



Town of Van Buren
Planning Board
7575 Van Buren Rd.
Baldwinsville, NY 13027
Ph. 315-635-3604
Fax 315-635-8247

Email: codes@townofvanburen.com
Website: www.townofvanburen.com

For Town Use:
Date Pd: _____
Rec. #: _____ Application #: _____

Site Plan Application

SUBMISSION REQUIREMENTS:

- 11 sets of : () Completed and signed application form;
 () Narrative summary of the project;
 () Site plan depicting existing conditions and proposed changes; and
 () Other related materials as appropriate.

- Payment of fee (\$200 – payable to “Town of Van Buren” plus Legal/Engineering Fee – See Table)

Application deadline is 2 weeks prior to the regular meeting of the Planning Board (usually the 1st Monday of the month). Applicants will receive a notice confirming that their plans are on the upcoming Planning Board agenda.

- TYPE OF APPLICATION:** Minor addition/alteration to approved land development or site plan
- Change of Use Rezoning Changes in parking or traffic flow Changes to landscaping
- New Other _____
-

APPLICANT INFORMATION:

Name and address of Applicant: _____ Phone: _____

_____ Fax: _____
_____ Email: _____

Will the Applicant be the point of contact for Town correspondence about this plan? ___ Yes ___ No

If no, provide name and contact information for the point of contact:



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Applicant's interest in the property in question, (e.g. owner, lessee, etc.) or relationship to property owner (attorney, engineer, etc):

CERTIFICATION: I hereby certify that the statements made in this Application are true and correct.

Name (printed)

Signature

Date

PROPERTY INFORMATION:

Name and address of property owner (if different from Applicant's):

Address of property involved in the Application (if different from Applicant's):

Tax Parcel Number(s):

Zoning District:

Existing use of property:



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Proposed use of property (elaborate in the narrative): _____

Proposed use permitted by:

right special use other: _____

Existing and proposed total gross floor area (square feet) of buildings, including storage areas, basements and/ or attics: existing _____ proposed _____

Total acreage of lot (if more than one lot, specify acreage for each lot): _____

Existing Impervious Coverage (%): Proposed: Required:

Existing # of Parking Spaces: Proposed: Required:

Easements required with adjacent property owners? Yes No

If yes, agreements in place? Yes No

Landscaping changes proposed? Yes No (If yes, describe in narrative.)

of trees to be removed: _____ # of shrubs: _____ # of trees to be added: _____ # of shrubs added

Water supply: Public Other (specify) _____

Sewage disposal: Public Other (specify) _____



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PROJECT INFORMATION:

Submit a brief narrative summary of the project. The narrative must address:

1. The proposed use of the site and, if appropriate, how it will differ from the existing use;
2. The type and extent of the proposed changes to the site as depicted in the plans; and
3. The purpose for the changes.
4. Use the Town's site plan requirements for site plan map Article XII.

Plans included with the submission (check all that apply):

- Site plan Landscaping Lighting Stormwater Other: _____

If not included on the plans, list the profession, name and address of the professionals who prepared the plans:

Profession		
Name		
Company		
Phone		
Address		
Fax		
Email		

Please note: Additional Town review may include, but is not limited to: Town Board, Zoning Board of Appeals, Department of Environmental Conservation, County Planning and Department of Transportation. Members of the reviewing bodies may visit the site while the application is pending before them.

AGRICULTURAL DATA STATEMENT

(to be completed for Special Use Permit, Site Plan Review, Use Variance and Subdivision Applications)

Applicant: _____ Address _____ Tax Map # _____

A. Number of acres involved with project: _____

B. Is Project within Agricultural District? Yes _____ No _____

Is Project within 500 feet of an Agricultural District? Yes _____ No _____

C. Is any portion of the project site currently being farmed? Yes _____ No _____

If so, how many acres? _____ acres

If A, B, and C are answered "no", skip to bottom of form, sign and date, if answered "yes", continue to D-H.

D. Name and address of person(s) farming the project site and/or any sites within 500 feet:

E. Indicate what the intentions are for use of the remainder of the project site, including description of farm operation:

F. Who will maintain the remainder of the property not being used for this project?

G. Other project information: Include information about the existing land cover of the site, any known impacts on existing storm water drainage (including field tiles), or other significant plant materials: _____

H. Make a copy of the overall (original) parcel from the Town's tax maps on file with the Town Assessor's Office. Identify the subject site by marking with an "X". Include the tax map with this completed agricultural data statement.

Farm Note

Prospective residents should be aware that such farm operations might generate dust, odor, smoke, noise, vibration and other conditions, which routinely result from agricultural activities.

Print Name and Title of Person Completing Form

Signature Date

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?			NO	YES
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.			<input type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency?			NO	YES
If Yes, list agency(s) name and permit or approval:			<input type="checkbox"/>	<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, adjoining and 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, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<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 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?	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 <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> 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 plain?	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? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	

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: _____ _____	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 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?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	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?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

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.

<input type="checkbox"/>	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.
<input type="checkbox"/>	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.
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT