

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Sponsor Information.

Name of Action or Project: 600 Albany Post Road		
Project Location (describe, and attach a general location map): 600 Albany Post Road, approximately 1 mile North of Route 117 in the Village of Briarcliff Manor		
Brief Description of Proposed Action (include purpose or need): A 2-story 60,000 sf expansion to an existing 38,000 sf 2-story data center building. Building use to be converted into a self-storage facility. Also, the project will include modifications to the site's access onto Albany Post Road (US Route 9) by eliminating the center most driveway and modifying the north and south driveways to include 13 foot wide ingress & egress lanes. In addition, we will be providing access completely around the proposed building. The runoff from the net increase of impervious area, along with the existing impervious area, will be collected and treated on-site. It is not anticipated that the new use will generate additional traffic based upon the previous use as a data center with office space.		
Name of Applicant/Sponsor: T5@New York, LLC - Joseph Fuccillo		Telephone: 972-993-2823 E-Mail: jrfuccillo@ironpointpartners.com
Address: 1133 Connecticut Ave, NW, Suite 800		
City/PO: Washington		State: DC Zip Code: 20036
Project Contact (if not same as sponsor; give name and title/role): Same as sponsor		Telephone: ---- E-Mail: ----
Address: ----		
City/PO: ----		State: ---- Zip Code: ----
Property Owner (if not same as sponsor): ----		Telephone: ---- E-Mail: ----
Address: ----		
City/PO: ----		State: ---- Zip Code: ----

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)		
Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees	Village of Briarcliff Manor Board of Trustees	TBD
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	Village of Briarcliff Manor Planning Board, Village of Briarcliff Manor Building Department	TBD
c. City Council, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Westchester County Department of Health	TBD
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NYSDOT (Highway Work Permit), NYSDEC (SPDES General Permit), NYSSHPO, NYSSPEDS	TBD
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
iii. Is the project site within a Coastal Erosion Hazard Area?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

C. Planning and Zoning

C.1. Planning and zoning actions.		
Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No only approval(s) which must be granted to enable the proposed action to proceed?		
<ul style="list-style-type: none"> • If Yes, complete sections C, F and G. • If No, proceed to question C.2 and complete all remaining sections and questions in Part 1 		
C.2. Adopted land use plans.		
a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No where the proposed action would be located?		
If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No would be located?		
b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)		
If Yes, identify the plan(s): _____ _____ _____		
c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or an adopted municipal farmland protection plan?		
If Yes, identify the plan(s): _____ _____ _____		

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No
If Yes, what is the zoning classification(s) including any applicable overlay district?

"B" Planned Office Building, Laboratory B and Business.

b. Is the use permitted or allowed by a special or conditional use permit? Yes No

c. Is a zoning change requested as part of the proposed action? Yes No
If Yes,

i. What is the proposed new zoning for the site? Zoning text amendment to allow self-storage as a special permit within the "B" Zoning District.

C.4. Existing community services.

a. In what school district is the project site located? Ossining Union Free School District

b. What police or other public protection forces serve the project site?

Village of Briarcliff Manor Police Department

c. Which fire protection and emergency medical services serve the project site?

Briarcliff Fire Department

d. What parks serve the project site?

Rockwood Hall of Rockefeller State Park Preserve and Old Croton Aqueduct Trail

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Commercial

b. a. Total acreage of the site of the proposed action? +/-9.38 acres

b. Total acreage to be physically disturbed? +/-6.19 acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? +/-9.38 acres

c. Is the proposed action an expansion of an existing project or use? Yes No

i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % 57 Units: 60,000 sf.

d. Is the proposed action a subdivision, or does it include a subdivision? Yes No

If Yes,

i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)

ii. Is a cluster/conservation layout proposed? Yes No

iii. Number of lots proposed?

iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will proposed action be constructed in multiple phases? Yes No

i. If No, anticipated period of construction: _____ months

ii. If Yes:

