Glenn Goldsmith, President
Michael J. Domino, Vice-President
John M. Bredemeyer III
A. Nicholas Krupski
Greg Williams

Town Hall Annex
54375 Route 25
P.O. Box 1179
Southold, New York 11971
Telephone (631) 765-1892
Fax (631) 765-6641

BOARD OF TOWN TRUSTEES
TOWN OF SOUTHOLD

APPLICATION INSTRUCTIONS

ADMINISTRATIVE WETLAND PERMIT

In accordance with Chapter 275-5 (B) Administrative Permit & 275-7 (A) Permit Fees

Application Fee - $100.00 (Fee made payable to: Town of Southold)
As-Built Fee - $200.00

DO NOT SUBMIT PAPERWORK WITH PAGES PRINT BACK TO BACK

The original application packet fully completed and one photocopy of the completed application packet.

An original Affidavit, Applicant/Agent/Representative Transactional Disclosure Form, and Agent Authorization Form must be completed by each owner whose name appears on the most current property deed. If said property is owned by an LLC or Inc., Articles of Organization must be submitted along with the required authorization forms in order to show proof(s) of ownership.

One original and three (3) photocopies of a survey of the property.

One original and three (3) photocopies of the site plan/project plan depicting the proposed project, (must be "to-scale" and include dimensions and material(s) type for all existing/proposed structures).

Current photographs of the subject area showing the proposed area of operations from at least two opposite directions. Each photo should be labeled with the date, time and direction.

The applicant is responsible for staking/marking out the proposed project prior to the date of the Board of Trustees Field Inspection.

Upon receipt of a completed application to this office, the project will be reviewed by the Building Department. If the project requires a Zoning Board of Appeals variance, the application will be held until a determination is made by the ZBA.

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BOARD OF TOWN TRUSTEES
TOWN OF SOUTHOLD

This Section For Office Use Only

_____Coastal Erosion Permit Application
_____Wetland Permit Application
_____Administrative Permit
_____Amendment/Transfer/Extension
_____Received Application: _____
_____Received Fee: $_____
_____Completed Application: _____
_____Incomplete: _____
_____SEQRA Classification: Type I ____ Type II ____ Unlisted ____ Negative Dec. ____ Positive Dec. ____
_____Lead Agency Determination Date: _____
_____Coordination:(date sent):_____
_____LWRP Consistency Assessment Form Sent: _____
_____CAC Referral Sent: _____
_____Date of Inspection: _____
_____Receipt of CAC Report: _____
_____Technical Review: _____
_____Public Hearing Held: _____
_____Resolution: _____

Owner(s) Legal Name of Property (as shown on Deed): _____

Mailing Address: _____

Phone Number: _____

Suffolk County Tax Map Number: 1000 - _____

Property Location: _____

_____
(If necessary, provide LILCO Pole #, distance to cross streets, and location)

AGENT (If applicable): _____

Mailing Address: _____

Phone Number: _____

GENERAL DATA

Land Area (in square feet): _____

Area Zoning: _____

Previous use of property: _____

Intended use of property: _____

Covenants and Restrictions on property? _____Yes _____No
If "Yes", please provide a copy.

Will this project require a Building Permit as per Town Code? _____Yes _____No
If "Yes", be advised this application will be reviewed by the Building Dept. prior to a Board of Trustee review and Elevation Plans will be required.

Does this project require a variance from the Zoning Board of Appeals? _____Yes _____No
If "Yes", please provide copy of decision.

Will this project require any demolition as per Town Code or as determined by the Building Dept.?
_____Yes _____No

Does the structure (s) on property have a valid Certificate of Occupancy? _____Yes _____No

Prior permits/approvals for site improvements:

Agency	Date
_____	_____
_____	_____
_____	_____

_____ No prior permits/approvals for site improvements.

Has any permit/approval ever been revoked or suspended by a governmental agency?_____ No_____ Yes

If yes, provide explanation: _____

_____

Project Description (use attachments if necessary): _____

_____

_____

_____

WETLAND/TRUSTEE LANDS APPLICATION DATA

Purpose of the proposed operations: _____

_____

_____

_____

Area of wetlands on lot: _____ square feet

Percent coverage of lot: _____%

Closest distance between nearest existing structure and upland edge of wetlands: _____ feet

