

PB 2020-0229

Application for a Minor Subdivision

Date: JANUARY 27, 2020



Name of Subdivision: Survey & Subdivision Plat
LANDS N/E OF
SEAN M. GALLIVAN
located Eastern Side of Deepkill

Town of Brunswick
Building Department
336 Town Office Road
Troy, New York 12180

	Name	Address	Business Phone	Home or Cell Phone
Applicant	SEAN Gallivan	98 NIVER STREET, COHOES NY	[REDACTED]	[REDACTED]
Owner	SAME			
Buyer				
Developer				
Attorney	DONALD ZEE	1 Winners Circle Suite 140 Albany	518-489-9423	
Engineer	NICHOLAS COSTA	11 HERBERT DRIVE LATHAM NY	518-698-3712	
Surveyor	BRIAN HOUSSIER	34 CENTER STREET SCHAGHTICOKE NY 12154	518-753-7592	

NOTE: ANY OF THE ABOVE MAY BE CONTACTED BY THE REVIEWING OFFICER

Address of Site: Northernly & Easternly side of DEEPKILL Road
Size of Original Parcel: 18.94
Tax Map No.: 92, - 9 - 46
Pre-filing Conference date: _____

- Copies attached of any covenants or deed restrictions.
- Plat plan, scaled 200' = 1" (Minimum), conforming to all requirements of Article V, §2.
- Environmental Assessment Form filed.
- \$1,100 plus \$50 per lot Filing Fee* paid. \$1250.00 pd
*Filing Fee includes \$600 plus \$50 per lot Application Fee and \$500 Planning Board Engineer Review Fee.
\$600 + \$50 x No. of Lots + \$500 = Filing Fee

Signature of Owner, Applicant or Agent

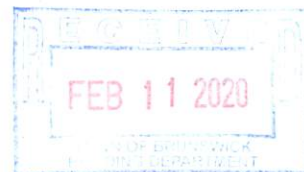
SEAN GALLIVAN

Printed or Typed Copy of Above

NOTE: IF OWNER IS NOT THE APPLICANT, THE APPLICANT SWEARS THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER AND THAT THE APPLICANT IS AUTHORIZED TO MAKE SUCH APPLICATION.

Approved: _____

- \$500 per Residential Unit/Lot Parks and Recreation Fee paid.



TOWN VILLAGE CITY OF Schenectady
(circle one)



Application # _____

Agricultural Data Statement

Date _____

Instructions: This form must be completed for any application for a special use permit, site plan approval, use variance or a subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant	Owner if Different from Applicant
Name: <u>SEAN GALLIVAN</u>	Name: _____
Address: <u>98 NIVER STREET</u> <u>COHOES, NY 12047</u>	Address: _____

- Type of Application: Special Use Permit; Site Plan Approval; Use Variance;
(circle one or more) Subdivision Approval
- Description of proposed project: Propose 3 Building lots
- Location of project: Address: DEADKILL ROAD
Tax Map Number (TMP) 72.-9-46
- Is this parcel within an Agricultural District? NO YES (Check with your local assessor if you do not know)
- If YES, Agricultural District Number 2
- Is this parcel actively farmed? NO YES
- List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary.

Name: <u>SEAN GALLIVAN</u>	Name: _____
Address: <u>98 NIVER STREET</u> <u>COHOES, NY 12047</u>	Address: _____
Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES	Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES
Name: _____	Name: _____
Address: _____	Address: _____
Is this parcel actively farmed? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES


Signature of Applicant

SANE
Signature of Owner (if other than applicant)

Reviewed by: _____
Signature of Municipal Official

_____ Date

NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Department.

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: Proposed Subdivision of Parcels at Deepkill Road			
Project Location (describe, and attach a location map): Deepkill Road, Town of Brunswick			
Brief Description of Proposed Action: Applicant is proposing the subdivision and lot line adjustment of parcels located at Deepkill Road. Three new lots will be created and two existing lots will have lot lines adjusted.			
Name of Applicant or Sponsor: Sean M. Gallivan		Telephone: [REDACTED] E-Mail: smgallivan@gallivancompanies.com	
Address: 98 Niver Street			
City/PO: Cohoes		State: NY	Zip Code: 12047
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 checked="" 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: Town of Brunswick Planning Board - Subdivision Approval Rensselaer County Health Department - Sewage disposal approval			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ 18.94 acres b. Total acreage to be physically disturbed? _____ 3 acres c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 127 acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ On-site domestic wells will be installed to provide potable water to each new lot _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ On-site subsurface sanitary sewer systems will be installed on each lot. _____	<input checked="" 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?	<input checked="" 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?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input checked="" type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, briefly describe: _____		
Storm water runoff will be mitigated by directing the runoff into the existing infrastructure consisting of roadside swales and culverts that eventually discharge into the nearby kill.		
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 checked="" 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 checked="" 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 checked="" 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: <u>Sean M. Gallivan</u> Date: <u>January 27, 2020</u>		
Signature:  Title: <u>Owner / Applicant</u>		



Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.

Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENT P, NRCan, Esri Japan, METI, Esri China (Hong Kong), Esri Korea, Esri (Thailand), NGCC, (c) OpenStreetMap contributors, and the GIS User Community

Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	No