• Total number of phases anticipated _____

• Anticipated commencement date of phase 1 (including demolition) _____ month _____ year

• Anticipated completion date of final phase _____ month _____ year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

<p>f. Does the project include new residential uses? If Yes, show numbers of units proposed.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;"><u>One Family</u></td> <td style="width: 25%; text-align: center;"><u>Two Family</u></td> <td style="width: 25%; text-align: center;"><u>Three Family</u></td> <td style="width: 25%; text-align: center;"><u>Multiple Family (four or more)</u></td> </tr> </table>				<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>					
<p>Initial Phase _____</p> <p>At completion of all phases _____</p>								
<p>g. Does the proposed action include new non-residential construction (including expansions)? If Yes,</p> <p>i. Total number of structures _____ 1</p> <p>ii. Dimensions (in feet) of largest proposed structure: _____ 2-stories height; _____ 116.25 width; and _____ 348.25 length</p> <p>iii. Approximate extent of building space to be heated or cooled: _____ 98,000 square feet</p>				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<p>h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? If Yes,</p> <p>i. Purpose of the impoundment: _____</p> <p>ii. If a water impoundment, the principal source of the water: _____ <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> Other specify: _____</p>				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>iii. If other than water, identify the type of impounded/contained liquids and their source.</p>								
<p>iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres</p> <p>v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length</p> <p>vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____</p>								
<p>D.2. Project Operations</p>								
<p>a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)</p>								
<p>If Yes:</p> <p>i. What is the purpose of the excavation or dredging? _____</p> <p>ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?</p> <ul style="list-style-type: none"> • Volume (specify tons or cubic yards): _____ • Over what duration of time? _____ <p>iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.</p>								
<p>iv. Will there be onsite dewatering or processing of excavated materials? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe. _____</p>								
<p>v. What is the total area to be dredged or excavated? _____ acres</p> <p>vi. What is the maximum area to be worked at any one time? _____ acres</p> <p>vii. What would be the maximum depth of excavation or dredging? _____ feet</p> <p>viii. Will the excavation require blasting? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>ix. Summarize site reclamation goals and plan: _____ _____</p>								
<p>b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>								
<p>If Yes:</p> <p>i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____</p>								

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will proposed action cause or result in disturbance to bottom sediments? Yes No

If Yes, describe:

iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No

If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No

If Yes:

i. Total anticipated water usage/demand per day: _____ 150 gallons/day *(See below)

ii. Will the proposed action obtain water from an existing public water supply? Yes No

If Yes:

- Name of district or service area: Village of Briarcliff Manor
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No

If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No

If Yes:

i. Total anticipated liquid waste generation per day: _____ 150 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

Sanitary wastewater.

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No

If Yes:

- Name of wastewater treatment plant to be used: Ossining Sewer District
- Name of district: Ossining
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

* 3 Employees/8 hr. shift x 2 = Total of: 6 employees at 15 GPD/EMP

6X15 = 90GPD

Assume: 5 Customers at 5GPD =

5X5 = 25 GBP

90+25 = 115 GPD ~150 GPD

- Do existing sewer lines serve the project site? Yes No
- Will line extension within an existing district be necessary to serve the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No

If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge, or describe subsurface disposal plans): _____

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No

If Yes:

i. How much impervious surface will the project create in relation to total size of project parcel?

_____ Square feet or _____ 2.96 acres (impervious surface)

_____ Square feet or _____ 9.38 acres (parcel size)

ii. Describe types of new point sources. N/A

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

New and existing on-site stormwater management facilities.

