TOWN OF ISLIP



### **Department of Planning & Development**

## MINOR SUBDIVISION OR LOT LINE CHANGE PROCESS

#### STEP 1

PRE-APPLICATION MEETING WITH ENGINEERING STAFF.

### STEP 2

APPLICANT TO SUBMIT EXECUTED APPLICATION FORM TO THE ENGINEERING DIVISION AT ENGINEERING@ISLIPNY.GOV.

### STEP 3

APPLICANT UPLOADS ALL REQUIRED DOCUMENTS TO THE TOWN'S NETWORK. EACH TYPE OF DOCUMENT MUST BE A SEPARATE UPLOAD (LINK PROVIDED BY ENGINEERING STAFF).

#### STEP 4

STAFF TO REVIEW UPLOADS FOR COMPLETENESS AND CONTACTS APPLICANT WITH QUESTIONS AND/OR COMMENTS.

#### STEP 5

APPLICANT TO SUBMIT FULL APPLICATION PACKAGE OF ORIGINAL DOCUMENTS WITH FILING FEES.

### STEP 6

ENGINEERING DIVISION REVIEWS COMPLETE APPLICATION AND PROPOSED PLAN FOR COMPLIANCE WITH TOWN ZONING STANDARDS AND SUBDIVISION REGULATIONS. APPLICANT IS PROVIDED WITH A PLANNING DETERMINATION. IF ZONING STANDARDS ARE NOT MET, APPLICANT IS PROVIDED A ZONING DENIAL FOR SEPARATE APPLICATION TO THE ZONING BOARD OF APPEALS TO REQUEST VARIANCE OF ZONING STAND-ARDS AND THE SUBDIVISION IS HELD UNTIL ZONING BOARD OF APPEALS DECISION.

### STEP 7

PLAN REVIEW IS COORDINATED WITH OTHER DEPARTMENTS AND AGENCIES AS DEEMED NECESSARY. STAFF CONTACTS APPLICANT WITH QUESTIONS AND/OR COMMENTS.

### STEP 8

APPLICANT AND STAFF WORK ON ADDRESSING ANY COMMENTS, CONCERNS AND CONDITIONS.

### STEP 9

PLAN IS REVIEWED AND FORWARDED TO THE TOWN ENGINEER FOR FINAL APPROVAL, SUBJECT TO CONDI-TIONS (I.E. FEES, DEDICATIONS, EASEMENTS, ETC.).

#### STEP 10

APPLICANT PROCEEDS TO THE SUFFOLK COUNTY DEPARTMENT OF HEALTH SERVICES FOR OTHER REQUIRED APPLICATIONS.



# TOWN OF ISLIP Department of Planning & Development

| Application Requirements                                                                                                                                                                                                    | MET | *NOT MET | N/A |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|-----|
| Application Form—Completed, signed and notarized.                                                                                                                                                                           |     |          |     |
| Full Disclosure Affidavit—Completed, signed and notarized.                                                                                                                                                                  |     |          |     |
| Copy of the current deed(s) showing proof of ownership for<br>overall property(s) and contract of sale, if contract vendee.<br>Valid Certificate(s) of Occupancy for any structures and/or<br>uses on the subject property. |     |          |     |
| Suffolk County Planning Commission Release Form. An additional<br>three (3) preliminary plans are required if Suffolk County<br>Planning Commission review is necessary.                                                    |     |          |     |
| Completed Short Environmental Assessment Form, Full Environ-<br>mental Assessment Form, or Draft Environmental Impact State-<br>ment as required under SEQR. (Available at http://<br>www.dec.ny.gov/permits/70293.html).   |     |          |     |
| Fees as per the current schedule of fees.                                                                                                                                                                                   |     |          |     |
| Three (3) subdivision plans prepared by a licensed surveyor/<br>engineer showing:                                                                                                                                           |     |          |     |
| <ul> <li>Existing and proposed property dimensions and plot layout</li> <li>Topographic survey contours</li> </ul>                                                                                                          |     |          |     |
| <ul> <li>Surrounding uses and zones</li> </ul>                                                                                                                                                                              |     |          |     |
| <ul> <li>Proposed drainage method</li> </ul>                                                                                                                                                                                |     |          |     |
| North Arrow and scale bar                                                                                                                                                                                                   |     |          |     |
| Setbacks for all proposed structures                                                                                                                                                                                        |     |          |     |
| <ul> <li>Special site conditions (easements, utilities, power lines)</li> </ul>                                                                                                                                             |     |          |     |
| <ul> <li>Existing and proposed structures, if any</li> </ul>                                                                                                                                                                |     |          |     |
| <ul> <li>Existing environmental conditions (wetlands, flood zones, etc.)</li> </ul>                                                                                                                                         |     |          |     |
| <ul> <li>Adjacent tax map numbers and ownership patterns</li> </ul>                                                                                                                                                         |     |          |     |
| <ul> <li>GFA and FAR calculations pursuant to Town Code</li> </ul>                                                                                                                                                          |     |          |     |
| <ul> <li>Title block with preparer/subdivider and owner information</li> </ul>                                                                                                                                              |     |          |     |