Closest distance between nearest proposed structure and upland edge of wetlands: _____ feet

Does the project involve excavation or filling? _____ No _____ Yes

If yes, how much material will be excavated? _____cubic yards

How much material will be filled? _____cubic yards

Depth of which material will be removed or deposited: _____ feet

Proposed slope throughout the area of operations: _____

Manner in which material will be removed or deposited: _____

_____

_____

_____

Statement of the effect, if any, on the wetlands and tidal waters of the town that may result by reason of such proposed operations (use attachments if appropriate):

_____

_____

_____

_____

617.20
Appendix B
Short Environmental Assessment Form

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

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations?	☐	☐	☐
b. Consistent with the adopted comprehensive plan?	☐	☐	☐

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☐	☐
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	☐	☐
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	☐	☐
b. Are public transportation service(s) available at or near the site of the proposed action?	☐	☐
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	☐	☐
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: _____	☐	☐
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	☐	☐
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	☐	☐
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	☐	☐
b. Is the proposed action located in an archeological sensitive area?	☐	☐
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: _____	☐	☐

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

	NO	YES
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?	☐	☐
16. Is the project site located in the 100 year flood plain?	☐	☐
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? ☐ NO ☐ YES	☐	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☐ NO ☐ YES _____		

	NO	YES
18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	☐	☐
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: _____	☐	☐
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: _____	☐	☐

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: _____ Date: _____

Signature: _____

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	☐	☐
2. Will the proposed action result in a change in the use or intensity of use of land?	☐	☐
3. Will the proposed action impair the character or quality of the existing community?	☐	☐
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	☐	☐
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	☐	☐
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	☐	☐
7. Will the proposed action impact existing: a. public / private water supplies?	☐	☐
b. public / private wastewater treatment utilities?	☐	☐
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	☐	☐
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	☐	☐

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	☐	☐
11. Will the proposed action create a hazard to environmental resources or human health?	☐	☐

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

☐ 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.

Town of Southold - Board of Trustees Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	President Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT

AFFIDAVIT

_____BEING DULY SWORN DEPOSES AND AFFIRMS THAT HE/SHE IS THE APPLICANT FOR THE ABOVE DESCRIBED PERMIT(S) AND THAT ALL STATEMENTS CONTAINED HEREIN ARE TRUE TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF, AND THAT ALL WORK WILL BE DONE IN THE MANNER SET FORTH IN THIS APPLICATION AND AS MAY BE APPROVED BY THE SOUTHOLD TOWN BOARD OF TRUSTEES. THE APPLICANT AGREES TO HOLD THE TOWN OF SOUTHOLD AND THE BOARD OF TRUSTEES HARMLESS AND FREE FROM ANY AND ALL DAMAGES AND CLAIMS ARISING UNDER OR BY VIRTUE OF SAID PERMIT(S), IF GRANTED. IN COMPLETING THIS APPLICATION, I HEREBY AUTHORIZE THE TRUSTEES, THEIR AGENT(S) OR REPRESENTATIVES, INCLUDING THE CONSERVATION ADVISORY COUNCIL, TO ENTER ONTO MY PROPERTY TO INSPECT THE PREMISES IN CONJUNCTION WITH THIS APPLICATION, INCLUDING A FINAL INSPECTION. I FURTHER AUTHORIZE THE BOARD OF TRUSTEES TO ENTER ONTO MY PROPERTY AND AS REQUIRED TO INSURE COMPLIANCE WITH ANY CONDITION OF ANY WETLAND OR COASTAL EROSION PERMIT ISSUED BY THE BOARD OF TRUSTEES DURING THE TERM OF THE PERMIT.

_____ _____

Signature of Property Owner Signature of Property Owner

SWORN TO BEFORE ME THIS _____ DAY OF _____, 20_____

_____

Notary Public

AUTHORIZATION

(Where the applicant is not the owner)

I/We, _____,

owners of the property identified as SCTM# 1000-_____ in the town of

_____, New York, hereby authorizes _____

_____ to act as my agent and handle all

necessary work involved with the application process for permit(s) from the Southold Town

Board of Trustees for this property.