- If to surface waters, identify receiving water bodies or wetlands: _____

- Will stormwater runoff flow to adjacent properties? (Existing Drainage Patterns to remain)

iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No

If Yes, identify:

i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)

ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)

iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No

If Yes:

i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No

ii. In addition to emissions as calculated in the application, the project will generate:

- _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
- _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
- _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
- _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
- _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofloucarbons (HFCs)
- _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Estimate methane generation in tons/year (metric): _____	
ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____	
i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____ _____	
j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes:	
i. When is the peak traffic expected (Check all that apply): <input type="checkbox"/> Morning <input type="checkbox"/> Evening <input type="checkbox"/> Weekend	
<input type="checkbox"/> Randomly between hours of _____ to _____.	
ii. For commercial activities only, projected number of semi-trailer truck trips/day: _____	
iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____	
iv. Does the proposed action include any shared use parking? <input type="checkbox"/> Yes <input type="checkbox"/> No	
v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____ _____	
vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? <input type="checkbox"/> Yes <input type="checkbox"/> No	
vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? <input type="checkbox"/> Yes <input type="checkbox"/> No	
viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? <input type="checkbox"/> Yes <input type="checkbox"/> No	
k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes:	
i. Estimate annual electricity demand during operation of the proposed action: _____ TBD	
ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): Local utility - Consolidated Edison	
iii. Will the proposed action require a new, or an upgrade to, an existing substation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
l. Hours of operation. Answer all items which apply.	
i. During Construction:	
<ul style="list-style-type: none"> • Monday - Friday: _____ 8:00am - 7pm • Saturday: _____ 8:30am - 5:30pm • Sunday: _____ None • Holidays: _____ None 	
ii. During Operations:	
<ul style="list-style-type: none"> • Monday - Friday: _____ Yes • Saturday: _____ Yes • Sunday: _____ Yes • Holidays: _____ Yes 	

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes:	
i. Provide details including sources, time of day and duration:	_____
ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Describe: _____	
n.. Will the proposed action have outdoor lighting?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes:	
i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:	_____
Typical outdoor site lighting in accordance with Village Code (Off-Street Parking and Building)	
ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Describe: _____	
o. Does the proposed action have the potential to produce odors for more than one hour per day?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____	
_____	_____
p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Product(s) to be stored _____	_____
ii. Volume(s) _____ per unit time _____ (e.g., month, year)	_____
iii. Generally describe proposed storage facilities: _____	_____
q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
i. Describe proposed treatment(s):	_____
Typical landscape/lawn maintenance.	
ii. Will the proposed action use Integrated Pest Management Practices?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
i. Describe any solid waste(s) to be generated during construction or operation of the facility:	_____
• Construction: _____ <u>TBD</u> tons per _____ <u>TBD</u> (unit of time)	_____
• Operation: _____ <u>TBD</u> tons per _____ <u>TBD</u> (unit of time)	_____
ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:	_____
• Construction: Project will provide recycling containers in addition to normal trash bins.	_____
• Operation: _____	_____
iii. Proposed disposal methods/facilities for solid waste generated on-site:	_____
• Construction: <u>TBD</u>	_____
• Operation: <u>TBD</u>	_____

s. Does the proposed action include construction or modification of a solid waste management facility? If Yes:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____	
ii. Anticipated rate of disposal/processing:	<ul style="list-style-type: none"> • _____ Tons/month, if transfer or other non-combustion/thermal treatment, or • _____ Tons/hour, if combustion or thermal treatment
iii. If landfill, anticipated site life: _____ years	
t. Will proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____	
ii. Generally describe processes or activities involving hazardous wastes or constituents: _____	
iii. Specify amount to be handled or generated _____ tons/month	
iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____	
v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes: provide name and location of facility: _____	
If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____	

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Aquatic Other (specify): Sleepy Hollow Country Club

ii. If mix of uses, generally describe:

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	+/- 2.02 AC	+/- 2.96 AC	.94 AC
• Forested	+/- 3.68 AC	+/- 2.43 AC	-1.25 AC
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	+/- 3.68 AC	+/- 3.99 AC	.31
• Agricultural (includes active orchards, field, greenhouse etc.)	0	0	0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	0	0	0
• Non-vegetated (bare rock, earth or fill)	0	0	0
• Other Describe: _____			

c. Is the project site presently used by members of the community for public recreation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i. If Yes: explain:	
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes,	
i. Identify Facilities:	
<hr/> <hr/>	
e. Does the project site contain an existing dam?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Dimensions of the dam and impoundment:	
<ul style="list-style-type: none"> • Dam height: _____ • Dam length: _____ • Surface area: _____ • Volume impounded: _____ 	feet feet acres gallons OR acre-feet
ii. Dam's existing hazard classification:	
iii. Provide date and summarize results of last inspection:	
<hr/> <hr/>	
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Has the facility been formally closed?	
<ul style="list-style-type: none"> • If yes, cite sources/documentation: _____ 	
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:	
<hr/> <hr/>	
iii. Describe any development constraints due to the prior solid waste activities: _____	
<hr/> <hr/>	
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:	
<hr/> <hr/>	
h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:	
<input type="checkbox"/> Yes – Spills Incidents database <input type="checkbox"/> Yes – Environmental Site Remediation database <input type="checkbox"/> Neither database	Provide DEC ID number(s): _____ Provide DEC ID number(s): _____
ii. If site has been subject of RCRA corrective activities, describe control measures: _____	
<hr/> <hr/>	
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide DEC ID number(s): 546031	
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):	
<p>See the attached NYSDEC Environmental Facilities Navigator drawing that indicates areas that would have prompted the "yes" box to be checked. There seems to be no remediation sites within the 2,000 foot threshold.</p> <hr/>	

v. Is the project site subject to an institutional control limiting property uses?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
<ul style="list-style-type: none"> • If yes, DEC site ID number: _____ • Describe the type of institutional control (e.g., deed restriction or easement): _____ • Describe any use limitations: _____ • Describe any engineering controls: _____ • Will the project affect the institutional or engineering controls in place? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No • Explain: _____ _____ _____ 										
E.2. Natural Resources On or Near Project Site										
a. What is the average depth to bedrock on the project site? _____ feet										
b. Are there bedrock outcroppings on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %										
c. Predominant soil type(s) present on project site: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">PnC</td> <td style="width: 10%; text-align: right;">85 %</td> </tr> <tr> <td>WdB</td> <td style="text-align: right;">15 %</td> </tr> <tr> <td></td> <td style="text-align: right;">% _____</td> </tr> </table>			PnC	85 %	WdB	15 %		% _____		
PnC	85 %									
WdB	15 %									
	% _____									
d. What is the average depth to the water table on the project site? Average: _____ feet										
e. Drainage status of project site soils: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;"><input checked="" type="checkbox"/> Well Drained:</td> <td style="width: 10%; text-align: right;">85 % of site</td> </tr> <tr> <td><input checked="" type="checkbox"/> Moderately Well Drained:</td> <td style="text-align: right;">15 % of site</td> </tr> <tr> <td><input type="checkbox"/> Poorly Drained</td> <td style="text-align: right;">% of site</td> </tr> </table>			<input checked="" type="checkbox"/> Well Drained:	85 % of site	<input checked="" type="checkbox"/> Moderately Well Drained:	15 % of site	<input type="checkbox"/> Poorly Drained	% of site		
<input checked="" type="checkbox"/> Well Drained:	85 % of site									
<input checked="" type="checkbox"/> Moderately Well Drained:	15 % of site									
<input type="checkbox"/> Poorly Drained	% of site									
f. Approximate proportion of proposed action site with slopes: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;"><input checked="" type="checkbox"/> 0-10%:</td> <td style="width: 10%; text-align: right;">36 % of site</td> </tr> <tr> <td><input checked="" type="checkbox"/> 10-15%:</td> <td style="text-align: right;">33 % of site</td> </tr> <tr> <td><input checked="" type="checkbox"/> 15% or greater:</td> <td style="text-align: right;">31 % of site</td> </tr> </table>			<input checked="" type="checkbox"/> 0-10%:	36 % of site	<input checked="" type="checkbox"/> 10-15%:	33 % of site	<input checked="" type="checkbox"/> 15% or greater:	31 % of site		
<input checked="" type="checkbox"/> 0-10%:	36 % of site									
<input checked="" type="checkbox"/> 10-15%:	33 % of site									
<input checked="" type="checkbox"/> 15% or greater:	31 % of site									
g. Are there any unique geologic features on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, describe: _____										
h. Surface water features.										
i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
ii. Do any wetlands or other waterbodies adjoin the project site? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes to either i or ii, continue. If No, skip to E.2.i.										
iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
iv. For each identified regulated wetland and waterbody on the project site, provide the following information: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Streams: Name 864-54</td> <td style="width: 10%; text-align: right;">Classification SC / C</td> </tr> <tr> <td>Lakes or Ponds: Name _____</td> <td style="text-align: right;">Classification _____</td> </tr> <tr> <td>Wetlands: Name Federal Waters</td> <td style="text-align: right;">Approximate Size _____</td> </tr> <tr> <td>Wetland No. (if regulated by DEC) _____</td> <td></td> </tr> </table>			Streams: Name 864-54	Classification SC / C	Lakes or Ponds: Name _____	Classification _____	Wetlands: Name Federal Waters	Approximate Size _____	Wetland No. (if regulated by DEC) _____	
Streams: Name 864-54	Classification SC / C									
Lakes or Ponds: Name _____	Classification _____									
Wetlands: Name Federal Waters	Approximate Size _____									
Wetland No. (if regulated by DEC) _____										
v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, name of impaired water body/bodies and basis for listing as impaired: _____										
i. Is the project site in a designated Floodway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
j. Is the project site in the 100 year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
k. Is the project site in the 500 year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes: i. Name of aquifer: _____										