If insufficient information is provided, the application will be returned to the applicant. This application to be submitted to the Engineering Division and thereafter will be routed to the Engineering and Building Division.



## TOWN OF ISLIP Department of Planning & Development

| Application Requirements                                                                              | MET | *NOT MET | N/A |
|-------------------------------------------------------------------------------------------------------|-----|----------|-----|
| One copy of a current property survey (less than 1 year) including:                                   |     |          |     |
| <ul> <li>Original Surveyor's seal and signature,</li> </ul>                                           |     |          |     |
| North arrow and scale,                                                                                |     |          |     |
| Bearings and Distances,                                                                               |     |          |     |
| <ul> <li>Topographic elevations in NAV 88 Datum,</li> </ul>                                           |     |          |     |
| <ul> <li>Delineation and description of existing easements,</li> </ul>                                |     |          |     |
| <ul> <li>Delineation of land areas within the FEMA floodplain and base floo<br/>elevation,</li> </ul> | od  |          |     |
| • Existing building walls, fences, and trees greater than 10" in caliper                              | ,   |          |     |
| • Title block denoting the surveyor's name, address and telephor                                      | ne  |          |     |

Note:

• The Engineering Division reserves the right to require additional information as necessary to adequately review the application.

• If insufficient information is provided, the application will be returned to the applicant.

This application to be submitted to the Engineering Division and thereafter will be routed to the Engineering and Building Division.

| Town of Islip Department of Planning and Development                                                                                                                             | Office Use Only |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Minor Subdivision and Land Development Application                                                                                                                               | MN 20           |
| Pursuant to Article XXXIV, Paragraph 68-20.2 of the Codified Zoning Ordinance of the Town of Islip,<br>Section 335 of N.Y.S. Real Property Law and Article 16 of N.Y.S. Town Law | Receipt No      |
| 1. Property Information                                                                                                                                                          |                 |
| Tax Map Number 0500                                                                                                                                                              |                 |
| Zoning District(s)                                                                                                                                                               |                 |
| Subdivsion Location                                                                                                                                                              |                 |
| 2. Property Owner Information Contract Vendee (Check if Applicable)                                                                                                              |                 |
| Name                                                                                                                                                                             |                 |
| Street No. Street Name                                                                                                                                                           |                 |
| Street No. Street Name                                                                                                                                                           |                 |
| City/Town State/Zip                                                                                                                                                              | )               |
| Telephone Number E-mail Address                                                                                                                                                  |                 |
| 3. Representative Information                                                                                                                                                    |                 |
| Name                                                                                                                                                                             |                 |
| Street No.     Street Name                                                                                                                                                       |                 |
| City/Town State/Zip                                                                                                                                                              | )               |
| Telephone Number E-mail Address                                                                                                                                                  |                 |
| 4. Applicant Information (If different than<br>Property Owner)                                                                                                                   |                 |
| Name                                                                                                                                                                             |                 |
| Street No. Street Name                                                                                                                                                           |                 |
| City/Town State/Zi                                                                                                                                                               | р               |
| Telephone Number     E-mail Address                                                                                                                                              |                 |

