural community? on, and basis for designation):	□ Yes □ No
<ul> <li>ii. Source(s) of description or evaluation:</li> <li>iii. Extent of community/habitat:</li> <li>Currently:</li> <li>Following completion of project as proposed:</li> <li>Gain or loss (indicate + or -):</li> <li>O. Does project site contain any species of plant or animal</li> </ul>	acres acres acres	□ Yes □ No
	dentified as habitat for an endangered or threatened spec	
<ul> <li>p. Does the project site contain any species of plant or an special concern?</li> <li>If Yes: <ul> <li>i. Species and listing:</li> </ul> </li> </ul>	•	□ Yes □ No
q. Is the project site or adjoining area currently used for h If yes, give a brief description of how the proposed action		□ Yes □ No
E.3. Designated Public Resources On or Near Project	Site	
a. Is the project site, or any portion of it, located in a design Agriculture and Markets Law, Article 25-AA, Section If Yes, provide county plus district name/number:	303 and 304?	□ Yes □ No
b. Are agricultural lands consisting of highly productive s  i. If Yes: acreage(s) on project site?  ii. Source(s) of soil rating(s):	•	□ Yes □ No
c. Does the project site contain all or part of, or is it substantural Landmark?  If Yes:  i. Nature of the natural landmark: □ Biological (ii. Provide brief description of landmark, including value)		□ Yes □ No
d. Is the project site located in or does it adjoin a state list If Yes:  i. CEA name:  ii. Basis for designation:		□ Yes □ No
iii. Designating agency and date:		

e. 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 Commiss Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic P	✓ Yes No ioner of the NYS laces?
If Yes:	
<ul> <li>i. Nature of historic/archaeological resource: ☐Archaeological Site</li> <li>ii. Name: Old Nyack HS (BOCES)</li> </ul>	
iii. Brief description of attributes on which listing is based:	
Building is eligible for National Register	
f. 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?	∐Yes <b>∠</b> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?	□Yes☑No
If Yes:  i. Describe possible resource(s):	
ii. Basis for identification:	
h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or local	✓ Yes □No
scenic or aesthetic resource? If Yes:	
i. Identify resource: Village of Nyack view protection corridor (Sickles Ave)	
ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or	scenic byway,
etc.): Village of Nyack Master Plan  iii. Distance between project and resource: Forty Five Feet miles.	
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers	☐ Yes ✓ No
Program 6 NYCRR 666?	1 cs 100
If Yes:  i. Identify the name of the river and its designation:	
ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	□Yes□No
F. Additional Information Attach any additional information which may be needed to clarify your project.  If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.	
G. Verification I certify that the information provided is true to the best of my knowledge.  Applicant/Sponsor Name Montefiore Nyack Hospital / Steve Apicella  Date 6/11/2020  Title Director of Safety & Security	
· · · · · · · · · · · · · · · · · · ·	



ANDREW M. CUOMO

Governor

ROSE HARVEY
Commissioner

September 09, 2016

Mr. Michael Pomarico Pomarico Design Studio Architecture, PLLC 19 Front Street Newburgh, NY 12550

Re: DOH

Emergency Department & Medical Village Expansion and Alteration (DSRIP)

160 North Midland Ave, Nyack, NY 10960

16PR06238 162082c

Dear Mr. Pomarico:

Thank you for requesting the comments of the Office of Parks, Recreation and Historic Preservation (OPRHP). We have reviewed the project in accordance with the New York State Historic Preservation Act of 1980 (Section 14.09 of the New York Parks, Recreation and Historic Preservation Law). These comments are those of the OPRHP and relate only to Historic/Cultural resources. They do not include potential environmental impacts to New York State Parkland that may be involved in or near your project. Such impacts must be considered as part of the environmental review of the project pursuant to the State Environmental Quality Review Act (New York Environmental Conservation Law Article 8) and its implementing regulations (6 NYCRR Part 617).

Based upon this review, it is the New York State Office of Parks, Recreation and Historic Preservation's opinion that your project will have no impact on archaeological and/or historic resources listed in or eligible for the New York State and National Registers of Historic Places.

If further correspondence is required regarding this project, please be sure to refer to the OPRHP Project Review (PR) number noted above.

Sincerely,

Ruth L. Pierpont

Kuth &. Rupont

Deputy Commissioner for Historic Preservation



ANDREW M. CUOMO

**ROSE HARVEY** 

Governor

Commissioner

June 30, 2016

Mr. Alexander Dietrich Staff Planner 85 Civic Center Plaza, Suite 103 Poughkeepsie, NY 12601

Re: SEQRA

Nyack Hospital Expansion

16PR03847

Dear Mr. Dietrich:

Thank you for requesting the comments of the Division for Historic Preservation of the Office of Parks, Recreation and Historic Preservation (OPRHP) as part of your SEQRA process. These comments are those of the Division for Historic Preservation and relate only to Historic/ Cultural resources. They do not include potential environmental impacts to New York State Parkland that may be involved in or near your project. Such impact must be considered as part of the environmental review of the project pursuant to the State Environmental Quality Review Act (New York Environmental Conservation Law Article 8) and its implementing regulations (6 NYCRR Part 617).

We have reviewed your submission dated June 3, 2016 for the Nyack Hospital Expansion parking lot project. We note that the project area is adjacent to the National Register Eligible Nyack Old High School. We understand that the project will include conversion of a baseball field into a parking lot behind the hospital along Haven Ct. Based on this review, the SHPO has no concerns with the proposed project.

If this project will involve state or federal permitting, funding or licensing, it may require a more rigorous review for potential impacts to architectural and archaeological resources, in accordance with Section 106 of the National Historic Preservation Act or Section 14.09 of NYS Parks Recreation and Historic Preservation Law.

If you have any questions, I can be reached at (518)268-2164.

Sincerely,

Weston Davey

Historic Site Restoration Coordinator e-mail: weston.davey@parks.ny.gov

via e-mail only