TOWN OF ISLIP, NEW YORK

Planning Board Special Permit Process

STEP 1

PRE-APPLICATION MEETING WITH PLANNING STAFF, IF DESIRED. APPLICANT IS ADVISED IF OTHER APPLICATIONS SHOULD BE FILED CONCURRENTLY (E.G. ZONING BOARD OF APPEALS).

STEP 2

SUBMIT A COMPLETE PLANNING BOARD SPECIAL PERMIT APPLICATION TO THE PLANNING DEPARTMENT.

STEP 3

PLANNING DEPARTMENT REVIEWS COMPLETE APPLICATION AND CONTACTS APPLICANT WITH QUESTIONS AND/OR COMMENTS. APPLICANT SUBMITS REVISED PLANS IF NECESSARY.

STEP 4

PUBLIC HEARING IS HELD BEFORE THE PLANNING BOARD. PLANNING BOARD AND PUBLIC SUBMIT QUESTIONS, COMMENTS AND CONCERNS.

STEP 5

APPLICANT RESOLVES ANY QUESTIONS OR COMMENTS THE NIGHT OF OR AFTER PUBLIC HEARING.

STEP 6

PLANNING BOARD APPROVES OR DENIES SPECIAL PERMIT.

STEP 7

APPROVED APPLICANTS ARE DIRECTED TO BUILDING & ENGINEERING DIVISIONS FOR OTHER REQUIRED APPLICATIONS.

SUBMISSION REQUIREMENTS CHECKLIST
FOR
PLANNING BOARD SPECIAL PERMIT

Application Requirements	MET	*NOT MET	N/A
Application Form—Completed, signed and notarized.			
Fees as per the current schedule of fees.			
Completed Short Environmental Assessment Form. Complete Part 1 Only. Available at http://www.dec.ny.gov/permits/70293.html			
Disclosure Affidavit.			
One (1) copy of lease, deed, or contact of sale.			
One (1) copy of the Certificate of Occupancy. May be obtained at the Building Division located at One Manitton Court, directly behind Town Hall. Phone number for the Building Division is (631) 224-5470.			
One copy of a 200' radius map and notification list of surrounding property owners. Applicant must fill out attached Map Request Form and submit it to the Town of Islip Planning Division for a fee of $75.			
Affidavit of Notification and Posting.			
Three (3) copies of the Site Plan. Site Plans must be submitted on 22x34 or 34x44 sized paper.			
One (1) copy of the property survey. Survey must be less than 10 years old.			
One (1) copy of floor plan, drawn to scale. Floor plans are only necessary for restaurant, bar, tavern, night club, billiard hall, showroom, personal service establishments, or indoor recreation applications.			
One (1) copy of elevations. Only if new construction or exterior changes are proposed.			

*NOT MET—APPLICANT MUST EXPLAIN WHY REQUIREMENT IS NOT NECESSARY

Town of Islip Department of Planning and Development

Application for Planning Board Special Permit

Petition to the Islip Town Planning Board pursuant to the requirements of the code of the Town of Islip and New York State Town Law.

Office Use Only

PB 20 _____ - _____

Total Fee Received $ _____

Receipt No. _____

Requested Modification

☐ Special Permit for: _____

☐ Modification of Conditions

PB _____ T.C.# _____

☐ Site Plan Design Modification: _____

☐ Other: _____

Property Owner Information

☐ Contract Vendee (Check if Applicable)

Name

Street No. Street Name

City/Town State/Zip

Telephone Number E-mail Address

Applicant Information

Name

Street No. Street Name

City/Town State/Zip

Telephone Number E-mail Address

Representative Information

Name

Street No. Street Name

City/Town State/Zip

Telephone Number E-mail Address

Town of Islip Department of Planning and Development

Application for Planning Board Special Permit

Petition to the Islip Town Planning Board pursuant to the requirements of the code of the Town of Islip and New York State Town Law.