| Town of Islip Department of Planning and Development           Minor Subdivision and Land Development Application |                                                                           |                                                                                                                       |            |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|------------|
| Pursuant to Article XXXIV, Paragraph                                                                              | 68-20.2 of the Codified Zoning Ordi<br>Property Law and Article 16 of N.Y | inance of the Town of Islip, Section 335 of N<br>7.S. Town Law                                                        | .Y.S. Real |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
| Signature of Applicant:                                                                                           |                                                                           | Date:                                                                                                                 |            |
| Sworn before me this                                                                                              | day of                                                                    | , 20                                                                                                                  |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
| Notary Public                                                                                                     |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
| Signature of Owner:                                                                                               |                                                                           | Date:                                                                                                                 |            |
| Sworn before me this                                                                                              | day of                                                                    | , 20                                                                                                                  |            |
|                                                                                                                   | uay 01                                                                    | , 20                                                                                                                  |            |
| Notary Public                                                                                                     |                                                                           |                                                                                                                       |            |
| 1 ( <b>0 ( 1</b> ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )                                                              |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
|                                                                                                                   |                                                                           |                                                                                                                       |            |
| I anterit Diagon he advised that                                                                                  | 1                                                                         | 1. then to the Town of Jolin for the                                                                                  | catad      |
| purpose, you, as the applicant, ac                                                                                | cknowledge and agree that a r                                             | lication to the Town of Islip for the<br>nodification or addition may be mad<br>ny resultant modification or addition | le to your |

|                                                                                                                                                                      | Disclosure Affidavit                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| cation of:                                                                                                                                                           |                                                                                                                                                                                                |
| tion of Property:                                                                                                                                                    | Tax Map No. 0500                                                                                                                                                                               |
|                                                                                                                                                                      |                                                                                                                                                                                                |
|                                                                                                                                                                      | * Cross out phrase where it is not a                                                                                                                                                           |
| FE OF NEW YORK)<br>:SS.:                                                                                                                                             |                                                                                                                                                                                                |
| NTY OF SUFFOLK)                                                                                                                                                      |                                                                                                                                                                                                |
|                                                                                                                                                                      |                                                                                                                                                                                                |
|                                                                                                                                                                      | with the above captioned application to the Planning Board, I,                                                                                                                                 |
|                                                                                                                                                                      | he *(applicant herein), (an officer or agent of the corporate applicant, namely it's), swear or affirm under the penalties of perjury, that no other person                                    |
| will have any direct or indire                                                                                                                                       | ect interest in this application except                                                                                                                                                        |
|                                                                                                                                                                      |                                                                                                                                                                                                |
|                                                                                                                                                                      | officers of the corporations and stockholders owning more than 5% of the cor-                                                                                                                  |
| poration stock must be listed                                                                                                                                        | . Attach separate sheet if necessary)                                                                                                                                                          |
| That *(I am not) (no                                                                                                                                                 | one of the officers or stock holders are) related to any officer or employee of the                                                                                                            |
|                                                                                                                                                                      |                                                                                                                                                                                                |
| Town of Islip, except                                                                                                                                                |                                                                                                                                                                                                |
| Town of Islip, except                                                                                                                                                |                                                                                                                                                                                                |
| Town of Islip, except<br>That there is not an<br>local public authorities or o                                                                                       | by state or local officer or employee, a member of a board of commissioners of other corporation within the county (exclusive of a volunteer fireman or civil                                  |
| Town of Islip, except<br>That there is not an<br>local public authorities or o<br>defense volunteer) interested                                                      | y state or local officer or employee, a member of a board of commissioners of                                                                                                                  |
| Town of Islip, except<br>That there is not an<br>local public authorities or o<br>defense volunteer) interested                                                      | by state or local officer or employee, a member of a board of commissioners of other corporation within the county (exclusive of a volunteer fireman or civil in such application, except      |
| Town of Islip, except<br>That there is not an<br>local public authorities or o<br>defense volunteer) interested                                                      | y state or local officer or employee, a member of a board of commissioners of<br>other corporation within the county (exclusive of a volunteer fireman or civil<br>in such application, except |
| Town of Islip, except<br>That there is not an<br>local public authorities or o<br>defense volunteer) interested<br>Signature of Applicant(s)                         | by state or local officer or employee, a member of a board of commissioners of other corporation within the county (exclusive of a volunteer fireman or civil in such application, except      |
| Town of Islip, except<br>That there is not an<br>local public authorities or o<br>defense volunteer) interested<br>Signature of Applicant(s)<br>Sworn before me this | y state or local officer or employee, a member of a board of commissioners of<br>other corporation within the county (exclusive of a volunteer fireman or civil<br>in such application, except |

