



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

APPLICANT WORKSHEET FOR BUILDING PERMITS

This worksheet is presented as a guide for your preparation of a complete building permit application. Please be careful to include all the documents and items required for the proposed work. Incomplete applications will not be accepted.

BASIC INFORMATION:

- a. Tax Map #
- b. Property Location
- c. Existing use of premises
- d. Zoning
- e. Do FEMA zoning regulations apply? (yes or no)
- f. Do Coastal Zone regulations apply? (yes or no)
- g. Owner(s) of record and contact information
- h. Agent responsible for proposed work/construction
- i. Architect contact information
- j. Proposed work project details
- k. Owner's authorization (if the owner is being represented by an agent, an authorization must be signed & notarized)
- l. Zoning Board of Appeals Case # (if applicable)

NOTE: *If an application is required for plan approval from the BZA, the applicant is required to follow all directions, approvals, and agreements with one or both boards as applied. Any deviation(s) from approved plans will be resubmitted to applicable boards for additional approval.*

APPLICATION REQUIREMENTS:

- a. Building Permit Application
- b. Construction plans: 2 sets for Residential and 2 sets for Commercial (1/4" scale ONLY)
- c. Two CURRENT Land Surveys
 - Shall show existing and proposed work footprints and lot coverage calculations.
 - Shall show data pertinent to zoning and building code regulations.
- d. FEMA Elevation Certificate for Flood Hazard Zones
- e. Photographs of building, property, and adjacent properties (* SEE NOTE BELOW)
- f. Landscape Plan as approved per the Planning Board
- g. Certificate(s) of Occupancy and/or outstanding permit(s) – All issued.
- h. Builder/Contractor Identification and Licenses – Must be received prior to issuance of building permit.
- i. Certificate of Workman's Compensation – Must be received prior to issuance of a building permit.
- j. Certificate of Liability listing the Village of Manorhaven as additionally insured must be received prior to issuance of a building permit
- k. Fees – to be determined on acceptance of building permit.
- l. Letter of Approval from the Water District
- m. For Demolition Permits – please list carting company.
- n. Soil test borings indicating level of water at high tide.
- o. Signage – describe all information proposed on sign, type of sign, style of print and font size
- p. Notice of utilization of Truss type construction

ADDITIONAL DOCUMENTS AND/OR APPROVALS IF APPLICABLE:

- a. Any application in flood plain areas will require Planning Board approval if FILL is brought onto the project site (per Chapter 72 of the Village Code)
- b. Nassau County Department of Health Services
- c. Nassau County Department of Public Works
- d. NYS Department of Environmental Conservation
- e. Village of Manorhaven Trustees (docks, bays, lakes, waterways, etc.)
- f. Fire Marshall – Business Multiple Dwellings (fuel tanks, fire alarms, fire suppression)
- g. **BZA – Board of Zoning and Appeals**
- h. **Planning Board**
- i. Board of Trustees Special Exception Determination



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

BUILDING PERMIT APPLICATION

INSTRUCTIONS: The applicant/owner or owner's agent shall fill out all forms which indicate owner/owner agent including the data sheet, permit affidavits, one call form, soil and erosion control form and the asbestos building survey.

New construction is estimated at **\$375 per square foot**

Please refer to permit fee schedule based on residential, 1-family, 2-family, commercial, etc.

EXAMPLE: A 3,000 sq ft 2-family house x \$375 per square foot, equals an estimated cost of a \$1,125,000 construction cost.

Below is an example on how to calculate fees:

Permit -	\$ 100.00
1 st thousand -	\$ 50.00
Each additional \$1,000 -	\$ 10.00
Certificate of Occupancy -	\$ 50.00
Building Dept. Fee equals -	\$ 6,940.00
Impact Fee -	\$ 20,000.00

(NOTE: An impact fee of \$20,000 is required for a new construction of a dwelling of two or more families.)

