

Regular Monthly Meeting
VILLAGE OF TRUMANSBURG
BOARD OF TRUSTEES
Agenda
July 12, 2021
7:00pm

Zoom Meeting ID: 89726679850

Call-in number: (929)436-2866

1. (7:00) CALL TO ORDER
2. (7:00) CHANGES TO AGENDA
- 3. (7:00) PUBLIC HEARING – CDBG Grant Application**
4. (7:30) PRIVILEGE OF THE FLOOR
5. (7:45) REPRESENTATIVES
6. (8:00) CONSENT AGENDA
 - a. Abstract of Claims
7. (8:05) BOARD MEMBER REPORTS
 - a. MAYOR – Hart
 - i. ARPA Funding
 - ii. Aubles MHP Roads Request
 - b. FIRE/TACC/ETC – Giles
 - c. EMS/YOUTH/STAC – Carver - Excused
 - d. DPW/WATER/SEWER/CPZR/Farmers Market – Darfler
 - i. Discussion of additional DPW position
 - e. POLICE – Hannon
 - i. Grassroots Parking
 - f. TREASURER – Badalamenti
 - i. Backhoe Permissive Referendum
 - g. CLERK – Morse
8. (9:05) OLD BUSINESS
 - a. Comprehensive Plan
 - i. SEQR Lead Agency Declaration
 - ii. SEQR EAF Part 1 Review
 - iii. EDR Proposal
9. (9:35) NEW BUSINESS
10. (9:40) PRIVILEGE OF THE FLOOR
11. (9:55) EXECUTIVE SESSION – EMS Personnel
12. (10:00) ADJOURNMENT

**RESOLUTION WITH REFERENCE TO THE PROPOSED
VILLAGE OF TRUMANSBURG, TOMPKINS COUNTY, NY
NORTHWEST VILLAGE INFRASTRUCTURE IMPROVEMENTS**

WHEREAS, a public information meeting was held on [REDACTED], for the purpose of identification of community development needs and announcement of the opportunity to apply for Community Development Block Grant (CDBG) funds: and

WHEREAS, the Village of Trumansburg wishes to complete a study of the municipal water, sewer, and storm sewer systems to identify the shortcomings, the proposed infrastructure improvements necessary to improve performance, and the projected costs for residents of the district: and

WHEREAS, affordability for Village residents and property owners is a significant concern in advancement of the proposed project: and

NOW, THEREFORE, be it RESOLVED as follows:

1. The Village Board authorizes Municipal Solutions to prepare an application for Community Development Block Grant - Engineering Planning Grant funds from the NYS Office for Community Renewal.
2. The Village Board authorizes Mayor Rordan Hart to execute the application & related documents as required for a Community Development Block Grant – Engineering Planning Grant from the NYS Office for Community Renewal.
2. This resolution shall take effect immediately.

Dated: _____

Introduced by: _____

Seconded by: _____

Voting Aye: _____

Voting Nay: _____

CERTIFICATE OF RECORDING OFFICER

The attached Resolution is a true and correct copy of a resolution authorizing the execution of an application by Mayor Rordan Hart for Community Development Block Grant funds, as regularly adopted at a legally convened meeting of the Board of Trustees of the Village of Trumansburg held on [REDACTED]; and further that such Resolution has been fully recorded in the Book of Minutes of the Village of Trumansburg Board of Trustees in my office.

In witness whereof, I have here unto set my hand at this ____ day of _____, 2021.

(signature)

Tammy Morse
Clerk

ABSTRACT OF AUDITED VOUCHERS

GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 014

TOTAL CLAIMS: \$12,646.51

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7300	CARDMEMBER SERVICES, TTC 4798-8177 5/21/SOV, speakers, cables	A1010.4	651.60	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC stickers, prime, ink	A1620.4	91.92	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC monthly web support	A1620.48	200.00	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC subscription for dump camera	A1640.4	120.00	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC masks,	A3120.47	33.21	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC flashlights, mount, batteries	A3120.48	251.77	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC Northern tool - supplies	A3410.2	1,082.87	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC batteries	A4540.44	49.99	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC subscription	A7510.4	74.90	23427 06/17/2021
7300	CARDMEMBER SERVICES, TTC recycling stickers & boxes	A7989.4	175.00	23427 06/17/2021
7301	CENTRAL NY NEWSPAPER 3921827/public hearing for subdivision of Aubles	A8020.4	54.50	23428 06/17/2021
7302	PETTY CASH 5/23/2019/car wash	A3120.4	6.00	
7303	KINNEY DRUGS INC 20152 4/21/syringes	A4540.47	204.58	
7304	THALER & THALER, PC court - Dodge	A3620.45	495.00	
7304	THALER & THALER, PC 41619/INHS upgrades	A8010.45	157.50	
7304	THALER & THALER, PC INHS upgrades	A8020.45	157.50	
7305	AIRGAS INC 9979717286/oxygen	A4540.47	24.46	
7306	BRITE COMPUTERS INV21886/tablet & setup	A3120.4	3,231.00	
7307	GUTHRIE 15001959 5/21/R Bally, K elmore	A3410.418	348.00	
7308	TRUMANSBURG CENTRAL SCHOOL diesel - may - dpw	A1640.42	113.80	
7308	TRUMANSBURG CENTRAL SCHOOL gas - may - dpw	A1640.42	541.14	
7308	TRUMANSBURG CENTRAL SCHOOL gas - May - pd	A3120.42	708.78	
7308	TRUMANSBURG CENTRAL SCHOOL diesel - May - fire	A3410.45	178.25	