#### SUFFOLK COUNTY PLANNING COMMISSION RELEASE FORM

#### SUBDIVISIONS SUBJECT TO SUFFOLK COUNTY PLANNING COMMISSION REVIEW

Suffolk County Planning Commission is required to review certain subdivision plats in accordance with Article XIV, Sections A14-14 to A-24 of the Suffolk County Administrative Code, and Article XXXVII, Section C37-5D of the Suffolk County Charter where a proposed subdivision is located within a Suffolk County Pine Barrens Zone, and the Suffolk County Planning Commission proceedings in accordance with Article XIV, Section A-14-24 of the Suffolk County Administrative Code.

| A. I | ndicate if | proposed | subdivision | lies wholly | or partly | y within | one mile of: |
|------|------------|----------|-------------|-------------|-----------|----------|--------------|
|------|------------|----------|-------------|-------------|-----------|----------|--------------|

|                      |                                                                                                                                                             | <u>YES</u>   | NO |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| 1.                   | An airport.                                                                                                                                                 |              |    |
| B. Indicate if propo | osed subdivision lies wholly or partly within                                                                                                               | 500 feet of: |    |
| 1.                   | The boundary of a village or town.                                                                                                                          |              |    |
| 2.                   | The boundary of any existing or<br>proposed county, state, or federal park<br>or other recreation area.                                                     |              |    |
| 3.                   | The right-of-way of any existing or<br>proposed county or state parkway,<br>thruway, expressway, road, or<br>highway.                                       |              |    |
| 4.                   | The existing or proposed right-of-way<br>of any stream or drainage channel<br>owned by the county or for which the<br>county has established channel lines. |              |    |
| 5.                   | The existing or proposed boundary or<br>any other county, state, or federally<br>owned land, held or to be held for<br>governmental use.                    |              |    |
| 6.                   | The Atlantic Ocean, any bay in<br>Suffolk County, or estuary of any of<br>the foregoing bodies of.                                                          |              |    |
|                      |                                                                                                                                                             |              |    |

Date\_\_\_\_\_

Signature\_\_\_\_\_

If any of the above were answered yes, proceed to the next page.

Requirements for submission of subdivision plans to Suffolk County Planning Commission.

Failure to submit information as requested will result in a rejection of application as incomplete and will increase review time.