SUBMIT SOIL BORING RESULTS FOR GROUND WATER AT HIGH TIDE:

A. For Building Permit Applications filed with the Zoning Board:

Submit **3 sets** of **Stamped and Sealed presentation drawings** which will include:

- 1** Title sheet;
- 2** Plot plan 2 3/16" = 1'0" include on the plan all zoning information, setbacks, lot coverage, height of house measured from the crown of the road to the top of ridge;
- 3** Site Drainage: show dry wells and trench drain at driveways;
- 4** Driveways at 10 ft. wide x 20 ft. long and shall be designed with 2 ft ribbons of pavers at the edges, a double driveway shall have a 4 ft ribbon in the middle in addition to the side ribbons. Driveway aprons shall be 2 @ 8 ft. **or** 1 @ 16 ft.;
- 5** Also include AC unit locations, garbage storage bin location, sidewalks and house numbers;
- 6** Refer to filing BZA applications;
- 7** The plot shall indicate the elevation at the crown of the road, elevation top of footing, elevation top of foundation, elevations at 4 corners of the property, 2 elevations at mid points of the property and 4 elevations at the corners of the house and the finished first floor elevation;
- 8** The additional plans shall be floor plans at 1/4" = 1'0", four elevations scale at 3/8" = 1'0", sections scale at 3/8" = 1'0". **Presentation Style ONLY, working drawings will not be accepted!**

NOTE: IF YOU ARE SUBMITTING a BZA application, include the Denial Letter, include Letter of Requirements!

B: For a Building Permit Application Permit which does not include a BZA Application:

- 1. Submit 3 sets** of **Stamped and Sealed** complete working drawings with Building and Plumbing Applications, as listed above.
- 2. Submit** recent survey within one year, note that energy code calculations must be submitted prior to approval.

2 - BUILDING INSTRUCTIONS CONTINUED:

C: For Demolition Permits: Submit:

1. Completed description page, completed affidavits, water disconnect and letter of availability, one call sheet, asbestos survey, and review Soil and Erosion Control Sheet;
2. The application must be completely filled out which includes a **\$100 fee**;
3. Before demolition commences, all oil storage tanks either above or in ground, shall be emptied of all product and removed from the site;
4. Prior to demolishing a building water service, gas service, sewer lines and electric service lines shall all be disconnected.

D: For All Electrical and Plumbing Work:

1. Unlicensed contractors may request a **reciprocal license** when they are licensed in the Town of North Hempstead, Hempstead or Oyster Bay.

NOTE: Plumbing Permits shall be submitted for all work greater than direct replacement of 3 fixtures. Applications include replacing oil tanks above or below ground. Permits shall be submitted when converting to gas and installing furnaces, boilers and hot water heaters. When disconnecting or repairing water service lines, permits are required and a **DIAGRAM** must also be attached indicating the location of the line.

E. Letter of Water Availability:

Prior to issuing a building permit, a letter of water availability must be obtained from the Port Washington Water District located at 38 Sandy Hollow Road, Port Washington. Building Permits will not be issued unless the water service line is located in relation to the other services for the house.

**BEFORE YOU DIG... YOU MUST CALL
THE LONG ISLAND ONE CALL CENTER
1-800-272-4480**

**IT'S THE LAW! TWO TO TEN DAYS BEFORE YOU DIG YOU
MUST NOTIFY THE ONE CALL CENTER AND ARRANGE FOR A
MARK OUT OF ALL UTILITIES!!**

I certify that prior to starting any excavation work I will notify the One Call Center and arrange for a mark out of all utilities. In addition, I agree to hold the Incorporated Village of Manorhaven harmless from any injury to persons or property caused by negligence or otherwise in connection with demotion or excavations during the length of the proposed project. In the event that a dumpster is required, I will notify the Building Department and file for a permit. I will ONLY use a dumpster carrier certified and insured with the Village of Manorhaven.

By signing my name, I, _____ certify that I have read the above notice and agree to abide by the terms for project address _____.

STATE OF NEW YORK
COUNTY OF NASSAU

Notary Seal

Sworn to before me this _____ day of _____, 20 _____

Signed _____

Notary Public _____

Commission Expires _____



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

BUILDING PERMIT DATA SHEET

DATE RECEIVED: _____ FEE PAID: _____

SITE LOCATION: _____

SECTION: _____ BLOCK: _____ LOT(S): _____

OWNER'S NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ BUSINESS PHONE: _____