ABSTRACT OF AUDITED VOUCHERS
GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 014

TOTAL CLAIMS: \$12,646.51

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7308	TRUMANSBURG CENTRAL SCHOOL 038-21/gas - May - fire	A3410.45	122.26	
7308	TRUMANSBURG CENTRAL SCHOOL diesel - May - ems	A4540.421	179.18	
7308	TRUMANSBURG CENTRAL SCHOOL gas - May - EMS	A4540.421	210.80	
7309	STOVER LUMBER INC 274196/screws	A1620.41	9.99	
7310	CAYUGA MEDICAL CENTER AT ITHAC 13-50876/B Snyder - renewal course	A4540.412	169.00	
7311	SHELTER POINT INSURANCE D0606823 20-21/disability & PFL	A3410.43	23.61	23438
7311	SHELTER POINT INSURANCE	A4540.451	1,109.42	06/28/2021 23438
7311	SHELTER POINT INSURANCE	A9055.8	1,227.44	06/28/2021 23438
7312	SV AUTO SUPPLY parts	A1640.4	6.10	06/28/2021
7312	SV AUTO SUPPLY supplies	A3620.4	4.19	
7312	SV AUTO SUPPLY 77150 5/21/parts	A4540.4	7.29	
7313	ZEP MANUFACTURING CO 9006122955/detergent	A3410.4	416.94	
7313	ZEP MANUFACTURING CO 9006218468/parts	A3410.42	208.52	
Total:			12,646.51	

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS
WATER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 014

TOTAL CLAIMS: \$829.14

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
2003	TRUMANSBURG CENTRAL SCHOOL 038-21A/diesel - may - dpw	F8320.42	75.86	
2004	THE WORDPRO 242230/water quality reports	F8320.4	251.00	
2005	NYS PARKS TF38/May 2021 NYSEG	F8320.41	172.91	
2006	SHELTER POINT INSURANCE D0606823 20-21/disability & PFL	F9055.8	329.37	11857 06/28/2021

Total:

829.14

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS
SEWER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 014

TOTAL CLAIMS: \$1,472.40

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
1682	THALER & THALER, PC 41619/sewer law	G1420.4	1,417.50	
1683	SHELTER POINT INSURANCE D0606823 20-21/disability & PFL	G9055.8	54.90	9703 06/28/2021

Total:

1,472.40

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

TRUST & AGENCY

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 014

TOTAL CLAIMS: \$525.65

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
730	INTERNAL REVENUE SERVICE Notice CP220/due from 9/30/2020 for form 941	TA28	525.65	2175 06/28/2021

Total:

525.65

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$178,129.27

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7311	NFPA INTERNATIONAL DE6-2491-1TX/annual membership	A3410.4	175.00	
7312	SANDY LIST 2021/historian	A7510.1	1,500.00	
7313	ULYSSES PHILOMATHIC LIBRARY 2021-22/budget disbursement	A7410.4	5,000.00	
7314	ULYSSES HISTORICAL SOCIETY 2021-22flashlights, mount, batteries	A7450.4	500.00	
7315	JEROME FIRE EQUIPMENT CO. INC 0205198-IN/parts	A3410.47	1,057.50	
7315	JEROME FIRE EQUIPMENT CO. INC 0205557-IN/parts	A3410.47	325.00	
7316	DRYDEN LAWN & RECREATION, INC 248985/hood for mower	A1640.4	357.59	
7317	MUNICIPAL EMERGENCY SERV INC IN1595011/hydratedting	A3410.47	365.44	
7317	MUNICIPAL EMERGENCY SERV INC IN1592180/hyrotesting	A3410.47	365.44	
7317	MUNICIPAL EMERGENCY SERV INC IN1587448/parttx	A3410.47	308.70	
7318	GORMAN ENTERPRISES 0114088-IN/parts	A3410.42	1,196.17	
7319	CARDMEMBER SERVICES, TTC 47988177 6/21/weedeater	A1640.2	290.63	23429 06/17/2021
7319	CARDMEMBER SERVICES, TTC clothing	A1640.4	485.49	23429 06/17/2021
7319	CARDMEMBER SERVICES, TTC coffee	A3120.4	64.17	23429 06/17/2021
7319	CARDMEMBER SERVICES, TTC pavillion reservation	A4540.4	57.25	23429 06/17/2021
7319	CARDMEMBER SERVICES, TTC office supplies	A4540.44	57.08	23429 06/17/2021
7320	TRUST & AGENCY payroll ending 6/6/21/treasurer	A1325.1	787.52	xfer 8 06/08/2021
7320	TRUST & AGENCY clerk	A1410.1	235.77	xfer 8 06/08/2021
7320	TRUST & AGENCY police	A3120.1	13,002.16	xfer 8 06/08/2021
7320	TRUST & AGENCY fire admin	A3410.1	432.65	xfer 8 06/08/2021
7320	TRUST & AGENCY code/fire inspection	A3620.1	1,168.38	xfer 8 06/08/2021
7320	TRUST & AGENCY ems fire admin	A4540.1	3,626.64	xfer 8 06/08/2021
7320	TRUST & AGENCY drivers/ems	A4540.1	25,869.19	xfer 8 06/08/2021

