



*Inc. Village of Head of the Harbor  
500 North Country Rd.  
St. James, NY 11780  
631-584-5550*

**APPLICATION FOR SITE PLAN OR SUBDIVISION REVIEW**

**Preliminary review requests must comply with the filing of 5 copies of items a-g and the submission of Trust & Agency deposit.**

Applicant should **initially** submit (5) five copies of application and all accompanying materials to the Village Clerk. Site Plan Applications and Subdivision/Single Family Residential Construction must include the following:

- a) 5 copies of the application completed & signed;
- b) 5 copies of Coastal Assessment Form;
- c) 5 copies of the Short Environmental Assessment Form (If two or more questions are answered yes, the Long Environmental Assessment Form must be completed);
- d) 5 copies of the Visual Assessment Form;
- e) 5 copies folded, signed & sealed, originals of the Site Plan;
- f) 5 copies folded, copies of the Landscape Plan;
- g) 5 copies signed & sealed, originals of a Grading Plan w/erosion control measures;

**Items a-g be collated & folded into individual packets no larger than 8 1/2 x 14.**

- h) One original, signed & sealed, survey with the tie distance to the nearest street & location of the monuments;
- i) Two copies of the LWRP Letter of Consistency; (when received)
- j) Five 8 X 10 photographs of the site: 4 taken from center of proposed building/improvement toward the property lines, 1 view from the road.
- k) Four sets of building elevations, with materials and colors;
- l) One original Suffolk County Dept. of Health approval & a stamped plan;
- m) Site plan filing fee: see fees schedule AND Trust & Agency fee (for Professional Services): see fees schedule. (If account drops below half of amount received, additional monies will be requested.) Remaining balance will be refunded upon written request. Or,
- n) Subdivision filing fee: see fees schedule AND Trust & Agency fee (for Professional Services): see fees schedule. (If account drops below half of amount received, additional monies will be requested.) Remaining balance will be refunded upon written request.
- o) 1 Copy owner's endorsement

**INCOMPLETE FILINGS MAY RESULT IN UNNECESSARY DELAYS & EXPENSES**

A. IF INCOMPLETE - the applicant would be notified in writing of those items causing the application to be deficient.

B. IF COMPLETE - the applicant will be notified to submit a minimum of 11 additional copies of items a-g to the Village. **Said items are to be collated & folded into individual packets no larger than 8 1/2 x 14.**

**Site Plan must include:**

- a) Date, north arrow, key map, SCTM#, scale not to be smaller than 1"=30';
- b) Location, dimensions & setbacks of all proposed (dotted line)/existing (solid line)

**Site Plan must include:**

- a) Date, north arrow, key map, SCTM#, scale;
- b) Location, dimensions & setbacks of all proposed (dotted line)/existing (solid line) structures, driveways, curb cuts, drainage provisions;
- c) Drainage calculations in conformance with L.W.R.P. requirements.
- d) Dated test hole data, note who obtained data;
- e) Building envelope to zoning requirements;
- f) Name/Address of Engineer, Architect or Land Surveyor;
- g) Name/Address of Property Owner.
- h) Name of Subdivision & lot number, if applicable;
- i) Location of utility lines, sanitary system, water supply locations;
- j) Illustrate all scenic and conservation easements;
- k) Dimension setbacks to wetlands, mean high tide, top of bluff, within 500' from the line of disturbance.
- l) Provide site data table with lot size, building footprint (proposed/existing), total floor area (GFA), percent of lot coverage (FAR), percentage of clearing, percentage of fertilizer-dependent vegetation, floor area, zoning;
- m) List any covenants or restrictions that control the property;
- n) Existing & proposed contours at 2' intervals;
- o) Subdivision maps in conformance with Suffolk County Planning Commission requirements.