m. Identify the predominant wildlife species that occupy or use the project site: Typical Suburban Species	_____
n. Does the project site contain a designated significant natural community? If Yes:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i. Describe the habitat/community (composition, function, and basis for designation): _____	_____
ii. Source(s) of description or evaluation: _____	_____
iii. Extent of community/habitat: • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres	_____
o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? Shortnose Sturgeon, Atlantic Sturgeon	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? If yes, give a brief description of how the proposed action may affect that use: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
E.3. Designated Public Resources On or Near Project Site	
a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? If Yes, provide county plus district name/number: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. Are agricultural lands consisting of highly productive soils present? i. If Yes: acreage(s) on project site? ii. Source(s) of soil rating(s): _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? If Yes: i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? If Yes: i. CEA name: Hudson River, County & State Park Lands ii. Basis for designation: Exceptional or unique character iii. Designating agency and date: Agency:Westchester County, Date:1-31-90	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input checked="" type="checkbox"/> Historic Building or District	
ii. Name: Old Croton Aqueduct, Scarborough Historic District and Rockwood Hall in Rockefeller State Park Preserve	
iii. Brief description of attributes on which listing is based:	State historic trail, national historic district, state park.
f. 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"/> Yes <input type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Describe possible resource(s):	
ii. Basis for identification:	
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
i. Identify resource: Old Croton Aqueduct and Rockwood Hall in Rockefeller State Park Preserve	
ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): State park	
iii. Distance between project and resource:	1.1 miles.
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Identify the name of the river and its designation:	
ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