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GENERAL FUND

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TOMPKINS COUNTY, NEW YORK

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NUMBER 002

TOTAL CLAIMS: \$178,129.27

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Voucher #	Claimant	Account #	Amount	Check
7320	TRUST & AGENCY dpw admin	A5010.1	2,603.08	xfer 8 06/08/2021
7320	TRUST & AGENCY dpw laborer	A5110.1	3,467.91	xfer 8 06/08/2021
7320	TRUST & AGENCY zoning	A8010.1	1,168.37	xfer 8 06/08/2021
7320	TRUST & AGENCY fica/med	A9030.8	685.63	xfer 8 06/08/2021
7320	TRUST & AGENCY ems fica/med	A9030.81	2,210.98	xfer 8 06/08/2021
7320	TRUST & AGENCY fire fica/med	A9030.82	31.76	xfer 8 06/08/2021
7320	TRUST & AGENCY police fica/med	A9030.83	980.89	xfer 8 06/08/2021
7320	TRUST & AGENCY HI	A9060.8	6,004.66	xfer 8 06/08/2021
7320	TRUST & AGENCY ems HI	A9060.81	10,460.24	xfer 8 06/08/2021
7320	TRUST & AGENCY fire HI	A9060.82	243.02	xfer 8 06/08/2021
7320	TRUST & AGENCY Police HI	A9060.84	1,917.18	xfer 8 06/08/2021
7321	STOVER LUMBER INC 274844/screws	A1620.41	8.20	
7321	STOVER LUMBER INC 274776/parts for porch	A1620.41	37.79	
7321	STOVER LUMBER INC 274951/supplies	A7989.4	41.16	
7322	TRUMANSBURG HOME TELEPHONE CO 11567 7/21/387-5618	A1640.46	56.31	23430 06/17/2021
7322	TRUMANSBURG HOME TELEPHONE CO 16882 7/21/387-7131	A3410.46	123.55	23430 06/17/2021
7322	TRUMANSBURG HOME TELEPHONE CO	A4540.46	123.55	23430 06/17/2021
7323	BOUND TREE MEDICAL LLC 84091634/supplies	A4540.47	14.36	
7323	BOUND TREE MEDICAL LLC 84107911/supplies	A4540.47	161.34	
7323	BOUND TREE MEDICAL LLC 84102937/supplies	A4540.47	313.87	
7323	BOUND TREE MEDICAL LLC 84093046/supplies	A4540.47	334.10	
7323	BOUND TREE MEDICAL LLC 84096432/disinfectant	A4540.47	102.60	
7323	BOUND TREE MEDICAL LLC 84086253/supplies	A4540.47	94.77	