**Landscape Plan must include:**

- a) Landscape key with species, size & quantity of proposed plants;
- b) Construction limits, including all areas of grading;
- c) Location, size & species of all trees, 6" and greater at breast height diameter, in area to be disturbed. Identify all trees to be removed with an "x";
- d) Location of any significant vegetation; ornamental or native;
- e) Location of any all buildings, accessory structures, driveway & sanitary system;
- f) Location of buffers & easements;
- g) Setbacks to wetlands, mean high tide & top of bluff

**Grading Plan w/ Erosion control measurers must include:**

- a) Top & bottom elevations of all retaining structures;
- b) Existing & proposed contours at 2' intervals w/building envelope illustrated;
- c) First floor elevations, corner elevations;
- d) Utility lines, septic system, water supply and all required ground disturbance;
- e) Delineate construction limits;
- f) Identify all slopes in excess of 25% within the property boundaries;
- g) Identify all bluffs, including top, toe and bluff setback of 100', as defined by the LWRP guidelines;
- h) Locates methods to control sediment runoff, i.e. Hay bales (silt fence, staging area);
- i) Implement schedule.
- j) Locate a project limiting fence.

Site Plan Application  
Subdivision/Single Family Residential Construction & Additions  
.....

Application is hereby made to the Incorporated Village of Head of the Harbor for the project described herein. By this application, the applicant does hereby authorize employees or agents of the Incorporated Village of Head of the Harbor to inspect the project site as necessary.

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APPLICATION DATA:

NAME OF SITE PLAN \_\_\_\_\_

SCOPE OF WORK: \_\_\_\_\_

SUFFOLK COUNTY TAX NUMBER: 0801 \_\_\_\_\_ LOT AREA \_\_\_\_\_ Zoning \_\_\_\_\_  
Located at # \_\_\_\_\_, on the N/E/S/W Side of: \_\_\_\_\_

Distance: \_\_\_\_\_, from the N/E/S/W of: \_\_\_\_\_

Has the property affected by this application been the subject of a previous land use approval within a period of three years? Yes \_\_\_ No \_\_\_  
If yes, what approval: \_\_\_\_\_

OWNERS CONSENT:

Be advised that I am the owner of record of the property referenced herein and hereby consent to this application:

OWNER: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If applicant is a corporation, provide name & title of the responsible officer. RESPONSIBLE OFFICER: \_\_\_\_\_

PLAN PREPARER: FIRM NAME: \_\_\_\_\_

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ATTORNEY/AGENT: FIRM NAME: \_\_\_\_\_  
NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Site Plan Application

Yes \_\_\_\_\_ No \_\_\_\_\_ Are there any existing covenants or restrictions affecting the premises for which approval is sought? If yes, attach a copy certified by the Suffolk County Clerk.

Yes \_\_\_\_\_ No \_\_\_\_\_ Have any Special Permits or Variances been applied for or obtained for this property? If yes, state date and case number \_\_\_\_\_ and attach a copy of the Board of Appeals decision letter.

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property improved with structures? If so, attach a copy of all Certificate of Occupancy(s). Any structures requiring c.o.'s must be made part of the application.

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property within 500' of a municipal boundary?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property within 500' of a Town or State roadway?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property within 500' of any publicly-held land?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property within 500' of any wetland or waterway?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property within a designated Historic Area?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property in an Environmentally Significant Area?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is electric & public water available to the property?

Yes \_\_\_\_\_ No \_\_\_\_\_ Does the applicant or owner have any interest in any contiguous property? If so, list S.C. Tax Number: \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Have you applied for Health Dept. sanitary approval? If so, attach a copy of the application.

SUBDIVISION/LAND DIVISION:

Number of Lots: \_\_\_\_\_

Deed or deeds recorded in the Suffolk County Clerk's Office:

Date: \_\_\_\_\_ Liber: \_\_\_\_\_ Page: \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the property subject to encumbrances or liens other than mortgages?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the entire preliminary layout be filed?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the map will be filed in sections?

Yes \_\_\_\_\_ No \_\_\_\_\_ All open space shown will be dedicated.

If the project requires Variances or Special Permits, please list:

Planning Board: \_\_\_\_\_

Zoning Board of Appeals: \_\_\_\_\_

Site Plan Application

VERIFICATION:

I ACKNOWLEDGE I HAVE MADE APPLICATION TO THE INCORPORATED VILLAGE OF HEAD OF THE HARBOR FOR THE PROJECT DESCRIBED HEREIN. I FURTHER CERTIFY I AM THE OWNER OF THE SUBJECT PROPERTY.