Disclosure

Is the Applicant, owner, or anyone with financial interest in the property related to any officer or employee of the Town of Islip by blood, marriage or financial arrangement? ☐ Yes ☐ No

If yes, attach disclosure affidavit.

Land Use & Site Information

- Tax Map No. 0500 _____
- Location of Property
  - N/S/E/W Side of _____
  - _____ Feet N/S/E/W of _____
- School District Name and No.: _____
- Existing use of property: _____
- Proposed use of property: _____
- Proposed building floor area of unit (include existing floor area if it is to remain): _____ sq. ft.
- Number of seats (if application is for a restaurant or other place of public assembly): _____
- Number of Parking Spaces required (in accordance with zoning ordinance): _____
- Number of parking spaces provided: _____
- Does the applicant/owner have any interest in contiguous property? ☐ Yes ☐ No
  - If yes, State Tax Map number(s): _____
- Is the Property within 500' of the boundary line of:

	Yes	No
a. Town or village boundary	☐	☐
b. County, State, or Federal Land	☐	☐
c. County or State Road	☐	☐
d. Stream, Drainage Channel Or Wetlands	☐	☐

- Existing Zoning: _____
- Area of site (sq. ft.): _____

The information stated in this application and on supporting documentation is accurate and true. Any changes to this information prior to a decision by the Board will be indicated in writing to the board.

Signature of Applicant: _____ **Date:** _____

Signature of Owner: _____ **Date:** _____

Sworn before me this _____ **day of** _____ **, 20** _____

_____

Notary Public

Important: Please be advised that by submitting this application to the Town of Islip for the requested purpose, you, as the applicant, acknowledge and agree that a modification or addition may be made to your Certificate of Occupancy/Compliance. No further notice of any resultant modification or addition shall be required.

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:	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.			**NO** ☐	**YES** ☐
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:			**NO** ☐	**YES** ☐
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. ☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban) ☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other (specify): _____ ☐ Parkland				

RESET

	NO	YES	N/A
5. Is the proposed action,			
a. A permitted use under the zoning regulations?	☐	☐	☐
b. Consistent with the adopted comprehensive plan?	☐	☐	☐

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☐	☐
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	☐	☐
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?	☐	☐
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: _____	☐	☐
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	☐	☐
11. Will the proposed action connect to existing wastewater utilities? 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?	☐	☐
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?	☐	☐
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 all that apply: ☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional ☐ Wetland ☐ Urban ☐ 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?	☐	☐
16. Is the project site located in the 100 year flood plain?	☐	☐
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? ☐ NO ☐ YES	☐	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☐ NO ☐ YES _____		

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	NO	YES
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: _____	☐	☐
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: _____	☐	☐
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: _____	☐	☐

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

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?	☐	☐
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: 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)?	☐	☐

RESET

	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?	☐	☐
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)

PRINT

RESET

Disclosure Affidavit

Application of: _____

Location of Property: _____ **Tax Map No.** 0500 _____

_____

* Cross out phrase where it is not appropriate

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

That in connection with the above captioned application to the Planning Board, I, _____ _____ the *(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 indirect interest in this application except _____

_____

_____

(in case of corporations, all officers of the corporations and stockholders owning more than 5% of the corporation stock must be listed. Attach separate sheet if necessary)

That *(I am not) (none of the officers or stock holders are) related to any officer or employee of the Town of Islip, except _____

_____

That there is not any state or local officer or employee, a member of a board of commissioners of local public authorities or other corporation within the county (exclusive of a volunteer fireman or civil defense volunteer) interested in such application, except _____

_____

Signature of Applicant(s) _____ **Date:**_____

Sworn before me this_____ **day of** _____ **, 20**____

_____

Notary Public

INSTRUCTIONS FOR
NOTIFICATION SURROUNDING PROPERTY OWNERS
AND
SAMPLE NOTIFICATION LETTER

Prior to the Planning Board public hearing, all property owners within 200 feet of the subject parcel must be notified. It is the applicant's responsibility to obtain an accurate list of surrounding property owners from the Town of Islip Planning Department and to notify surrounding property owners of the time and date of the Planning Board Public Hearing. The procedures below must be followed:

1. MAP & LIST	A 200 foot radius map and a list of all property owners within the 200 foot radius must be obtained and submitted with the application. The applicant must acquire a radius map and list from the Town of Islip Planning Department, for a fee of $75. If the applicant owns or has an interest in property contiguous (adjacent) to the subject parcel, the list shall include property owners within 200 feet of the contiguous property.
2. NOTIFICATION	After you submit a complete application, the Planning Department staff will review it and schedule it for a Planning Board public hearing. You will be notified of the date of the Planning Board public hearing; you are then required to ***notify the surrounding property owners as they appear on the notification list at least ten (10) days prior to the hearing***. Please review the attached sample notification letter and follow its format. ***The notification must be certified mail, return receipt requested and submitted to the Town prior to the public hearing.***
3. SIGNS	The applicant is required to post ***PUBLIC NOTICE SIGNS on the subject parcel at least ten (10) days prior to the hearing***. These signs are available at the Planning Department for a fee of $10 each. At least three (3) signs shall be posted on the perimeter of each parcel in conformance with §68-32C(2) of the Code of the Town of Islip. ***These signs should be removed immediately after the public hearing is held.***
4. AFFIDAVIT	After the applicant has mailed the notification letters and posted the PUBLIC NOTICE signs on the property, the applicant shall submit an Affidavit of Notification and Posting and proof of mailing to the Planning Department. A copy of this Affidavit is attached hereto.

Sample Notification Letter

<<Applicant>>
<<Applicant's Street Address>>
<<App. Town>>, <<App. State>> <<App. Zip Code>>

<<Today's Date>>

<<Surrounding Owner's Name>>
<<Owner's Street Address>>
<<Owner's Town>>, <<Owner's State>> <<Owner's Zip Code>>

RE:

_____

_____

_____

Dear <<Surrounding Owners>>:

This is to notify you that there will be a public hearing before the Town of Islip Planning Board on <<Hearing Date>> at <<6:30>> P.M. which will be held electronically via Zoom Webinar. Instructions on how to access the Zoom Webinar and/or livestream are available on the Town's website—www.islipny.gov.

The purpose of this hearing is to discuss the merits of the proposal for the above captioned property to:

Obtain a _____ from the _____ Board for

_____

_____

To review proposed plans please contact the Planning Department by telephone at (631) 224-5450.

Although written notification is given only to those within 200 feet of the subject property, please feel free to mention this application to any neighbor who may care to attend. At this meeting, all who choose to speak will be given the opportunity to be heard. Anyone interested in providing comments to the Planning Board on this application are encouraged to do so in writing and prior to the date of the meeting at the email address publichearings@islipny.gov

This meeting is a major influence on the outcome of this application. If you have any interest in this proposal, we urge you to attend.

Very truly yours,

<<Name of Applicant>>

<<Signature of Applicant>>

AFFIDAVIT OF NOTIFICATION & POSTING

STATE OF NEW YORK

SS:

COUNTY OF SUFFOLK

The UNDERSIGNED, being duly sworn, deposes and says that in compliance with the requirements of the Town of Islip Town Code, hereby certifies that all surrounding property owners within two hundred feet of subject property located at

_____

_____

Town of Islip, Suffolk County, NY, have been notified by certified mail (as per the attached certified mail receipts) dated _____ advising said property owners within two hundred feet that a public hearing will be held by the Islip Town Planning Board at 6:30 p.m. on _____ 20___, via Zoom Webinar and that the applicant has conspicuously posted signs on the property advertising the date, time, and reason for the public hearing before the Planning Board.