- 1. Three (3) copies of Subdivision Map
  - a. No photocopies of the proposed map will be accepted that do not show the entire map on a single sheet or are on material that will fade or deteriorate.
  - b. The proposed subdivision plat shall be complete in all aspects and shall show the following minimum information:
    - i. Name of map; for example, Minor Subdivision John J. Jones; Subdivision Map of property of John J. Jones; John J. Jones Plat. Names must be distinct. A map containing the words "proposed subdivision map" in the title will be considered a preliminary map and a map containing the words "sketch plan", set off, subdivision waiver in the title will not be accepted. Duplicate names within a municipality will not be accepted.
    - ii. Hamlet (village) and town in which the subject property is located.
    - iii. Name of the licensed land surveyor who surveyed the property and prepared the proposed subdivision map.
    - iv. Total area of the parcel.
    - v. Proposed lot numbers for al parcels within subdivision.
    - vi. Area of each lot.
    - vii. Sufficient data to readily determine the location, direction, and length of all property boundaries, street lines, and lot lines.
    - viii. Zoning classification of property (May be stated in a referral letter if not on the map).
    - ix. Suffolk County Tax Map number (May be stated in referral letter if not on the map).

NOTE: Section 7209.2 of the New York State Education Law prohibits the alteration of any plans, specifications, plats, and reports to which the seal and signature of a licensed land surveyor has been applied and bearing a statement that alteration of the document is a violation of the State Education Law.

- 2. One (1) copy of TOPOGRAPHICAL MAP or information, if such was required by the referring agency as part of its requirements.
- 3. Supporting information:
  - a. Draft or Final Environmental Impact Statement (DEIS/FEIS), if such has been required.
  - b. Environmental Assessment Form (Long or Short).

#### 617.20 Appendix B Short Environmental Assessment Form

#### **Instructions for Completing**

**Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1.** Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

| Part 1 - Project and Sponsor Information                                                                                                                                                              |           |                       |       |      |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|-------|------|-----|
| Name of Action or Project:                                                                                                                                                                            |           |                       |       |      |     |
| Project Location (describe, and attach a location map):                                                                                                                                               |           |                       |       |      |     |
| Brief Description of Proposed Action:                                                                                                                                                                 |           |                       |       |      |     |
|                                                                                                                                                                                                       |           |                       |       |      |     |
|                                                                                                                                                                                                       |           |                       |       |      |     |
| Name of Applicant or Sponsor:                                                                                                                                                                         | Telepl    | none:                 |       |      |     |
|                                                                                                                                                                                                       | E-Mai     | 1:                    |       |      |     |
| Address:                                                                                                                                                                                              |           |                       |       |      |     |
| City/PO:                                                                                                                                                                                              |           | State:                | Zip C | ode: |     |
| 1. Does the proposed action only involve the legislative adoption of a plan,                                                                                                                          | local law | , ordinance,          | N     | 10   | YES |
| administrative rule, or regulation?<br>If Yes, attach a narrative description of the intent of the proposed action an<br>may be affected in the municipality and proceed to Part 2. If no, continue t |           |                       | that  |      |     |
| 2. Does the proposed action require a permit, approval or funding from an                                                                                                                             |           |                       | N     | 10   | YES |
| If Yes, list agency(s) name and permit or approval:                                                                                                                                                   | -         |                       |       |      |     |
| 3.a. Total acreage of the site of the proposed action?         b. Total acreage to be physically disturbed?                                                                                           |           | acres<br>acres        |       |      |     |
| c. Total acreage (project site and any contiguous properties) owned<br>or controlled by the applicant or project sponsor?                                                                             |           | acres                 |       |      |     |
| 4. Check all land uses that occur on, adjoining and near the proposed actio                                                                                                                           | n.        |                       |       |      |     |
| □ Urban □ Rural (non-agriculture) □ Industrial □ Com                                                                                                                                                  |           | □ Residential (suburl | ban)  |      |     |
|                                                                                                                                                                                                       | (specify  | ):                    |       |      |     |
| □ Parkland                                                                                                                                                                                            |           |                       |       |      |     |