IN WITNESS WHEREOF, I have hereto set my hand this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
Owner's Signature

\*\*\*\*\*

State of New York)

)SS.:

County of Suffolk

(INDIVIDUAL)

On the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ before me personally came to me known to be the individual described in and who executed the foregoing instrument, and (s)he thereupon duly acknowledged to me that (s)he executed same.

\_\_\_\_\_  
(Notary Public)

\*\*\*\*\*

State of New York)

)SS.:

County of Suffolk

(CORPORATE)

On the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ before me personally came to me known, who being duly sworn, did dispose and say that (s)he resides in \_\_\_\_\_ (street & city), that (s)he is the \_\_\_\_\_ (state office) of the \_\_\_\_\_ (name of corporation); the corporation described in and which executed the foregoing instrument: and that (s)he signed his/her name thereto by authority of the Board of Directors of said corporation.

\_\_\_\_\_  
(Notary Public)

**COASTAL ASSESSMENT FORM FOR NISSEQUOGUE AND HEAD-OF-THE-HARBOR  
(LWRP)**

This form should accompany an application for a building permit or subdivision approval.

**A. Applicant**

1. Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Telephone: Area Code ( ): \_\_\_\_\_

**B. PROPOSED ACTIVITY**

1. Location of activity: Village \_\_\_\_\_

Address \_\_\_\_\_

2. Brief description of activity: \_\_\_\_\_  
\_\_\_\_\_

3. Village agency being applied to : \_\_\_\_\_

4. If applications have been file with other agencies (town, county, state, etc.) provide type of permit applied for, agency application number, date of application, and copy of the application.

**C. COASTAL ASSESSMENT**

1. Will the proposed activity involve or result in any of the following:	YES	NO
a. Physical alteration of the site requiring preparation of an environmental impact statement?.....	___	___
b. Physical alteration of land along the shoreline, land under water, or tidal or freshwater wetland?.....	___	___
c. Mining, excavation or dredging activities, or placement of dredged or filled materials, on land along the shoreline, land under water, or tidal or freshwater wetlands?.....	___	___
d. Draining of storm water runoff or sewer overflows into coastal waters or wetlands?.....	___	___
e. Discharge of any pollutants into coastal waters?.....	___	___
2. Will the activity proposed have a significant effect on:		
a. Scenic quality of the coastal environment?.....	___	___
b. Other scenic resources?.....	___	___
c. Structures, sites or districts of historic, archaeological or cultural significance?.....	___	___
d. Fish or wildlife habitats?.....	___	___
e. Land currently farmed or farmed within the last 5 years?.....	___	___

- |  | YES | NO  |
|--|-----|-----|
| 3. Will the proposed activity require:   |     |     |
| a. A federal permit? .....   | ___ | ___ |
| b. A state permit? .....   | ___ | ___ |
| c. A county permit? .....  | ___ | ___ |
| d. A town permit? .....  | ___ | ___ |
| 4. Is the proposed activity within?  |     |     |
| a. 100 feet of mean high water along Long Island Sound<br>or Stony Brook Harbor? .....   | ___ | ___ |
| b. 150 feet of mean high water along the Nissequogue River? .....  | ___ | ___ |
| c. 100 feet of any freshwater or tidal wetland? .....  | ___ | ___ |
| d. 100 feet from the ridgeline of a bluff? .....   | ___ | ___ |
| e. Sites with steep slopes in excess of 15% in Head-of-the-Harbor<br>or 20% in Nissequogue? .....  | ___ | ___ |
| f. A Coastal High-Hazard Flood Area (V-zone)? .....  | ___ | ___ |
| g. A federal state designated flood hazard or erosion hazard area? .....   | ___ | ___ |
| h. A beach, dune, or other natural feature that provides protection<br>against flooding or erosion? .....  | ___ | ___ |
| i. For septic systems, 150 feet from the upland boundary of a<br>freshwater or tidal wetland, or the face of a bluff, or where seasonal<br>high groundwater is less than 3 feet below the surface? ..... | ___ | ___ |

PART II

- |  |     |     |
|--|-----|-----|
| 5. Will the proposed activity require:   |     |     |
| a. Removal of more than 25% of the total trees on a property? .....  | ___ | ___ |
| b. Removal of trees within 25 feet of a property border or within 25 feet<br>of any roadside frontage of the property? ..... | ___ | ___ |
| c. Removal of trees within 100 feet of a barrier bluff ridgeline? .....  | ___ | ___ |
| d. Removal of trees within 100 feet along Long Island Sound,<br>Stony Brook Harbor, or the Nissequogue River? .....          | ___ | ___ |

YES NO

6. Will the proposed activity require construction on or alteration of: (is so describe)
- a. A beach, bluff, or dune?.....
  - b. A tidal or freshwater wetland?.....