_____
Signature

_____
Print Name

Sworn to before me this

_____ Day of _____, 20___

_____
Notary Public

Town of Islip
Department of Planning and Development
Angie M. Carpenter, Supervisor
Ron Meyer, Commissioner of Planning and Development

Office Use Only
Map No. 20____ - _____
Receipt No. _____
Associated with a FOIL Application ☐ Y ☐ N

Map Request Form

1. Applicant Information

Name: _____ **Phone Number:** _____

E-Mail Address: _____

2. Subject Area Information

Address: _____

Tax Map Number(s): _____

_____

Description of Subject Area: _____

_____

3. Map Request/Pricing (allow a minimum of one week for processing)

Printed in Black & White (price per page)

Map Size	F.O.I.L. Rate	Custom Map	No. of Copies	Landscape	Portrait
8.5" x 11"	$0.25	$50.00			
8.5" x 14"	$0.25	$50.00			
11" x 17"	$2.50	$50.00			
18" x 24"	$5.00	$75.00			
24" x 36"	$10.00	$75.00			
36" x 48"	$25.00	$75.00			

Printed in Color (price per page)

Map Size	F.O.I.L. Rate	Custom Map	No. of Copies	Landscape	Portrait
8.5" x 11"	N/A	$75.00			
8.5" x 14"	N/A	$75.00			
11" x 17"	$5.00	$75.00			
18" x 24"	$10.00	$100.00			
24" x 36"	$20.00	$100.00			
36" x 48"	$40.00	$100.00			

Data to be Included (check all relevant data—no more than one aerial per map):

- ☐ Hamlets
- ☐ Legislative Districts
- ☐ Flood Zones (☐1998 ☐ 2009)
- ☐ School Districts
- ☐ Radius (☐200' ☐500' ☐Other:_____)
- ☐ Parcel Lines
- ☐ Zoning Data
- ☐ Street Labels
- ☐ Wetlands (☐Freshwater ☐Tidal)
- ☐ Other: _____
- ☐ Aerial Imagery (circle desired year): 1938; 1947; 1961; 1969; 1972; 1976; 1980; 1984; 1999; 2001; 2004; 2007; 2009; 2010; 2011; 2012 (coastline only); 2013; 2016

Features to be Labeled: _____

Title of Map: _____

Other Instructions: _____

_____

FOIL/Pricing Notes

1. The following must be requested via FOIL Request Form (along with this map request form) through the Town Clerk's Office:
    a. Photocopies of a paper original map
    b. Maps located within a file on the Town Network
    c. Maps that can be reproduced using the Town's GIS Viewers (ArcIMS/ Geocortex viewers)
    d. Zoning Map Section Posters (must be accompanied by a Zoning Map Request Form, not this Map Request From)
2. Custom Map requests by students with a valid student ID are eligible for maps at the FOIL prices, and do not need to go through the Town Clerk.
3. Requests not covered under 1 or 2 above will be charged the Custom Map rate.
4. Radius maps are only available as a custom map
5. Street Maps (36"x 48") are $40.00 per page.
6. Additional copies of a Custom Map will be charged the FOIL rate.
7. Payment for custom maps is due at the time of application and is payable by cash or check made payable to Town of Islip. A $35.00 fee will be charged for any returned checks.
8. Refunds for custom maps will only be issued if requested within 2 business days after the application is submitted, as long as the request hasn't been processed.
9. Revisions of custom maps are subject to a fee of 25% of the original price; Custom maps (11" x 17" and under) include one revision at no cost.
10. Effective March 29, 2017, color copies on 8.5" x 11" and 8.5" x 14" are no longer available through F.O.I.L.

Office Use Only

Map Rate: _____ Rate for Additional Copies: _____

Total Cost: _____

Method of Payment:

☐ Cash ☐ Check (Check No. _____)

I have reviewed the information contained in this application and agree to abide by it's stipulations

_____

Signature of Applicant

_____

Date