| 5. Is the proposed action,                                                                                                                                                                                | NO    | YES    | N/A  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------|------|
| a. A permitted use under the zoning regulations?                                                                                                                                                          |       |        |      |
| b. Consistent with the adopted comprehensive plan?                                                                                                                                                        |       | NO     | VEG  |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?                                                                                           |       | NO     | YES  |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Ar If Yes, identify:                                                                           | rea?  | NO     | YES  |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels?                                                                                                          |       | NO     | YES  |
| o. a. win the proposed action result in a substantial increase in traine above present levels.                                                                                                            |       | no     | 11.5 |
| 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 ac                                                                                                       | tion? |        |      |
| 9. Does the proposed action meet or exceed the state energy code requirements?<br>If the proposed action will exceed requirements, describe design features and technologies:                             |       | NO     | YES  |
| 10. Will the proposed action connect to an existing public/private water supply?                                                                                                                          |       | NO     | YES  |
| If No, describe method for providing potable water:                                                                                                                                                       |       |        |      |
| 11. Will the proposed action connect to existing wastewater utilities?                                                                                                                                    |       | NO     | YES  |
|                                                                                                                                                                                                           |       |        |      |
| If No, describe method for providing wastewater treatment:                                                                                                                                                |       |        |      |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?                                                                                      |       | NO     | YES  |
| b. Is the proposed action located in an archeological sensitive area?                                                                                                                                     |       |        |      |
| 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?                  | n     | NO     | YES  |
| 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:          |       |        |      |
|                                                                                                                                                                                                           |       |        |      |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check a         □ Shoreline       □ Forest       □ Agricultural/grasslands       □ Early mid-success |       | apply: |      |
| □ Wetland □ Urban □ Suburban                                                                                                                                                                              |       | NO     | VEC  |
| 15. Does the site of the proposed action contain any species of animal, or associated habitats, listed<br>by the State or Federal government as threatened or endangered?                                 |       | NO     | YES  |
| 16. Is the project site located in the 100 year flood plain?                                                                                                                                              |       | NO     | YES  |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources?                                                                                                        |       | NO     | YES  |
| If Yes,<br>a. Will storm water discharges flow to adjacent properties?                                                                                                                                    |       |        |      |
| b. Will storm water discharges be directed to established conveyance systems (runoff and storm drain<br>If Yes, briefly describe:                                                                         | 15)?  |        |      |
|                                                                                                                                                                                                           |       |        |      |

| 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)? | NO     | YES   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------|
| If Yes, explain purpose and size:                                                                                                                                        |        |       |
|                                                                                                                                                                          |        |       |
|                                                                                                                                                                          |        |       |
| 19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?                               | NO     | YES   |
| If Yes, describe:                                                                                                                                                        |        |       |
|                                                                                                                                                                          |        |       |
| 20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or                                                             | NO     | YES   |
| completed) for hazardous waste?                                                                                                                                          |        |       |
| If Yes, describe:                                                                                                                                                        |        |       |
|                                                                                                                                                                          |        |       |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE KNOWLEDGE                                                                                       | BEST ( | OF MY |
|                                                                                                                                                                          |        |       |
| 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<br>small<br>impact<br>may<br>occur | Moderate<br>to large<br>impact<br>may<br>occur |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|
| 1. | Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?                                                                |                                           |                                                |
| 2. | Will the proposed action result in a change in the use or intensity of use of land?                                                                                     |                                           |                                                |
| 3. | Will the proposed action impair the character or quality of the existing community?                                                                                     |                                           |                                                |
| 4. | Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?                      |                                           |                                                |
| 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?            |                                           |                                                |
| 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? |                                           |                                                |
| 7. | Will the proposed action impact existing:<br>a. public / private water supplies?                                                                                        |                                           |                                                |
|    | b. public / private wastewater treatment utilities?                                                                                                                     |                                           |                                                |
| 8. | Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?                                   |                                           |                                                |
| 9. | Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?                     |                                           |                                                |

|                                                                                                                 | No, or<br>small<br>impact<br>may<br>occur | Moderate<br>to large<br>impact<br>may<br>occur |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? |                                           |                                                |
| 11. Will the proposed action create a hazard to environmental resources or human health?                        |                                           |                                                |

**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.

| 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.                                                                           |

□ 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) |