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TOMPKINS COUNTY, NEW YORK

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Voucher #	Claimant	Account #	Amount	Check
7323	BOUND TREE MEDICAL LLC 84104719/supplies	A4540.47	4.18	
7323	BOUND TREE MEDICAL LLC 84090073/supplies	A4540.47	345.81	
7323	BOUND TREE MEDICAL LLC 84093047/towelettes	A4540.47	53.37	
7324	TOSHIBA BUSINESS SOLUTIONS 5550563/copies & support	A1620.4	221.77	
7324	TOSHIBA BUSINESS SOLUTIONS 5542250/copies & support	A3410.4	10.48	
7324	TOSHIBA BUSINESS SOLUTIONS	A4540.4	10.48	
7325	STRYKER SALES CORP. 3414479M/bottle holder	A4540.417	157.95	
7325	STRYKER SALES CORP. 3414480M/bottle holder	A4540.417	157.95	
7326	ZOLL MEDICAL CORP INV00090379/chart support	A4540.4	158.05	
7326	ZOLL MEDICAL CORP 3301795/lifebands	A4540.47	356.25	
7326	ZOLL MEDICAL CORP 3304185/adhesive sensor	A4540.47	313.90	
7326	ZOLL MEDICAL CORP 3314493/CPR padz	A4540.47	243.33	
7327	MAGUIRE CHEVROLET INC 112643/20 honda inspection	A3620.4	69.95	
7328	HOSELTON CHEVROLET INC 3JUL21/lease on 19 tahoe	A9785.64	7,848.00	
7330	TRUST & AGENCY trustees	A1010.1	1,250.01	xfer22 06/22/2021
7330	TRUST & AGENCY dep mayor	A1010.11	625.00	xfer22 06/22/2021
7330	TRUST & AGENCY mayor	A1210.1	833.34	xfer22 06/22/2021
7330	TRUST & AGENCY payroll ending 6/20/21/treasurer	A1325.1	787.52	xfer22 06/22/2021
7330	TRUST & AGENCY clerk	A1410.1	471.52	xfer22 06/22/2021
7330	TRUST & AGENCY dpw clothing	A1640.4	1,000.00	xfer22 06/22/2021
7330	TRUST & AGENCY dpw phone	A1640.46	210.00	xfer22 06/22/2021
7330	TRUST & AGENCY police	A3120.1	17,707.23	xfer22 06/22/2021
7330	TRUST & AGENCY fire admin	A3410.1	668.40	xfer22 06/22/2021

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Voucher #	Claimant	Account #	Amount	Check
7330	TRUST & AGENCY code/fire inspection	A3620.1	1,226.94	xfer22 06/22/2021
7330	TRUST & AGENCY code phoen	A3620.4	37.50	xfer22 06/22/2021
7330	TRUST & AGENCY ems	A4540.1	21,929.90	xfer22 06/22/2021
7330	TRUST & AGENCY ems admin	A4540.1	4,333.98	xfer22 06/22/2021
7330	TRUST & AGENCY ems clothing	A4540.419	4,250.00	xfer22 06/22/2021
7330	TRUST & AGENCY dpw admin	A5010.1	536.08	xfer22 06/22/2021
7330	TRUST & AGENCY dpw laborers	A5110.1	3,991.43	xfer22 06/22/2021
7330	TRUST & AGENCY zoning	A8010.1	1,226.92	xfer22 06/22/2021
7330	TRUST & AGENCY zoning phone	A8010.4	37.50	xfer22 06/22/2021
7330	TRUST & AGENCY fica/med	A9030.8	906.42	xfer22 06/22/2021
7330	TRUST & AGENCY ems fica/med	A9030.81	2,269.17	xfer22 06/22/2021
7330	TRUST & AGENCY fire fica/med	A9030.82	50.23	xfer22 06/22/2021
7330	TRUST & AGENCY police fica/med	A9030.83	1,347.48	xfer22 06/22/2021
7331	STAPLES CREDIT PLAN 2854351881/floor mat	A3620.4	27.48	23432 06/28/2021
7332	MRB GROUP 39863/planning & engineering grant	A1440.4	642.50	
7333	CHRISTOPHER WOLFF 6/14/21/sign for farmer mkt	A7989.4	500.00	
7334	GALLS, LLC 18510567/hemming	A3120.48	172.20	
7334	GALLS, LLC 18551890/name tag	A3120.48	27.16	
7335	AXON ENTERPRISE INC SI 1745467/tazer pmt	A3120.4	792.00	
7336	DEBBIE BILTONEN 6/16/21/copies	A7989.4	49.30	
7337	FIRSTLIGHT FIBER internet	A1620.4	50.00	23433 06/28/2021
7337	FIRSTLIGHT FIBER 17702010 7/21/387-6501	A1620.47	77.31	23433 06/28/2021
7337	FIRSTLIGHT FIBER 17702011 7/21/387-6505	A3120.46	152.08	23433 06/28/2021

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GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

