

VILLAGE OF HEAD-OF-THE-HARBOR
500 North Country Road
St. James, NY 11780
631-584-5550

SPECIAL PERMIT PLAN APPLICATION

Name, Address and Phone Number of Applicant: _____

Location of Property: _____
 SCTM: _____

Existing Use of Property: _____

Landowner's Name and Address: _____

Current Deed Liber and Page (attach copy): _____

Architect's Name, Address and Phone Number: _____

Engineer's Name, Address and Phone Number: _____

Surveyor's Name, Address and Phone Number: _____

Nature of Proposed Use: _____

Zoning District: _____

This Application Is Submitted As Follows: (initial each, as applicable):

(1) With an owner's endorsement (if applicant is not owner)	[]
(2) With a copy of the current deed for the property	[]
(3) With fifteen (15) copies of a current survey prepared by surveyor licensed in New York	[]
(4) With fifteen (15) copies of a site plan	[]
(5) With a General Municipal Law § 809 Certification (if owner or applicant is a corporation or LLC)	[]
(6) With a copy of any existing C.O.	[]
(7) With a certified single and separate search (if premises is undersized)	[]
(8) With fifteen (15) copies of a completed Long Environmental Assessment Form	[]
(9) With a check in payment of the application fee	[]
(10) With NY State Department of Environmental Conservation determination or no jurisdiction letter (if within 300 feet of wetlands)	[]

Any application not filled in properly or submitted without the necessary papers will not be processed until completed. The Village agencies reserve the right to request additional documentation and drawings and to condition relief upon the filing of covenants and restrictions with the Suffolk County Clerk.

Signature of owner, agent or attorney

Sworn to before me this ____ day of _____, 20____.

Notary Public

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GENERAL MUNICIPAL LAW SECTION 809 CERTIFICATION

_____ states as follows:

- (1) I am interested in an application now pending before a Village agency.
- (2) I reside at: _____
- (3) The nature of my interest in the aforesaid application is as follows:

(4) If applicant or owner is a corporation, list officers:

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

(5) Do any of the following individuals have an interest, as defined below, in the owner of applicant:

(A) Any New York State officer, or

(B) Any officer or employee of Village of Head-of-the-Harbor, Suffolk County.

For the purpose of this disclosure, an officer or employee shall be deemed to have an interest in the owner or applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:

- (A) Is the applicant or owner, or
- (B) Is an officer, director, partner, or employee of the applicant or owner, or
- (C) Legally or beneficially owns or controls stock of a corporate applicant or owner, or
- (D) Is a party to an agreement with such an applicant or owner, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered dependent or contingent upon the favorable approval of such application.

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PLEASE NOTE: If ownership is held jointly or in partnership, each owner and/or partner must sign a separate owner's endorsement. If the owner or owners are making the application, this endorsement is not required.

OWNER'S ENDORSEMENT

STATE OF NEW YORK)
 : SS.:
COUNTY OF SUFFOLK)

_____, being duly sworn, deposes and says:

I am (check one):

- 1. the sole owner in fee
- 2. a part owner in fee
- 3. an officer of the corporation which is the premises described in the foregoing application
- 4. designated party authorized to act pursuant to a trust or other legal document
- 5. member/owner(s) of Limited Liability Corporation (LLC)

(If you checked #3, #4 or #5, please provide proof of authority.)

I reside at _____
Mailing Address

Hamlet/Post Office/Village/State/Zip Code

I have authorized _____
to make the foregoing application to the Village of Head-of-the-Harbor for approval as described herein.

Signature

(If owner is a corporation, please indicate name of corporation and the title of the corporate officer whose signature appears above)

Sworn to before me this
____ day of _____, 20__

Notary Public

ENVIRONMENTAL ASSESSMENT FORM

Part 1 (To be completed by the Applicant)

(NOTE: To be accompanied by a survey showing location of project or action, including elevations if necessary).

The purpose of this Environmental Assessment Form is to provide information which will assist the Village in determining whether the action you propose may have a significant impact or effect on the environment. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Please complete the entire form leaving no blanks. If a question does not apply, please indicate so.

This is a standardized form widely used by agencies of government in an effort to comply with the State Environmental Quality Review Act and to protect the environment by a close review of a proposed action. Different parts, accordingly, will be of lesser or greater significance depending on actual facts as presented by applicant.

NOTE: If sufficient space does not exist to give appropriate answers to any question(s) on this form please attach sheet giving such answers properly referenced to question number and page number.