7. Will there be any: (if so describe)
- a. Removal of topsoil, sand or gravel from the site?.....
  - b. Disturbance of groundcover of a beach, bluff, or dune?.....
  - c. Alteration of grade (cutting or Filling)?.....
  - d. Increase in erosion or flooding due to the proposed action?.....
  - e. Interference with natural tidal flows?.....
  - f. Dredging (max depth \_\_\_ ft, length \_\_\_ ft, amount of spoil \_\_\_ cu. yds. Disposal area \_\_\_\_\_)?.....

8. Wastes and pollutants generated during project construction and after completion:

	During	After	Components	Quantity	How disposed?
Sanitary sewage					
Clearing or demolition debris					
Spoil or sedimentation					
Surface water runoff					
Other (specify)					

9. Property description:

- a. Total contiguous acres of property \_\_\_\_\_
- b. Present developed acreage \_\_\_\_\_
- c. Final developed acreage \_\_\_\_\_
- d. Roads/driveways on site now \_\_\_\_\_ length \_\_\_\_\_ ft.
- e. New roads/driveways to be built \_\_\_\_\_ length \_\_\_\_\_ ft., width \_\_\_\_\_ ft.



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.

<b>Part 1 - Project and Sponsor Information</b>				
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.			<b>NO</b>	<b>YES</b>
			<input type="checkbox"/>	<input type="checkbox"/>
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:			<b>NO</b>	<b>YES</b>
			<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?  b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?  b. Are public transportation 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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
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**

**INCORPORATED VILLAGE OF HEAD OF THE HARBOR  
LONG ENVIRONMENTAL ASSESSMENT FORM  
PART I - PROJECT INFORMATION**

**NOTICE:** This document is designed to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. It is expected that completion of the full EAF will be dependent on information currently available and will not involve new studies, research or investigation. If information requiring additional work is unavailable, so indicate and specify each instance. \*Please complete each question, indicate N/A if not applicable.

**A. General Information**

Name of Action \_\_\_\_\_

Location \_\_\_\_\_

(give address of site if available)

\_\_\_\_\_ (include distances to nearest intersections)

Suffolk County Tax Map Parcel Numbers Dist. 801 Sec. \_\_\_\_\_ Blk. \_\_\_\_\_ Lot \_\_\_\_\_

Type of Project: \_\_\_\_\_ subdivision application  
\_\_\_\_\_ site plan application  
\_\_\_\_\_ change of zone petition  
\_\_\_\_\_ special exception petition  
\_\_\_\_\_ other

Name of Applicant \_\_\_\_\_

(Owner's agent, architect, contractor, engineer, etc)

Address \_\_\_\_\_

Business phone (\_\_\_\_\_) \_\_\_\_\_ Business fax (\_\_\_\_\_) \_\_\_\_\_

Name of property owner (if different) \_\_\_\_\_

Address \_\_\_\_\_

Daytime phone (\_\_\_\_\_) \_\_\_\_\_ Evening phone (\_\_\_\_\_) \_\_\_\_\_

Daytime Fax (\_\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

**B. Description of Proposed Project:**

1. For subdivision: indicate number and size of proposed lots with approximate square footage of each building envelope:

\_\_\_\_\_  
\_\_\_\_\_

a. Present building or facility total square footage: \_\_\_\_\_

2. For site plan application: indicate nature of planned structure(s) (e.g.: dwelling, accessory structure)

\_\_\_\_\_

a. Present building or facility total square footage: \_\_\_\_\_

b. Planned additional square footage: \_\_\_\_\_ sq. ft. (i.e. gross floor area)

c. Number of stories: \_\_\_\_\_ Area of each \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ sq. ft.

d. Height of tallest proposed structure: \_\_\_\_\_ ft.