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NUMBER 002

TOTAL CLAIMS: \$178,129.27

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7338	HEIDI MORSE June 2021/cleaning	A1620.1	400.00	
7339	B. JOSEPH NELSON 7/2021/HI reimbursement	A9060.84	508.33	
7340	NATALIE BARIS 6/2021/FM manager	A7989.4	833.33	
7341	AT&T 8244584227x06242021/227-1091	A3410.46	31.67	23434 06/28/2021
7342	B&W SUPPLY 502218/towel, cleaner, dustpan, spray	A3410.416	60.47	
7342	B&W SUPPLY	A4540.416	60.47	
7343	JCSMITH INC 1548666/signs	A3310.4	392.50	
7343	JCSMITH INC 1550033/street signs	A3310.4	247.00	
7344	AT&T mifir	A3120.4	114.69	23435 06/28/2021
7344	AT&T 287290586385x06192021/cells phones	A3120.46	234.62	23435 06/28/2021
7344	AT&T credit	A3120.46	-116.36	23435 06/28/2021
7344	AT&T credit	A4540.46	-43.04	23435 06/28/2021
7344	AT&T cell phones	A4540.46	128.71	23435 06/28/2021
7345	KNOX COMPANY INV02490586/parts	A3410.2	495.72	
7346	LEAH GRADY SAYVETZ 6/24/21/MUSIC 6/9/21	A7989.41	150.00	
7347	SHELTER POINT INSURANCE D0606823 21-22/disability & PFL	A3410.43	23.61	23439 06/28/2021
7347	SHELTER POINT INSURANCE	A4540.451	1,109.42	23439 06/28/2021
7347	SHELTER POINT INSURANCE	A9055.8	1,227.44	23439 06/28/2021
7348	TRUMANSBURG COMMUNITY REC CTR 21-22/budgeted	A7140.4	500.00	
7349	NYS ELECTRIC & GAS 10014134018 7/21/56 e main st	A1620.42	478.24	
7349	NYS ELECTRIC & GAS 10011561312 7/21/74 w main st	A3410.41	432.89	
7349	NYS ELECTRIC & GAS 10043399780 7/21/30 halsey st	A3520.4	90.17	
7349	NYS ELECTRIC & GAS	A4540.41	432.89	

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GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$178,129.27

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7349	NYS ELECTRIC & GAS 10033584623 7/21/69 e main st	A5182.4	54.78	
7349	NYS ELECTRIC & GAS 10014191802 7/21/56 e main st west	A5182.4	19.01	
7349	NYS ELECTRIC & GAS 10031836157 7/21/Rt 96 street lights	A5182.4	57.94	
7349	NYS ELECTRIC & GAS 10033584607 7/21/15 e main st	A5182.4	101.99	
7349	NYS ELECTRIC & GAS 10014191794 7/21/56 e main st east	A5182.4	1.06	
7349	NYS ELECTRIC & GAS 10025580050 7/21/1 corey st	A7989.4	2.56	
7350	LOWE'S COMPANIES INC 902388/supplies for porch	A1620.41	91.14	
7350	LOWE'S COMPANIES INC 902671/supplies for police steps & porch	A1620.41	348.05	
7351	TRUMANSBURG SHURSAVE 9062 6/21/supplies for porch work	A1620.4	35.04	
7352	PITNEY BOWES 8000-2146 6/21/tax bills	A1620.4	171.09	
7353	SV AUTO SUPPLY 77150 6/21/parts	A1640.4	129.14	
7353	SV AUTO SUPPLY parts	A3410.42	456.10	
7354	TRUMANSBURG CONSERVATORY OF FN 6/2021/DATE PLAQUE for village hall	A1620.4	100.00	
7355	MAGUIRE FORD LINCOLN MERCURY 124982/19 tahoe - inspection	A3120.421	21.00	
7356	THE WORDPRO 242433/CPZR cards	A8010.4	83.87	
7357	AIRGAS INC 9114843017/oxygen	A4540.47	215.17	
7358	PAYCHEX OF NEW YORK LLC 2021070100 6/21/June payroll	A1620.4	1,100.40	
7359	VERIZON WIRELESS 9882619192/mifi	A4540.4	52.00	
7360	JEFFREY A BURNS 6/1/treasurer help at home	A1620.4	45.00	
7360	JEFFREY A BURNS 6/14 & 17/back up error	A1620.44	45.00	
7360	JEFFREY A BURNS 6/30/back up error	A1620.44	22.50	
7360	JEFFREY A BURNS 20210079/back up	A1620.44	65.00	
7360	JEFFREY A BURNS 6/18/create profile for new officer and delete officers	A3120.4	90.00	

ABSTRACT OF AUDITED VOUCHERS
GENERAL FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$178,129.27

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
7360	JEFFREY A BURNS back up	A3120.4	45.00	
7360	JEFFREY A BURNS back up	A3410.4	22.50	
7360	JEFFREY A BURNS 6/8/server down	A3410.4	56.25	
7360	JEFFREY A BURNS 6/25/hdmi cable	A3620.4	35.00	
7360	JEFFREY A BURNS 6/15/ems recovered files & install office	A4540.4	45.00	
7360	JEFFREY A BURNS	A4540.4	22.50	
7360	JEFFREY A BURNS	A4540.4	56.25	
7360	JEFFREY A BURNS 6/12/deleted file for paramedic	A4540.4	45.00	
7361	SALLY RAMIREZ 6/16/21/Musician	A7989.41	150.00	