EMAIL ADDRESS: _____

GENERAL CONTRACTOR'S NAME: _____

ADDRESS: _____ PHONE: _____

NASSAU COUNTY CONSUMER AFFAIRS LICENSE #: _____

GENERAL CONTRACTOR'S NAME: _____

ADDRESS: _____ PHONE: _____

PRESENT PROPERTY USE: _____

PROPOSED USE: _____

SIZE OF EXISTING BUILDING: _____ SIZE OF PROPOSED BUILDING: _____

PRESENT % OF LOT: _____ PROPOSED % OF LOT: _____

FRONT SETBACK: _____ REAR SETBACK: _____ RIGHT SIDE YARD: _____ LEFT SIDE YARD: _____

WILL EXISTING BUILDING BE DEMOLISHED? _____

WILL THERE BE PLUMBING WORK ASSOCIATED WITH THIS PERMIT: YES NO

PLUMBER BUSINESS NAME: _____ PLUMBER NAME: _____

VILLAGE OF MANORHAVEN PLUMBER LICENSE # _____

WILL THERE BE ELECTRICAL WORK ASSOCIATED WITH THIS PERMIT: YES NO

ELECTRICIAN BUSINESS NAME: _____ ELECTRICIAN NAME: _____

VILLAGE OF MANORHAVEN ELECTRICIAN LICENSE # _____

WORK DETAILED IN PERMITS SHALL COMMENCE WITHIN 6 MONTHS OF ISSUANCE AND SHALL BE COMPLETED WITHIN ONE (1) YEAR OF ISSUANCE OR RENEWED PRIOR TO THE EXPIRATION DATE.
A CERTIFICATE OF OCCUPANCY.COMPLETION MUST BE OBTAINED PRIOR TO USE OR OCCUPANCY.

One of the following affidavits must be completed: Project Section _____ Block _____ Lot(s) _____

Affidavit to be completed by Owner other than Corporation

STATE OF NEW YORK
COUNTY OF NASSAU

_____ being duly sworn, deposes and says he is the owner in fee of the property described in the foregoing application, that I authorize the below listed agent to make this Building Permit Application, and that the statements contained therein are true to the best of his knowledge and belief.

Sworn to me this _____ day of _____ 20_____

Signed

Notary Public

Affidavit to be completed by Corporation Owner

STATE OF NEW YORK
COUNTY OF NASSAU

_____ being duly sworn, deposes and says that the listed Corporation is owner in fee of the described property and authorizes the below listed agent to make this application for the attached Building Permit Application, and that the statements contained therein are true to the best of his knowledge and belief.

Sworn to me this _____ day of _____ 20_____

Signed

Notary Public

Affidavit to be completed by Agent of Owner

STATE OF NEW YORK
COUNTY OF NASSAU

_____ being duly sworn, deposes and says he is the agent named in the foregoing Building Permit Application, that he has been duly authorized by the owner in fee to make this application and that the foregoing statements contained therein are true to the best of his knowledge and belief.

Sworn to me this _____ day of _____ 20_____

Signed

Notary Public



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

NOTICE REGARDING EXPIRATION OF PERMITS

Permit # _____

Location: _____

Work detailed in permits shall commence within 6 months of issuance and shall; be completed within (1) year of issuance, or renewed prior to expiration according to the Manorhaven Code. A Certificate of Occupancy must be obtained prior to use or occupancy. This also applies to Certificates of Completion, and Certificates of Approval (Plumbing.)

Inspections:

The permit process includes a series of required inspections. The general contractor is responsible for making appointments for the required inspections. The applicant, the owner's agent, and the owner, are equally responsible for obtaining the proper inspections. **The owner is ultimately responsible for obtaining the final Certificate of Occupancy/Completion Approval prior to use or occupancy and is responsible for making appointments for inspections noted on the building permit placard.**

I am the (check one) OWNER OWNER'S AGENT GENERAL CONTRACTOR

Name (print): _____

Address: _____

The approved permit and plans shall be at the premises at all times. NOTE: The owner, general contractor, architect, or agent must be present during inspections.

I have read the information above and understand it.

Signature: _____

STATE OF NEW YORK
COUNTY OF NASSAU

Sworn to me this _____ day of _____ 20_____

Signed

Notary Public

INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000



Date: _____

Building Permit # _____

Location: _____

Approved By: _____

PERMIT TRACKING REPORT

Project Section _____ **Block** _____ **Lot(s)** _____ **Date Submitted:** _____

OWNER'S NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ BUSINESS PHONE: _____

EMAIL ADDRESS: _____

Plumbing License # _____ **Date:** _____

Demolition : _____

Rough Plumbing: _____

Excavation: _____

Mercury Test: _____

Footings: _____

Drywells: _____

Foundation: _____

Fireplace: _____

Foundation Survey: _____

Insulation: _____

Damp proofing: _____

Final Inspection: _____

Framing: _____

Site Work: _____

Building: _____

Variance: _____

Plumbing: _____

Access: _____

Court: _____

Need Drawings: _____

Need Fees: _____

Title Search: _____

Notes: _____

Permit Description: _____



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

BUILDING PERMIT APPLICATION CHECKLIST

Date Received: _____

Project Section _____ Block _____ Lot(s) _____

Application/Receipt # _____

Zoning: _____ Permit # _____

Permit Fee: _____

Fema: YES NO Coastal Zone: YES NO New Application: _____ Renewal: _____

OWNER INFORMATION:

Property Location: _____

Owner of Record: _____

Address _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Work Phone: _____ Fax: _____

AGENT INFORMATION:

Agent Responsible for Proposed Work: _____

Address _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Work Phone: _____ Fax: _____

ARCHITECT INFORMATION:

Plans Prepared By: _____

New York State RA/PE License #: _____

Address _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Work Phone: _____ Fax: _____

PROPOSED WORK PROJECT DETAILS:

Electrician Business Name: _____ Electrician's Name: _____

Village of Manorhaven Electrician's License # _____

Contractor Responsible for Proposed Work: _____

Nassau County Builder / Contractor License #: _____

Existing Use of Premises _____ CO # _____ Date Issued _____

Proposed Project Description: _____

Is this project a new building: YES NO

If Yes: Square Footage Details:

1st Floor _____ 2nd Floor _____ Mezzanine _____ Basement: _____

Is this an addition, alteration or renovation? YES NO

Size of Existing Building _____ Size of Proposed _____

Present % of Lot _____ Proposed % of Lot _____

Front Setback: _____ Rear Setback _____ Right Side _____ Left Side _____

Additional Information: All measurements in square feet:

Pool _____ Deck _____ Patio _____ Fence _____ Garage _____

Shed _____ Other _____

Is this project a demolition: YES NO

Demolition of: _____ Name of Carter: _____

** Will any FILL be brought onto this site? YES NO

*** Will the property be regarded to change the site contours? YES NO

TOTAL ESTIMATED COST: \$ _____

**Silt Fencing / Hay Bales MUST be in place PRIOR to the issuance of a permit!!
NO EXCEPTIONS - INSPECTION REQUIRED!!**

PARTY: NOTARY PUBLIC:

Application is hereby made for Issuance of a Building Permit pursuant to the Code of the Village of Manorhaven and the building Code of the State of the State of New York, and all amendments thereto, for the work as described herein and in the described plans and specifications.

STATE OF NEW YORK }

COUNTY _____ } SS: _____ being duly sworn
PRINT NAME OF PERSON SIGNING APPLICATION

Deposes and says that he/she is the applicant as named above. He/she is the _____
OWNER OR AGENT, CONTRACTOR, OFFICER

Of said Owner or Owners, and is duly authorized to perform or have performed the said work, as described in the attached plans and specifications, and to make and file this application; that all statements contained in this application are true to the best of her/his knowledge and belief; and that the work will be performed in the manner set forth in this application, plans and specifications file herewith.

Sworn to, before me this _____ day of _____, 20_____

Applicant Signature

Notary Signature

STAMP WITH EXPIRATION DATE

THIS SECTION TO BE COMPLETED BY BUILDING INSPECTOR

Building Inspector Approval: _____

Date of Approval: _____



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

OWNER AUTHORIZATION

STATE OF NEW YORK }
COUNTY OF NASSAU } SS:

I, _____

residing at _____
OWNER ADDRESS

being the owner of premises _____
PROPERTY LOCATION

also known as Nassau County Tax Map # _____

hereby authorize _____
AGENT

whose mailing address is _____
AGENT ADDRESS

to appear on my behalf before the _____

of the Village of Manorhaven, and to file any documents required with references to my application for :

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by the Board as a condition of their approval.

OWNER SIGNATURE

DATE

Sworn to, before me this _____ day of _____, 20_____

Notary Signature

STAMP WITH EXPIRATION DATE



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

WINDOW PROTECTION FOR FLYING DEBRIS IN 100 MPH WIND ZONES

Should the contractor choose the option to install structural wood panels over windows and glass sliding doors instead of providing windows with impact resistant glass, then the following requirements must be satisfied:

- i. All panels shall be painted white;
- ii. The words "Structural Panels – Do Not Discard," shall be printed on all panels in 2 inch letters;
- iii. Each panel shall contain the property address;
- iv. Indicate level on each panel (1st or 2nd floor);
- v. Indicate level of elevation on each panel (right, left, front, rear);
- vi. Indicate bedroom number as shown on plans;
- vii. Boards shall be consecutively numbered;
- viii. During final inspection, the panels shall be installed on all windows and sliding glass doors with hardware equal to or better than required by the NYS Residential Code;
- ix. All panels shall be stored on site and reinstalled over existing windows and sliding glass doors prior to a hurricane or 100 year storm impacting the area;
- x. All lettering shall be black and 2 inches high.

I have read the following requirements and agree to these terms. I shall comply with the information above in lieu of installing windows with impact resistant glass as required by the NYS Residential Code in areas within one mile of the coast.

Date _____

I am the Owner/Owner's Agent _____

Owner/Agent's Address _____

Phone number _____ Email _____

Signature _____

Sworn to before me this _____ day of _____ 20_____

STAMP WITH EXPIRATION DATE

Notary Public



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

BUILDING ALTERATION & NEW CONSTRUCTION
SOIL & EROSION CONTROL REQUIREMENTS

NOTE: It is prohibited to allow the discharge of fluids containing sediments into municipal streets, catch basins or waterways.

All construction sites will provide and maintain protection as soon as the soil is exposed to erosion. Perimeter controls consisting of staked hay bales and silt fence shall be immediately installed before demolition and maintained throughout the construction process until after demolition has been completed.

In an effort to control non-point source pollution, erosion and sediment during construction or landscaping and to prevent water run-off from carrying sediment and/or harmful chemicals into the streets and then into the bay, the Village requires the following practices:

1. Disturbed soils shall be stabilized as soon as possible with temporary vegetation and/or mulching. Permanent vegetation shall be established as soon as possible after the utilities are completed and the structure is enclosed; or within a time frame specified on the building permit.
2. The general contractor shall be responsible to maintain Village streets free from water run off. The streets immediately adjacent to the property shall be kept free from any mud or sediments that are inadvertently carried into the street by vehicles exiting the construction site. The general contractor shall immediately clean the street.
3. Should you fail to comply, you will be issued a Notice of Violation and/or Summons. If you are found guilty, you will be subject to a fine not to exceed \$1000 for the first offense and/or imprisonment not to exceed 15 days.

By signing this document, I certify that I have read the above statements and agree to abide by the terms.

SIGNATURE

DATE



INCORPORATED VILLAGE OF MANORHAVEN
"THE PEARL OF MANHASSET BAY"

33 Manorhaven Boulevard
Port Washington, New York 11050
Phone: (516) 883-7000

DEMOLITION ASBESTOS BUILDING SURVEY

An inspection by a licensed asbestos abatement company shall be required prior to the issuance of a demolition permit. The inspection shall determine if any significant amounts of airborne asbestos or asbestos containing materials have the potential to be released during demolition. Suspect materials shall be sent to a laboratory for analysis. If asbestos is found to be present, all locations shall be mapped out (**as per 12 NYCRR § 56 -1.9 - b, c, d and e.**)