VILLAGE REVIEWING AGENCY

Project Name: _____ Site Plan: _____
Street: _____ Subdivision Waiver: _____
Zoning District: _____ Subdivision: _____
County Tax Map Parcel No.: _____ Special Permit: _____
Map, Block, Lot: _____ Zoning Board: _____

OWNER

Name: _____
Full Address: _____
P.O. and Zip Code: _____ Telephone No.: _____

ATTORNEY OR AGENT

Name: _____

Full Address: _____

P.O. and Zip Code: _____ Telephone No.: _____

SURVEYOR/ENGINEER

Name: _____

Full Address: _____

P.O. and Zip Code: _____ Telephone No.: _____

DESCRIPTION OF PROJECT: (Briefly describe type of project or action)

A. SITE DESCRIPTION (Physical setting of overall project, both developed and undeveloped areas)

1. General character of the land: _____ Generally uniform slope,
_____ Generally uneven and rolling or irregular

2. Present land use: _____ Urban, _____ Industrial, _____ Commercial,
_____ Rural, _____ Forest, _____ Agriculture, _____ Suburban,
Other (describe): _____

3. Approximate percentage of project area:	<u>Presently</u>	<u>After Completion</u>
Meadow or brushland	_____ %	_____ %
Forested	_____ %	_____ %
Agricultural	_____ %	_____ %
Water surface	_____ %	_____ %
Wetland	_____ %	_____ %
(Unvegetated (rock, earth or fill))	_____ %	_____ %
Roads, buildings and other paved surfaces	_____ %	_____ %
Other (indicate type) _____		

4. What is predominant soil type(s) on site? _____

5. Approximate percentage of presently undeveloped project area with slopes:

_____ 15% or greater; _____ 10-15%; _____ 0-15%

6. Is project located within quarter mile of or contain:
- a. A building or site listed on the National Register of Historic Places _____ Yes, _____ No
 - b. A building or site listed on the Statewide Inventory or Historic and Cultural Resources _____ Yes, _____ No
 - c. An archeological site or fossil bed _____ Yes, _____ No
7. What is the depth to the water table? _____ feet
8. Do hunting or fishing opportunities presently exist in the project area? _____ Yes, _____ No
9. Does project site contain any species of plant or animal life that is identified as Threatened or Endangered? _____ Yes, _____ No

If Yes, identify each species: _____

10. Are there any unique or unusual landforms on the project site? (i.e. cliffs, dunes, other geological formations) _____ Yes, _____ No

If Yes, describe: _____

11. Is the project site presently used by the community or neighborhood as an open space or recreation area? _____ Yes, _____ No
12. Does the present site offer or include Scenic views or Vistas known to the community? _____ Yes, _____ No
13. Are there any streams within or contiguous to project area? _____ Yes, _____ No
14. Are there lakes, ponds, or wetland areas within or contiguous to project area? _____ Yes, _____ No

If Yes, (a) Name: _____, (b) Size in acres: _____

15. What is the dominant Land Use and Zoning Classification within a ½ mile radius of the project (e.g. single family residential) and the scale of development (e.g. two story)
- _____
- _____
- _____

B: PROJECT DESCRIPTION

1. Physical dimensions and scale of project (fill in dimensions as appropriate).
- a. Total contiguous acreage owned by project sponsor _____ acres.
 - b. Project acreage developed: _____ acres initially: _____ acres ultimately.
 - c. Project acreage to remain undeveloped _____ acres.
 - d. Length in miles _____
 - e. if project is an expansion of existing structure(s), indicate percent of expansion proposed:
Building square footage _____ developed acreage _____
 - f. Number of off-street parking spaces existing _____ Proposed _____
 - g. Maximum vehicular trips generated per hour _____
(Upon completion of project).
 - h. If residential, number and type of housing units:

	<u>One Family</u>	<u>Two Family</u>	<u>Multiple Family</u>	<u>Condominium</u>
Initial	_____	_____	_____	_____
Ultimate	_____	_____	_____	_____
 - i. If: Orientation

	<u>Neighborhood-Town-Regional</u>	<u>Estimated Employment</u>
Commercial	_____	_____
Industrial	_____	_____
 - j. Total height of tallest proposed structure _____ feet.
2. How many acres of land will be graded? _____ acres.
3. How much natural material (i.e. rock, earth, etc.) will be removed from the site? _____ tons; _____ cubic yards.
4. Approximate percentage of developed project area with slopes:
_____ 15% or greater, _____ 10-15%, _____ 0-10%
5. How many acres of vegetation (trees, shrubs, ground covers) will be removed from the site? _____ acres.
6. Will any mature forest (over 100 years old) or other locally important vegetation be removed by this project? _____ Yes, _____ No