Total:

178,129.27

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

EMS BILLING

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$15,504.02

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
514	MEDEX BILLING, INC 2021-6/service fees	AM4540.491	910.00	
515	VILLAGE OF TRUMANSBURG June 2021/recieveables	AM9901.4	8,253.26	
515	VILLAGE OF TRUMANSBURG mutual aid	AM9901.4	356.68	
516	TOWN OF ULYSSES June 2021/recievables	AM4540.492	5,984.08	

Total:

15,504.02

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

WATER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$25,627.05

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
2005	TRUST & AGENCY payroll ending 6/6/21/treasurer	F1325.1	393.76	xfer8 06/08/2021
2005	TRUST & AGENCY clerk	F1410.1	943.03	xfer8 06/08/2021
2005	TRUST & AGENCY water admin	F8310.1	342.85	xfer8 06/08/2021
2005	TRUST & AGENCY water laborers	F8320.1	2,335.15	xfer8 06/08/2021
2005	TRUST & AGENCY fica/med	F9030.8	289.26	xfer8 06/08/2021
2005	TRUST & AGENCY HI	F9060.8	4,091.00	xfer8 06/08/2021
2006	TRUMANSBURG HOME TELEPHONE CO 11474 7/21/387-5834	F8320.46	109.80	11852 06/17/2021
2006	TRUMANSBURG HOME TELEPHONE CO 27157 7/21/387-4145	F8320.46	93.41	11852 06/17/2021
2007	AT&T credit	F8320.46	-120.40	11853 06/28/2021
2007	AT&T 824584227x06242021/computes & miti	F8320.46	306.92	11853 06/28/2021
2008	TRUST & AGENCY treasurer	F1325.1	393.76	xfer22 06/22/2021
2008	TRUST & AGENCY clerk	F1410.1	1,886.08	xfer22 06/22/2021
2008	TRUST & AGENCY payroll ending 6/20/21/water admin	F8310.1	1,876.28	xfer22 06/22/2021
2008	TRUST & AGENCY water laborers	F8320.1	2,280.32	xfer22 06/22/2021
2008	TRUST & AGENCY dpw clothing	F8320.4	850.00	xfer22 06/22/2021
2008	TRUST & AGENCY dpw phone	F8320.46	195.00	xfer22 06/22/2021
2008	TRUST & AGENCY fica/med	F9030.8	550.95	xfer22 06/22/2021
2010	MICROBAC LAB INC PPIF02821/water testing	F8320.4	600.00	
2010	MICROBAC LAB INC PPIF02820/water testing	F8320.4	600.00	
2010	MICROBAC LAB INC PPIF02818/water testing	F8320.4	600.00	
2011	MRB GROUP 39860/water & sewer capital plan	F1440.4	704.80	
2012	SHELTER POINT INSURANCE D0606823 21-22/disability & PFL	F9055.8	329.37	11858 06/28/2021
2013	PAYCHEX OF NEW YORK LLC 2021070100 6/21/June payroll	F8310.4	153.54	

ABSTRACT OF AUDITED VOUCHERS

WATER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$25,627.05

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
2014	PITNEY BOWES 8000-2146 6/21/water reports	F8320.4	604.41	
2015	NYS ELECTRIC & GAS 10013166201 7/21/Rt 89 pump station	F8320.41	948.67	
2015	NYS ELECTRIC & GAS 10016650987 7/21/indian fort rd	F8320.41	125.35	
2015	NYS ELECTRIC & GAS 10011562039 7/21/30 halsey st	F8320.41	96.81	
2015	NYS ELECTRIC & GAS 10011561361 7/21/1 corey st	F8320.41	576.28	
2015	NYS ELECTRIC & GAS 10042414960 7/21/taughannock rd	F8320.41	1,285.19	
2015	NYS ELECTRIC & GAS 10013166243 7/21/Frontenac Rd	F8320.41	1,046.77	
2016	LOWE'S SOFT WATER SERVICE INC 211942/chlorine	F8320.4	213.28	
2017	BADGER METER, INC 80075789/monthly service	F8320.4	75.41	
2018	DEDICATION EXCAVATION 231/water break - elm st	F8320.4	850.00	