Has asbestos been found at the site? YES NO

Date of survey: _____

Address of Survey: _____

Owner of Building: _____

Owner's Address: _____

Owner's Phone: _____ Email: _____

Demolition Contractor: _____

Contractor Phone: _____ Email: _____

Asbestos Abatement Contractor: _____

Contractor Phone: _____ Email: _____

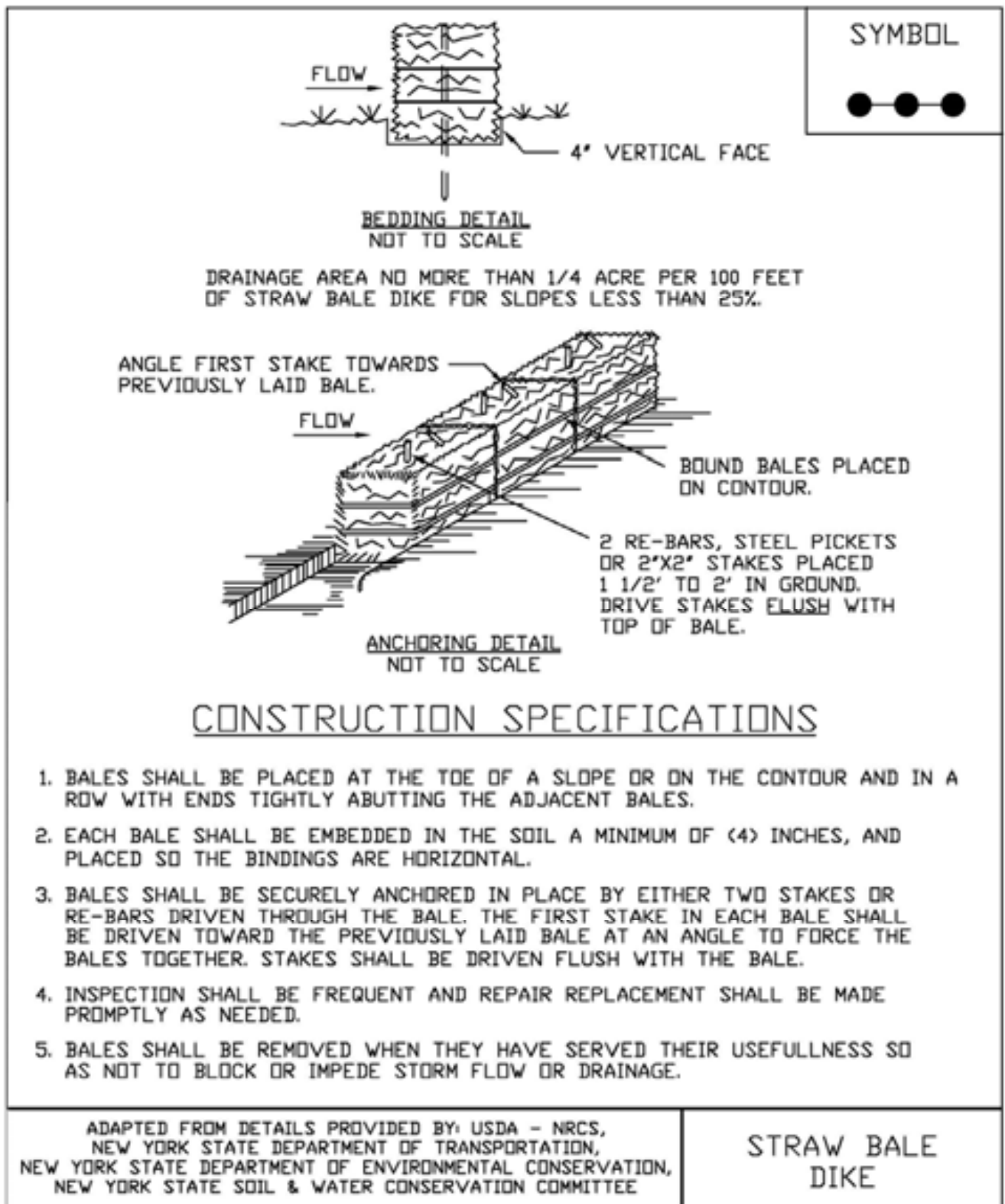
Abatement Contractor License Number: _____