_____ _____

Property Owner's Signature Property Owner's Signature

SWORN TO BEFORE ME THIS _____ DAY OF _____, 20_____

_____

Notary Public

APPLICANT/AGENT/REPRESENTATIVE TRANSACTIONAL DISCLOSURE FORM

The Town of Southold's Code of Ethics prohibits conflicts of interest on the part of town officers and employees. The purpose of this form is to provide information which can alert the town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME: _____

(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person's or company's name.)

NAME OF APPLICATION: (Check all that apply.)

Tax grievance	_____	Building	_____
Variance	_____	Trustee	_____
Change of Zone	_____	Coastal Erosion	_____
Approval of plat	_____	Mooring	_____
Exemption from plat or official map	_____	Planning	_____
Other			

(If "Other", name the activity.) _____

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southold? "Relationship" includes by blood, marriage, or business interest. "Business interest" means a business, including a partnership, in which the town officer or employee has even a partial ownership of (or employment by) a corporation in which the town officer or employee owns more than 5% of the shares.

YES _____ NO _____

If you answered "YES", complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southold _____

Title or position of that person _____

Describe the relationship between yourself (the applicant/agent/representative) and the town officer or employee. Either check the appropriate line A) through D) and/or describe in the space provided.

The town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply):

_____A) the owner of greater than 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation);

_____B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation);

_____C) an officer, director, partner, or employee of the applicant; or

_____D) the actual applicant.

DESCRIPTION OF RELATIONSHIP

_____

_____

_____

Submitted this _____day of _____200 __

Signature_____

Print Name _____

Form TS 1

Town of Southold

LWRP CONSISTENCY ASSESSMENT FORM

A. INSTRUCTIONS

1. All applicants for permits* including Town of Southold agencies, shall complete this CCAF for proposed actions that are subject to the Town of Southold Waterfront Consistency Review Law. This assessment is intended to supplement other information used by a Town of Southold agency in making a determination of consistency. **Except minor exempt actions including Building Permits and other ministerial permits not located within the Coastal Erosion Hazard Area.*

2. Before answering the questions in Section C, the preparer of this form should review the exempt minor action list, policies and explanations of each policy contained in the Town of Southold Local Waterfront Revitalization Program. A proposed action will be evaluated as to its significant beneficial and adverse effects upon the coastal area (which includes all of Southold Town).

3. If any question in Section C on this form is answered "yes" or "no", then the proposed action will affect the achievement of the LWRP policy standards and conditions contained in the consistency review law. **Thus, each answer must be explained in detail, listing both supporting and non-supporting facts.** If an action cannot be certified as consistent with the LWRP policy standards and conditions, it shall not be undertaken.

   A copy of the LWRP is available in the following places: online at the Town of Southold's website (southoldtown.northfork.net), the Board of Trustees Office, the Planning Department, all local libraries and the Town Clerk's office.

B. DESCRIPTION OF SITE AND PROPOSED ACTION

SCTM# _____ - _____ - _____

PROJECT NAME _____

The Application has been submitted to (check appropriate response)**:**

Town Board ☐ **Planning Board** ☐ **Building Dept.** ☐ **Board of Trustees** ☐

1. Category of Town of Southold agency action (check appropriate response):

   (a) Action undertaken directly by Town agency (e.g. capital construction, planning activity, agency regulation, land transaction) ☐

   (b) Financial assistance (e.g. grant, loan, subsidy) ☐

   (c) Permit, approval, license, certification: ☐

Nature and extent of action:

_____

_____

_____

Location of action:_____

Site acreage:_____

Present land use:_____

Present zoning classification:_____

2. If an application for the proposed action has been filed with the Town of Southold agency, the following information shall be provided:

(a) Name of applicant:_____

(b) Mailing address:_____

_____

(c) Telephone number: Area Code ( )_____

(d) Application number, if any: N/A

Will the action be directly undertaken, require funding, or approval by a state or federal agency?

Yes ☐ No ☐ If yes, which state or federal agency?_____

C. Evaluate the project to the following policies by analyzing how the project will further support or not support the policies. Provide all proposed Best Management Practices that will further each policy. Incomplete answers will require that the form be returned for completion.