Total: 25,627.05

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

SEWER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$14,647.74

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
1683	TRUST & AGENCY payroll ending 6/6/21/treasurer	G1325.1	196.88	xfer8 06/08/2021
1683	TRUST & AGENCY clerk	G1410.1	235.75	xfer8 06/08/2021
1683	TRUST & AGENCY sewer admin	G8110.1	110.92	xfer8 06/08/2021
1683	TRUST & AGENCY sewer laborers	G8120.1	410.21	xfer8 06/08/2021
1683	TRUST & AGENCY fica.med	G9030.8	69.09	xfer8 06/08/2021
1683	TRUST & AGENCY HI	G9060.8	835.01	xfer8 06/08/2021
1684	TRUMANSBURG HOME TELEPHONE CO 11874 7/21/387-5657	G8130.46	97.76	9699 06/17/2021
1685	MRB GROUP 39860/water & sewer capital plan	G8130.4	704.80	
1687	TRUST & AGENCY treasurer	G1325.1	196.88	xfer22 06/22/2021
1687	TRUST & AGENCY clerk	G1410.1	471.52	xfer22 06/22/2021
1687	TRUST & AGENCY payroll ending 6/20/21/sewer admin	G8110.1	268.03	xfer22 06/22/2021
1687	TRUST & AGENCY sewer laborers	G8120.1	435.02	xfer22 06/22/2021
1687	TRUST & AGENCY dpw clothing	G8130.4	150.00	xfer22 06/22/2021
1687	TRUST & AGENCY dpw phone	G8130.46	45.00	xfer22 06/22/2021
1687	TRUST & AGENCY fica/med	G9030.8	115.69	xfer22 06/22/2021
1688	P&S EXCAVATING LLC 3282/topsoil	G8130.4	769.92	
1689	STOVER LUMBER INC 275585/spray	G8130.4	-11.98	
1689	STOVER LUMBER INC 275586/broom	G8130.4	14.99	
1690	RL STONE COMPANY INC 4765195/flow meter repair	G8130.4	425.50	
1691	MARYLAND BIOCHEMICAL CO., INC 6PP1099/bio blocks	G8130.4	339.88	
1692	SHELTER POINT INSURANCE D0606823 21-22/disability & PFL	G9055.8	54.87	9704 06/28/2021
1693	PAYCHEX OF NEW YORK LLC 2021070100 6/21/June payroll	G8110.4	25.59	
1694	NYS ELECTRIC & GAS 10037128609 7/21/4074 south st pump station	G8130.41	30.85	

ABSTRACT OF AUDITED VOUCHERS

SEWER FUND

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$14,647.74

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
1694	NYS ELECTRIC & GAS 10018408160 7/21/28 prospect st	G8130.41	27.11	
1695	CAMDEN GROUP 6092/testing	G8130.4	202.00	
1695	CAMDEN GROUP 6065/monthly operations	G8131.4	7,600.00	
1696	SUPERIOR SEPTIC LLC 12222s/6/28	G8130.4	826.45	

Total:

14,647.74

To the Treasurer of the above VILLAGE:

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of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

ABSTRACT OF AUDITED VOUCHERS

TRUST & AGENCY

VILLAGE OF TRUMANSBURG

TOMPKINS COUNTY, NEW YORK

DATE OF AUDIT: 07/12/2021

NUMBER 002

TOTAL CLAIMS: \$4,990.27

(Original to Village Treasurer - Duplicate to be retained by Village Clerk or Auditor)

Voucher #	Claimant	Account #	Amount	Check
725	AFLAC 6/9/21/payroll ending 6/6/21	TA12	347.46	2178 06/28/2021
725	AFLAC 6/23/21/payroll ending 6/20/21	TA12	347.46	2178 06/28/2021
726	THE NYS DEFERRED COMP PLAN 6/9/21/payroll ending 6/6/21	TA17	451.93	2172 06/17/2021
727	TEAMSTERS LOCAL 317 6/23/21/payroll ending 6/20/21	TA24	111.00	2177 06/28/2021
727	TEAMSTERS LOCAL 317 6/9/21/payroll ending 6/6/21	TA24	111.00	2177 06/28/2021
728	TIMOTHY RUMSEY Payroll ending 6/20/21/correction of incorrect rate	TA10	414.98	2173 06/23/2021
729	EXCELLUS HEALTH PLAN 59640 7/21/dental - 7/2021	TA20	1,861.10	2176 06/28/2021
730	THE NYS DEFERRED COMP PLAN 212319 6/20/21/payroll ending 6/20/21	TA17	507.24	2179 06/28/2021
731	CASEY LINCOLN 6/23/21/phone reimbursement	TA10	138.52	2174 06/21/2021
732	DANA SWICK 7/7/21/missing hours	TA10	162.31	2180 07/07/2021
733	PATRICK MASTERS 7/7/21/missing hours	TA10	165.78	2181 07/07/2021
734	CASEY LINCOLN 7/7/21/missing hours	TA10	185.96	2182 07/07/2021
735	DUSTIN VANDERZEE 7/7/21/missing hours	TA10	185.53	2183 07/07/2021
Total:			4,990.27	

To the Treasurer of the above VILLAGE:

The above listed claims having been presented to the _____
of the above-named Village, and having been duly audited and allowed in the amounts as shown on the
above-mentioned date, you are hereby authorized and directed to pay each of the listed claimants the amount
allowed upon his claim appearing opposite his name.