Name of Laboratory: _____

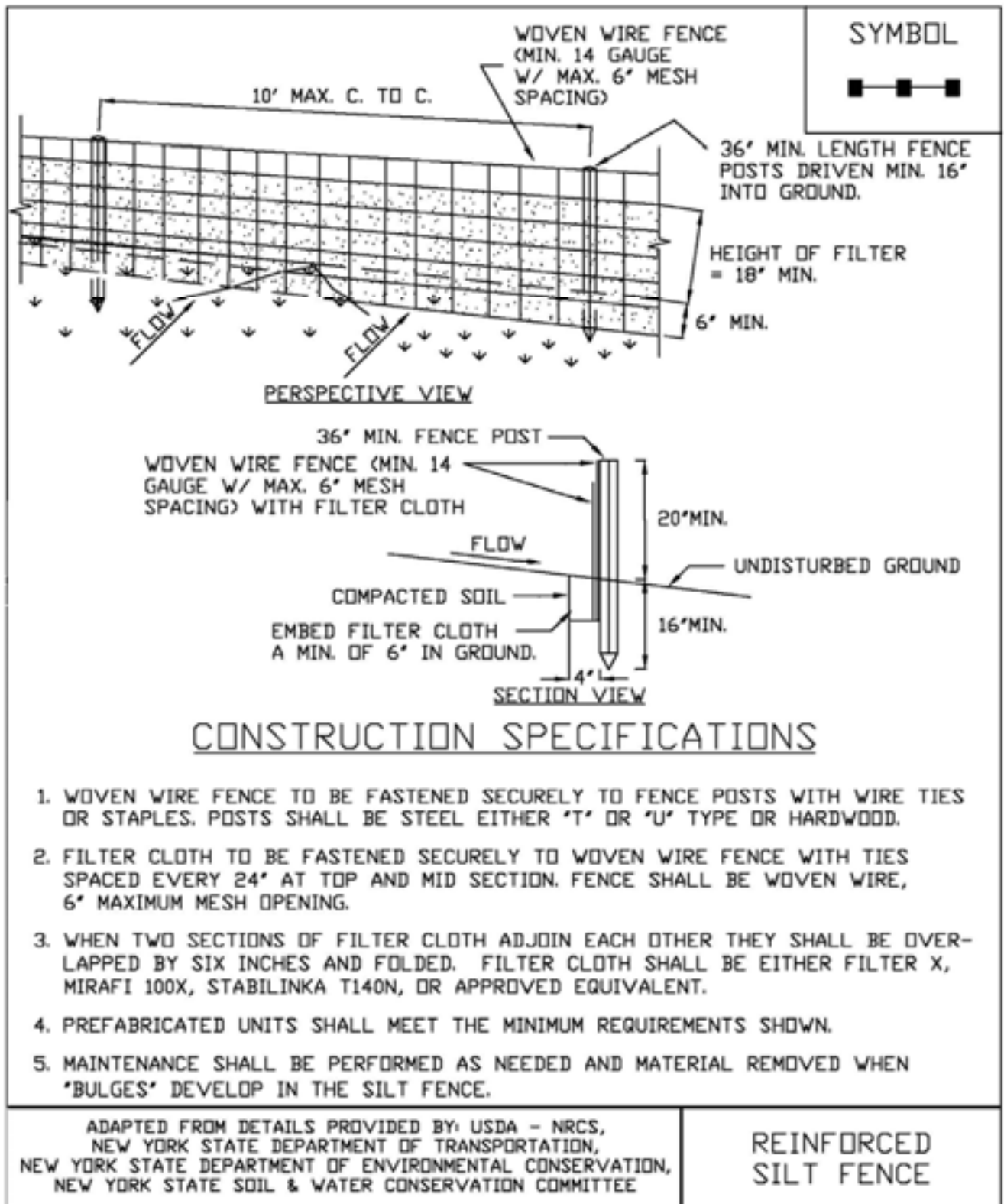
Submit Laboratory Report: _____

Date Submitted: _____

**Figure 5.34
Straw Bale Dike**



**Figure 5.30
Reinforced Silt Fence**



**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER
CONSTRUCTION IN RESIDENTIAL STRUCTURES**

(In accordance with Title 19 NYCRR PART 1265)

INCORPORATED VILLAGE OF MANORHAVEN

OWNER OF PROPERTY: _____

SUBJECT PROPERTY (ADDRESS AND TAX MAP NUMBER):

PLEASE AFFIX APPROPRIATE SIGN OR SYMBOL IN ACCORDANCE WITH TITLE 19 NYCRR 1265

SECTION 382-B OF THE EXECUTIVE LAW.

PLEASE TAKE NOTICE THAT THE (CHECK ALL THAT APPLY):

- New Residential Structure
- Addition to Existing Residential Structure
- Rehabilitation to Existing Residential Structure

**TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE
(check each applicable line):**

- Truss Type Construction (TT)
- Pre-Engineered Wood Construction (PW)
- Timber Construction (TC)

IN THE FOLLOWING LOCATION(S) (CHECK APPLICABLE LINE):

- Floor Framing, Including Girders and Beams (F)
- Roof Framing (R)
- Floor Framing and Roof Framing (FR)