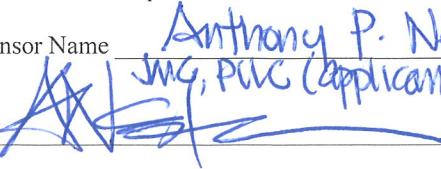
F. Additional Information

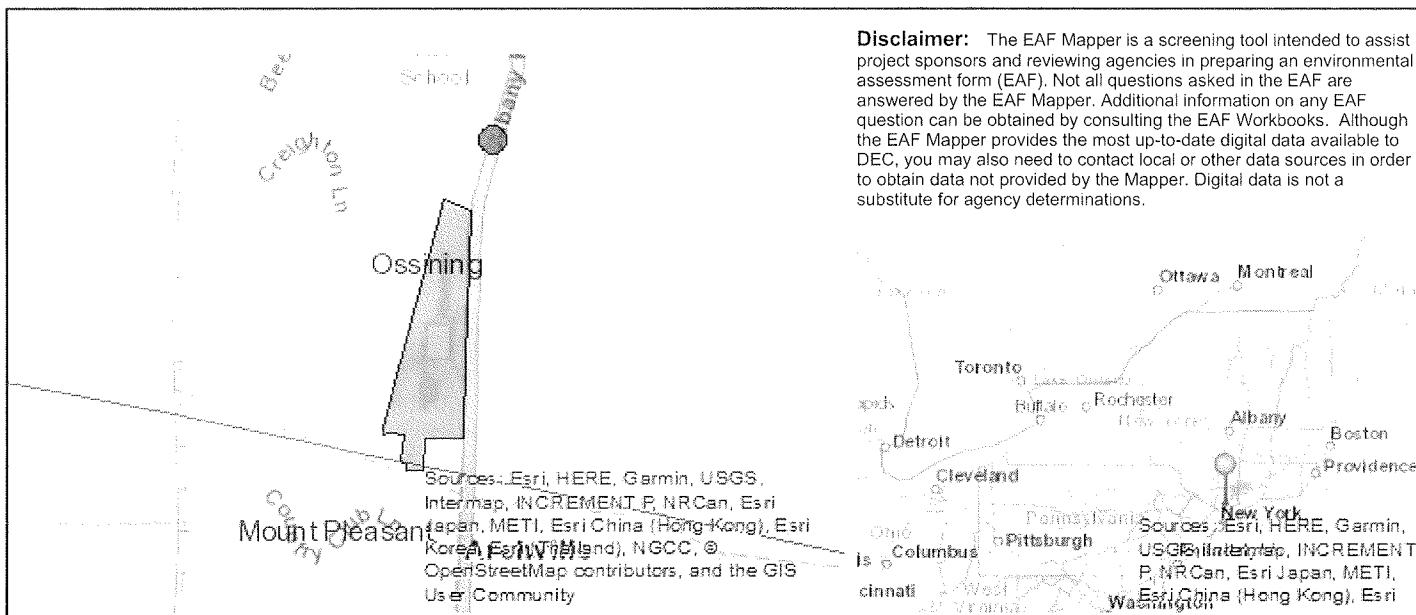
Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Anthony P. Nester, RLA Date 09/26/2018
 Signature  Title SV. Associate



B.i.i [Coastal or Waterfront Area]	Yes
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	Yes
E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID]	546031
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	Yes
E.2.h.ii [Surface Water Features]	Yes
E.2.h.iii [Surface Water Features]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
E.2.h.iv [Surface Water Features - Stream Name]	864-54
E.2.h.iv [Surface Water Features - Stream Classification]	SC / C
E.2.h.iv [Surface Water Features - Wetlands Name]	Federal Waters
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No

E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.l. [Aquifers]	Yes
E.2.l. [Aquifer Names]	Principal Aquifer
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	Yes
E.2.o. [Endangered or Threatened Species - Name]	Shortnose Sturgeon, Atlantic Sturgeon
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	Yes
E.3.d [Critical Environmental Area - Name]	Hudson River, County & State Park Lands
E.3.d.ii [Critical Environmental Area - Reason]	Exceptional or unique character
E.3.d.iii [Critical Environmental Area – Date and Agency]	Agency:Westchester County, Date:1-31-90
E.3.e. [National Register of Historic Places]	Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook.
E.3.e.ii [National Register of Historic Places - Name]	Old Croton Aqueduct, Scarborough Historic District
E.3.f. [Archeological Sites]	Yes
E.3.i. [Designated River Corridor]	No