3. Nature of any other type of project:

\_\_\_\_\_  
\_\_\_\_\_

4. Vehicular trips expected to be generated per day upon completion of project \_\_\_\_\_ (See Institute of Transportation Engineers: Trip Generation Manual.)

C. Site Description (physical setting of overall project, both developed & undeveloped areas)

1. Present land use: \_\_\_\_\_ residential \_\_\_\_\_ agricultural \_\_\_\_\_ institutional \_\_\_\_\_ other \_\_\_\_\_ (specify)

2. Total acreage of subject parcel (s) \_\_\_\_\_ acres

Approximate acreage by cover type:	At Present	On Completion
wooded	_____ acre	_____ acre
meadow or grassland	_____ acre	_____ acre
agricultural (cropland, pasture)	_____ acre	_____ acre
wetland (freshwater or tidal, per Article 24, 25 ECL)	_____ acre	_____ acre
unvegetated (rock, earth, fill)	_____ acre	_____ acre
buildings	_____ acre	_____ acre
roads & other paved surfaces	_____ acre	_____ acre
landscaped	_____ acre	_____ acre
other (indicated type) _____	_____ acre	_____ acre
TOTAL ACREAGE	_____ acre	_____ acre

3. Zoning (For assistance, consult the village clerk)

a. List all zoning classifications of the site: \_\_\_\_\_

b. If change of zone petition, indicate desired zoning classification: \_\_\_\_\_

4. Has the site ever been used for the disposal of solid or hazard wastes? \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, provide details

\_\_\_\_\_

\_\_\_\_\_

5. Are there any tanks, barrels, drums, or other types of containers, or any dangerous or hazardous materials currently stored at the site? \_\_\_\_\_ (y/n) Are there buried fuel tanks? \_\_\_\_\_ (y/n) Are there old landfills or foundations of previous structures on the site \_\_\_\_\_ (y/n). If yes to any of the above, please list (attach separate documentation of needed) and indicate location on site plan:

\_\_\_\_\_

\_\_\_\_\_

6. What is the predominate soil type on the project site according to the USDA-SCS Soil Survey of Suffolk County, New York 1975: \_\_\_\_\_

a. Soil drainage: \_\_\_\_\_ well drained \_\_\_\_\_ % of the site  
\_\_\_\_\_ moderately well drained \_\_\_\_\_ % of the site  
\_\_\_\_\_ poorly drained \_\_\_\_\_ % of the site

If there are slopes greater than 15%, please include soil map of project site.

7. Are there any unique or unusual landforms on the project site? (e.g. bluffs, kettle holes, kames, or other geological formations?) \_\_\_\_\_ (y/n) If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

8. Have test holes been dug? \_\_\_\_\_ (y/n). If yes, locate on plan.

a. What is the minimum depth to the water table within the project area? \_\_\_\_\_ Feet

b. What is the depth to clay in that area? \_\_\_\_\_ Feet.

c. Have any perched water bodies been detected on the site? (Seasonally high ground water visible, boggy areas, etc.) \_\_\_\_\_ (y/n) If yes, describe:

\_\_\_\_\_

\_\_\_\_\_

9. Are there any springs, streams, ponds, or wetlands within or adjacent to the project site? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes,

10. How far is the project site from the nearest body of surface water? \_\_\_\_\_ ft.  
 a. Name of body of water (if known) and location: \_\_\_\_\_
11. If project is adjacent to bluffs, give minimum distance of structures to bluff: \_\_\_\_\_ ft.
12. Is project site within the 100-year flood plain? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes indicate boundary on site plan.
13. Does project site encompass or border on any trails, open space, parkland, or recreational area used by the community?  
 \_\_\_\_\_ Y \_\_\_\_\_ N. If yes, explain \_\_\_\_\_
14. Does project site offer scenic views or vistas to the community? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes, explain \_\_\_\_\_
15. If there an archaeological site in or adjacent to the project area? \_\_\_\_\_ Y \_\_\_\_\_ N. (Consult New York State Historic Preservation Field Services Bureau at 518-237-8643.) (NB. Artifacts found in Stage 1 survey belong to property owner. If further work is required, artifacts must be secured in a recognized institution.)
16. Is project site within or contiguous to a building/area listed on the National Register of Historic Palaces, the State Register of Historic Places, the Village of Head-of-the-harbor Historic Sites Inventory, or within any historic district? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes, give name of historic building, site, or district: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ (For Inventory, consult files in Long Island Room in the Smithtown Library or the Society for the Preservation of Long Island Antiquities.)
17. Does project alter any former estate layout, driveway, bridle path, road patten, or established landscaping? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes, please explain \_\_\_\_\_
18. Does project site contain any species of plant or animal identified as endangered, threatened, rare, or of special concern at the State or Federal level? \_\_\_\_\_ Y \_\_\_\_\_ N. Authority or documentation? \_\_\_\_\_  
 \_\_\_\_\_  
 If yes, identify each sepecies: \_\_\_\_\_  
 \_\_\_\_\_