DEVELOPED COAST POLICY

Policy 1. Foster a pattern of development in the Town of Southold that enhances community character, preserves open space, makes efficient use of infrastructure, makes beneficial use of a coastal location, and minimizes adverse effects of development. See LWRP Section III – Policies; Page 2 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

_____

_____

_____

_____

_____

_____

Attach additional sheets if necessary

Policy 2. Protect and preserve historic and archaeological resources of the Town of Southold. See LWRP Section III – Policies Pages 3 through 6 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

Policy 3. Enhance visual quality and protect scenic resources throughout the Town of Southold. See LWRP Section III – Policies Pages 6 through 7 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

NATURAL COAST POLICIES

Policy 4. Minimize loss of life, structures, and natural resources from flooding and erosion. See LWRP Section III – Policies Pages 8 through 16 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

Policy 5. Protect and improve water quality and supply in the Town of Southold. See LWRP Section III – Policies Pages 16 through 21 for evaluation criteria

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

Policy 6. Protect and restore the quality and function of the Town of Southold ecosystems including Significant Coastal Fish and Wildlife Habitats and wetlands. See LWRP Section III – Policies; Pages 22 through 32 for evaluation criteria.

☐ ☐ ☐

Yes **No** **Not Applicable**

Attach additional sheets if necessary

Policy 7. Protect and improve air quality in the Town of Southold. See LWRP Section III – Policies Pages 32 through 34 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

Policy 8. Minimize environmental degradation in Town of Southold from solid waste and hazardous substances and wastes. See LWRP Section III – Policies; Pages 34 through 38 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

PUBLIC COAST POLICIES

Policy 9. Provide for public access to, and recreational use of, coastal waters, public lands, and public resources of the Town of Southold. See LWRP Section III – Policies; Pages 38 through 46 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Attach additional sheets if necessary

WORKING COAST POLICIES

Policy 10. Protect Southold's water-dependent uses and promote siting of new water-dependent uses in suitable locations. See LWRP Section III – Policies; Pages 47 through 56 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

_____

_____

_____

_____

_____

_____

Attach additional sheets if necessary

Policy 11. Promote sustainable use of living marine resources in Long Island Sound, the Peconic Estuary and Town waters. See LWRP Section III – Policies; Pages 57 through 62 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

_____

_____

_____

_____

_____

_____

Attach additional sheets if necessary

Policy 12. Protect agricultural lands in the Town of Southold. See LWRP Section III – Policies; Pages 62 through 65 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

_____

_____

_____

_____

_____

_____

Attach additional sheets if necessary

Policy 13. Promote appropriate use and development of energy and mineral resources. See LWRP Section III – Policies; Pages 65 through 68 for evaluation criteria.

☐ **Yes** ☐ **No** ☐ **Not Applicable**

_____

_____

_____

_____

_____

_____

PREPARED BY_____ **TITLE**_____ **DATE**_____

Glenn Goldsmith, President
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Fax (631) 765-6641

BOARD OF TOWN TRUSTEES
TOWN OF SOUTHOLD

OTHER STATE AGENCIES YOU MIGHT HAVE TO APPLY TO

N.Y.S. Dept. of Environmental Conservation (DEC)
SUNY at Stony Brook
50 Circle Road
Stony Brook, NY 11790-3409
(631) 444-0355
Wednesday & Friday only during the hours of
8:30a.m. – Noon & 1p.m. – 3p.m.
Email: r1dep@gw.dec.state.ny.us

Suffolk County Dept. of Health Services
Office of Wastewater Management
360 Yaphank Avenue, Suite 2C
Yaphank, NY 11980
(631) 852-5700
Email: WWM@suffolkcountyny.gov

U.S. Army Corps. of Engineers, N.Y. District
Attn: Regulatory Branch
26 Federal Plaza, Room 1937
New York, NY 10278-0090
(917) 790-8511
Website for applications & helpful information:
http://www.nan.usace.army.mil/Missions/Regulatory.aspx

N.Y.S. Department of State
Division of Coastal Resources
Consistency Review Unit
One Commerce Plaza
99 Washington Ave, Suite 1010
Albany, NY 12231-00001
(518) 474-6000
Website: www.nyswaterfronts.com