

Incorporated Village of Centre Island

303 Centre Island Road
Centre Island, NY 11771

T. 516-922-0606

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PLANNING BOARD APPLICATION FOR APPROVAL OF PRELIMINARY PLAT OR ZONING PERMIT

DATE RECEIVED _____

FILING FEES RECEIVED:

Clerical \$ 300.00 _____

CASE NO. _____

Plan Bd \$3,000.00 _____

Zoning Permit \$3,000.00 _____

1. NAME: _____

2. PROPERTY ADDRESS: _____

SECTION _____ BLOCK _____ LOT _____

3. OWNERS NAME, ADDRESS, TELEPHONE NO. _____

4. SUBDIVIDER NAME, ADDRESS, TELEPHONE NO. _____

STATUS, CHECK ONE () OWNER () CONTRACT VENDEE -
(ATTACH A COPY OF
THE CONTRACT)

5. ENGINEER/SURVEYOR NAME, ADDRESS, TELEPHONE NO. _____

6. SUBDIVIDERS ATTORNEY NAME, ADDRESS, TELEPHONE _____

7. PLAT DETAILS:

- a. Area of Land _____
- b. Number of proposed plots _____
- c. Is a recharge basin required? _____
- d. Zoning District _____ Water District _____
- e. Does land shown on plat include all of the owner's land in the village? _____
- f. Have test holes been dug? _____
- g. Has Village Engineer and NCDPW tentatively approve proposed drainage facilities? _____
- h. Does preliminary show location of every structure on land? _____
- i. Is local water district able to supply water to subdivision? _____
- j. Are any easements necessary outside of proposed subdivision for water supply _____, drainage _____, electric and telephone _____

NOTE: No preliminary hearing will be held unless test hole data is shown on preliminary plat and sub divider certifies that Village Engineer and Nassau County Dept. of Public Works (NCDPW) have provided tentative approval of proposed drainage facilities. **BEFORE TEST HOLES ARE DUG, THE VILLAGE ENGINEER MUST BE NOTIFIED.**

8. LEGAL STATUS OF LAND:

- a. The land is held by owner under deed dated _____ recorded in Nassau County Clerk's Office on _____ in Liber _____ of Deeds, _____.
- b. Is land encumbered by a mortgage or Lien? _____, if yes, provide amount of mortgage or lien and name of mortgagee or lienor in spaces below:
 - Amount _____
 - Lien or mortgage (circle one)
 - Name of Holder _____

- c. Are village, school or town taxes on property in arrears? _____
- d. Is land affected by any other encumbrances such as utilities easements, rights of way, covenants, restrictions or reservations? ___ if so, attach separate sheet describing same. (see information on addendum sheet for rights of way).

9. MISCELLANEOUS INFORMATION:

- a. The names, mailing addresses, section, block and lot of all property owners within 100 feet of the property as follows:

<u>NAME</u>	<u>ADDRESS</u>	<u>SEC/BLK/LOT</u>

- b. Do you wish to request a waiver of any subdivision rules and regulations or apply for any zoning variances in connection with this application? _____ If so, list and give reasons why waivers or variances are requested on attached sheet.

10. SIGNATURE AND CERTIFICATION:

DATE _____

OWNER(S) _____

I (We) have read the foregoing application and understand that any false statements made therein are punishable as a Class A misdemeanor, pursuant to Section 210.45 of the Penal Law.

OWNER(S) _____

SUBDIVIDER(S) _____

ADDENDUM TO APPLICATION FOR APPROVAL OF PRELIMINARY PLAT

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:				
5. Urban Rural (non-agriculture) Industrial Commercial Residential (suburban)				
<input type="checkbox"/> Forest Agriculture Aquatic Other(Specify):				
<input type="checkbox"/> Parkland				

5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<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"/>	
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"/>	
	<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"/>	
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: _____		