D. Site Alteration

1. Will demolition of existing structure occur? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes explain, \_\_\_\_\_
2. How much natural material will be removed form the site in cubic yards? Sand \_\_\_\_\_ Gravel \_\_\_\_\_ Rock \_\_\_\_\_  
 Topsoil \_\_\_\_\_ Other \_\_\_\_\_  
 How much material (rock, topsoil, etc.) will be deposited on this site as fill? \_\_\_\_\_ cu. yd. Identify type and source of material: \_\_\_\_\_
3. Do any mature trees (over four inches in diameter) or other locally important vegetation, such as dogwood, mountain laurel, cedar, holly need to be removed for this project? \_\_\_\_\_ Y \_\_\_\_\_ N. If yes identify such trees on site plan.  
 Does proposed action remove?  
 More than 10% of such trees or other locally important vegetation? \_\_\_\_\_ Y \_\_\_\_\_ N  
 More than 25% of such trees & plants? \_\_\_\_\_ Y \_\_\_\_\_ N  
 Any trees within 40 feet of a road? \_\_\_\_\_ Y \_\_\_\_\_ N  
 Any trees within 75' of Stony Brook Harbor? \_\_\_\_\_ Y \_\_\_\_\_ N
4. Describe physical and biological measures to be undertaken to control erosion (e.g. perimeter hay bales, revegetation, etc.)  
 a. before construction starts: \_\_\_\_\_  
 \_\_\_\_\_  
 b. during construction: \_\_\_\_\_  
 \_\_\_\_\_  
 c. over the long term (e.g. landscaping plans, timetable): \_\_\_\_\_  
 \_\_\_\_\_

Attach a separate sheet of necessary. Indicate all hard structures and proposed plantings on site plan as required by Architectural review Board.)

5. Will final project use herbicides or pesticides, fungicides or fertilizers? \_\_\_\_ Y \_\_\_\_ N. If yes, specify kind and amount and frequency of application: \_\_\_\_\_
6. Will surface area of existing ponds, streams, bays, or other surface waterways and wetlands be increased or decreases by this project? \_\_\_\_ Y \_\_\_\_ N. If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
7. Will there be a discharge into a body of surface water? \_\_\_\_ Y \_\_\_\_ N.  
How will stormwater runoff be handled? (e.g. drywells, leaching pools, retention ponds, recharge basin) \_\_\_\_\_  
\_\_\_\_\_
8. Is water supply: \_\_\_\_\_ public (required for subdivisions) \_\_\_\_\_ private. If from private well, indicate plumbing capacity \_\_\_\_\_ gal/min. Locate well on site plan.
9. For site plan applications only, locate septic tank(s) and pool(s) on site plan.
  - a. If there is an existing sanitary system, has it been certified as functioning by a sanitary engineer?  
\_\_\_\_ Y \_\_\_\_ N. explain \_\_\_\_\_
  - b. To prolong life of septic system, will there be a separate septic tank for gray water (waste from washing machine/dishwasher)? \_\_\_\_ Y \_\_\_\_ N. Please locate on site plan.
10. For site plan applications only, will project require an underground oil or propane tank, or replacement of such a tank?  
\_\_\_\_ Y \_\_\_\_ N. If yes, specify which fuel and capacity of tank: \_\_\_\_\_  
Locate tank(s) on site plan and any existing tanks.

**E. Informational Details**

Attach any additional information needed to clarify your project. If there are or may be any adverse impacts associated with your proposal, please discuss such impacts and the measures you propose to mitigate or to avoid them.