SIGNATURE: _____

DATE: _____

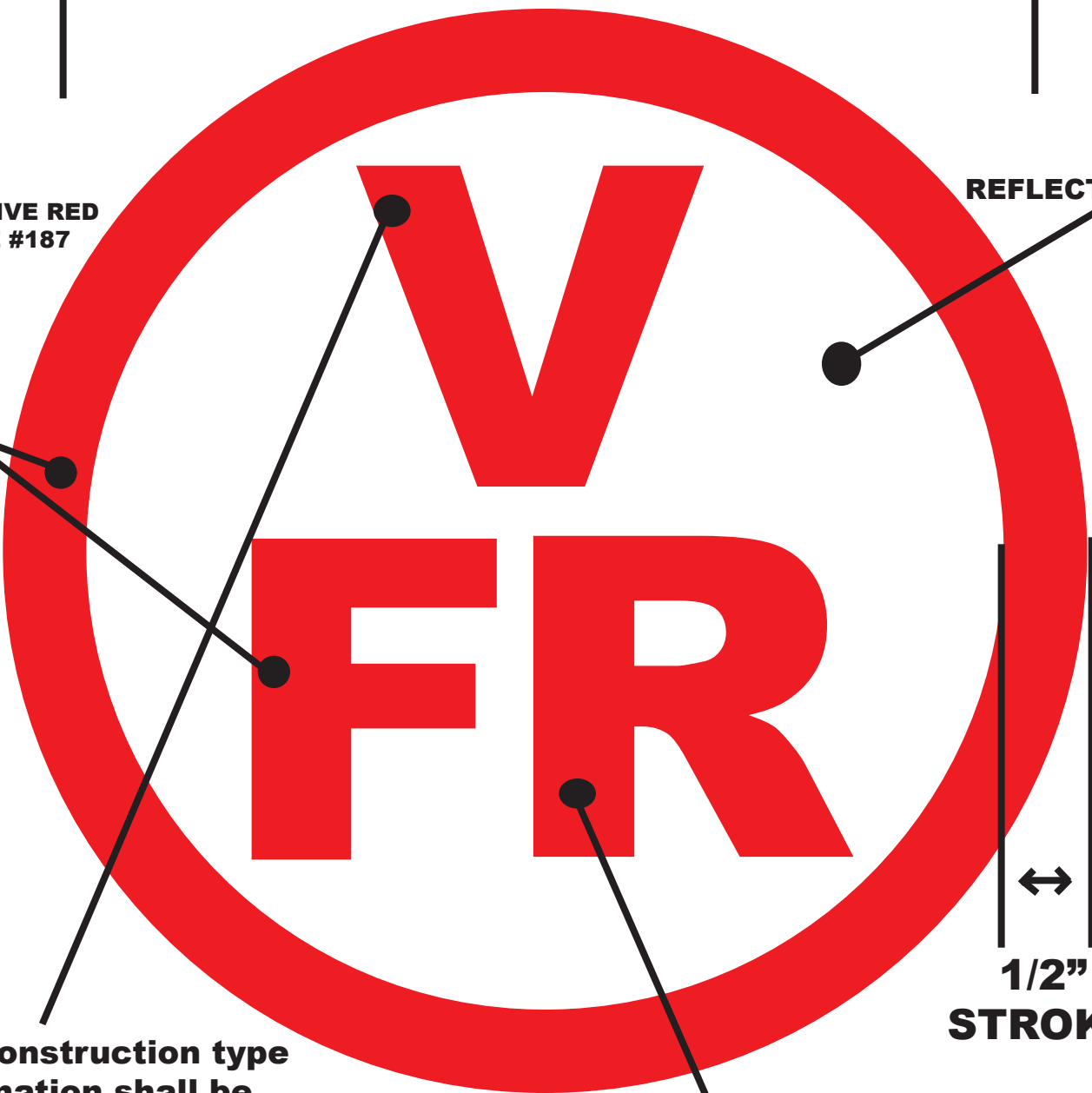
PRINT NAME: _____

CAPACITY (Check One): Owner Owner's Representative

← 6" DIAMETER →

REFLECTIVE RED
PANTONE #187

REFLECTIVE WHITE



↔

1/2"

STROKE

The construction type designation shall be "I", "II", "III", "IV" or "V" to indicate the construction classification of the structure under section 602 of the BCNYS

DESIGNATION FOR STRUCTURAL COMPONENTS THAT ARE OF TRUSS TYPE CONSTRUCTION

"F"	FLOOR FRAMING, INCLUDING GIRDERS AND BEAMS
"R"	ROOF FRAMING
"FR"	FLOOR AND ROOF FRAMING



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:			
<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? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? 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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO	YES	
	<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? 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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<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? 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: _____ _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

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 Agricultural/grasslands Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> 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
	<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, 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: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
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"/>
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"/>
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"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		