7. Are there any plans for revegetation to replace that removed during construction? _____ Yes, _____ No

8. If single phase project:

(a) Anticipated date of commencement: Month _____, Year _____

(b) Approximate completion date: Month _____, Year _____

9. If multi-phased project:

(a) Total # of phases anticipated? _____

(b) Anticipated date of commencement Phase 1 (including demolition): Month _____, Year _____

(c) Approximate completion date final phase: Month _____, Year _____

(d) Is Phase 1 financially dependent on subsequent phases? _____ Yes, _____ No

10. Number of jobs generated: During construction _____ after project completed _____

11. Number of jobs eliminated by this project: _____

12. Will project require relocation of any projects or facilities? _____ Yes, _____ No

If yes, explain: _____

13. Acreage of freshwater or tidal wetlands affected by project: _____ acres.

14. (a) Is surface or subsurface liquid waste disposal involved? _____ Yes, _____ No

(b) If Yes, indicate type of waste (sewage, industrial, etc.) _____

(c) If surface disposal, name of stream into which effluent will be discharged. _____

15. Will surface area of existing lakes, ponds, streams, bays or other surface waterways be increased or decreased by proposal? _____ Yes, _____ No

16. Is project or any portion of project located in the 100 year flood plain? _____ Yes, _____ No

17. (a) Does project involve disposal of solid waste? _____ Yes, _____ No

(b) If Yes, will an existing solid waste disposal facility be used? _____ Yes, _____ No

(c) If Yes, give name: _____
 location _____

(d) Will any wastes not go into a sewage disposal system or into a sanitary landfill? _____ Yes, _____ No

18. Will project use herbicides or pesticides? _____ Yes, _____ No

19. Will project routinely produce odors (more than one hour per day)? _____ Yes, _____ No

20. Will project cause a continuing increase in noise levels on completion? _____ Yes, _____ No

21. Will project cause an increase in energy use? _____ Yes, _____ No

22. If water supply is from wells, indicate pumping capacity:
 _____ gallons per minute.

23. Total anticipated water usage per day: _____ gallons per day.

24. Zoning:

(a) Current specific zoning classification of site: _____

(b) Is proposed use consistent with present zoning? _____ Yes, _____ No

(c) If No, indicate desired zoning: _____

25. Approvals:

(a) Is any Federal permit required? _____ Yes, _____ No

(b) Does project involve State or Federal funding or financing? _____ Yes, _____ No

(c) Local and Regional approvals:

	Approval	Type Approval Required	Submittal (Date)	Approval (Date)
Village Board of Trustees:	____ Yes, _____ No	_____	_____	_____
Village Planning Board:	____ Yes, _____ No	_____	_____	_____
Village Zoning Board:	____ Yes, _____ No	_____	_____	_____
County Health Department:	____ Yes, _____ No	_____	_____	_____
Other Suffolk County Agencies:	____ Yes, _____ No	_____	_____	_____
State DEC:	____ Yes, _____ No	_____	_____	_____

Federal Agencies: _____ Yes, _____ No _____

C. INFORMATION DETAILS Attach any additional information as maybe needed to clarify your project. If there are or may be any adverse impacts associated with the proposal, please discuss such impacts and the measures, which can be taken to mitigate or avoid them.

PREPARER'S SIGNATURE: _____ TITLE: _____

REPRESENTING: _____ DATE: _____

FILING PROCEDURE

1. Submit 10 completed copies of the SPECIAL PERMIT/SITE PLAN APPLICATION form to:
The Village of Head of the Harbor
ATTN: Board of Trustees
500 North Country Rd.
St. James, NY 11780
2. Request must be received no later than 60 days prior to the Village of Head of the Harbor Board of Trustees meeting.
3. The Board of Trustees meeting dates can be confirmed by calling (631) 584-5550 Mon.-Thurs. from 9 AM until 2 PM.
4. All required supporting information must accompany the application.
5. The application fee (payable to the Inc. Village of Head of the Harbor), see fees schedule*.

This fee covers permit processing and is non-refundable.

* This fee is for the special use permit only; it does not include any fees that may be deemed necessary by the Planning Board, Zoning Board of Appeals, or Building Department.