**F. Verification**

I, \_\_\_\_\_, the preparer of this Environmental Assessment Form for the project known as \_\_\_\_\_, do hereby swear that I reside at \_\_\_\_\_ and further that the information set forth in this document is correct and complete to the best of my knowledge.

\_\_\_\_\_  
signature

Subscribed and sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(sign)

\_\_\_\_\_  
(Notary)



## State Environmental Quality Review VISUAL EAF ADDENDUM

**Visibility**

**Distance Between  
Project and Resource (in Miles)**

1. Would the project be visible from:	0-¼	¼-½	½-3	3-5	5+
• <i>A parcel of land which is dedicated to and available to the public for the use, enjoyment and appreciation of natural or man-made scenic qualities?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>An overlook or parcel of land dedicated to public observation, enjoyment and appreciation of natural or man-made scenic qualities?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>A site or structure listed on the National or State Registers of Historic Places?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>State Parks?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>The State Forest Preserve?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>National Wildlife Refuges and State Game Refuges?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>National Natural Landmarks and other outstanding natural features?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>National Park Service lands?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>Rivers designated as National or State Wild, Scenic or Recreational?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>Any transportation corridor of high exposure, such as part of the Interstate System, or Amtrak?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>A governmentally established or designated interstate or inter-county foot trail, or one formally proposed for establishment or designation?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>A site, area, lake, reservoir or highway designated as scenic?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>Municipal park, or designated open space?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>County road?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>State road?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• <i>Local road?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. *Is the visibility of the project seasonal? (i.e., screened by summer foliage, but visible during other seasons)*

Yes                       No

3. *Are any of the resources checked in question 1 used by the public during the time of year during which the project will be visible?*

Yes                       No

**DESCRIPTION OF EXISTING VISUAL ENVIRONMENT**

4. From each item checked in question 1, check those which generally describe the surrounding environment.

	* 1/4 mile	Within * 1 mile
Essentially undeveloped	<input type="checkbox"/>	<input type="checkbox"/>
Forested	<input type="checkbox"/>	<input type="checkbox"/>
Agricultural	<input type="checkbox"/>	<input type="checkbox"/>
Suburban Residential	<input type="checkbox"/>	<input type="checkbox"/>
Industrial	<input type="checkbox"/>	<input type="checkbox"/>
Commerical	<input type="checkbox"/>	<input type="checkbox"/>
Urban	<input type="checkbox"/>	<input type="checkbox"/>
River, Lake, Pond	<input type="checkbox"/>	<input type="checkbox"/>
Cliffs, Overlooks	<input type="checkbox"/>	<input type="checkbox"/>
Designated Open Space	<input type="checkbox"/>	<input type="checkbox"/>
Flat	<input type="checkbox"/>	<input type="checkbox"/>
Hilly	<input type="checkbox"/>	<input type="checkbox"/>
Mountainous	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: add attachments as needed

5. Are there visually similar projects within:

- \* 1/2 mile       Yes     No
- \* 1 mile         Yes     No
- \* 2 miles        Yes     No
- \* 3 miles        Yes     No

\*Distance from project site is provided for assistance. Substitute other distances as appropriate.

**EXPOSURE**

6. The annual number of viewers likely to observe the proposed project is \_\_\_\_\_?

NOTE: When user data is unavailable or unknown, use best estimate.

**CONTEXT**

7. The situation or activity in which the viewers are engaged while viewing the proposed action is:

**FREQUENCY**

	Daily	Weekly	Holidays/ Weekends	Seasonally
Activity				
Travel to and from work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Involved in recreational activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Routine travel by residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At a residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At worksite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OWNERS ENDORSEMENT

(TO BE SIGNED IF APPLICANT IS NOT OWNER)

STATE OF NEW YORK)  
COUNTY OF SUFFOLK) SS:

\_\_\_\_\_, being duly sworn, deposes and says:

I \_\_\_\_\_ reside \_\_\_\_\_ at

In the County of \_\_\_\_\_ and the State of \_\_\_\_\_

And I am the (owner in fee) (officer of the Corporation which is the owner in fee) of the premises described in the foregoing application and that I have authorized

\_\_\_\_\_ to make the foregoing application as described herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
If Corporation, name of corporation and Officers Title

\_\_\_\_\_  
Officers Title

Sworn before me this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public