In Witness Whereof, I have hereunto set my hand as _____ at

the above Village this _____ day of _____, 20 _____

Signature

WHEREAS, the property owned by Auble's Mobile Home Park, LLC at 4380 Seneca Rd., Trumansburg, NY 14886 (hereinafter: "MHP"), and adjacent vacant parcels, were annexed into the Village of Trumansburg in 2007; and,

WHEREAS, a condition of said annexation required the private roadways within the MHP to be improved to "Village specifications" by December 2020; and,

WHEREAS, such improvements have yet to be completed; and,

WHEREAS, the MHP, and adjacent parcels, are under contract for pending sale to Ithaca Neighborhood Housing Services (INHS); and,

WHEREAS, INHS has requested an extension on the requirement to improve the roads within the MHP; and,

WHEREAS, the Village of Trumansburg is in the process of revising its Comprehensive Plan which will, in turn, lead to a revision of the Village Zoning Ordinance; and,

WHEREAS, the pending revision of the Village Zoning Ordinance will include clarification of the definition of "Village specifications" with respect to Village roads; and,

WHEREAS, the Village of Trumansburg Board of Trustees believes it to be in the best interests of the Village and the residents of the MHP to accommodate this request by INHS; now therefore,

BE IT RESOLVED, that the Village of Trumansburg Board of Trustees grants the request made by INHS to extend the deadline for road improvements within the MHP; and be it further

RESOLVED, that the deadline for road improvements within the MHP shall be no sooner than three (3) years from the completion of the Village's pending Zoning revision, with Village roadway specifications contained therein.

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

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

A. Project and Applicant/Sponsor Information.

Name of Action or Project:		
Project Location (describe, and attach a general location map):		
Brief Description of Proposed Action (include purpose or need):		
Name of Applicant/Sponsor:		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Project Contact (if not same as sponsor; give name and title/role):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Counsel, Town Board, or Village Board of Trustees <input type="checkbox"/> Yes <input type="checkbox"/> No		
b. City, Town or Village Planning Board or Commission <input type="checkbox"/> Yes <input type="checkbox"/> No		
c. City, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input type="checkbox"/> No		
d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
i. Coastal Resources. <i>i.</i> Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>ii.</i> Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>iii.</i> Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? ☐ Yes ☐ No

- **If Yes**, complete sections C, F and G.
- **If No**, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? ☐ Yes ☐ No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? ☐ Yes ☐ No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) ☐ Yes ☐ No

If Yes, identify the plan(s):

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? ☐ Yes ☐ No

If Yes, identify the plan(s):

C.3. Zoning

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

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

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

If Yes,

i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

a. In what school district is the project site located? _____

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

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

d. What parks serve the project site?

D. Project Details

D.1. Proposed and Potential Development

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

b. 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

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

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

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

If Yes,

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

ii. Is a cluster/conservation layout proposed?

☐ Yes ☐ No

iii. Number of lots proposed? _____

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

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

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

ii. If Yes:

- Total number of phases anticipated _____

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

- Anticipated completion date of final phase _____ month _____ year

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

f. Does the project include new residential uses? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, show numbers of units proposed.				
	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion	_____	_____	_____	_____
of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes,	
i. Total number of structures _____	
ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length	
iii. Approximate extent of building space to be heated or cooled: _____ square feet	

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes,	
i. Purpose of the impoundment: _____	
ii. If a water impoundment, the principal source of the water: <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> Other specify:	

iii. If other than water, identify the type of impounded/contained liquids and their source.	

iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres	
v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length	
vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):	

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)	
If Yes:	
i. What is the purpose of the excavation or dredging? _____	
ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?	
<ul style="list-style-type: none"> • Volume (specify tons or cubic yards): _____ • Over what duration of time? _____ 	
iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.	

iv. Will there be onsite dewatering or processing of excavated materials? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, describe. _____	

v. What is the total area to be dredged or excavated? _____ acres	
vi. What is the maximum area to be worked at any one time? _____ acres	
vii. What would be the maximum depth of excavation or dredging? _____ feet	
viii. Will the excavation require blasting? <input type="checkbox"/> Yes <input type="checkbox"/> No	
ix. Summarize site reclamation goals and plan: _____	

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes:	
i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____	

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

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes ☐ No ☐
If Yes, describe: _____

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

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

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

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

i. Total anticipated water usage/demand per day: _____ gallons/day

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

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

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

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

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

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

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

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

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

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

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

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

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

<ul style="list-style-type: none"> • Do existing sewer lines serve the project site? _____ • Will a line extension within an existing district be necessary to serve the project? _____ <p>If Yes:</p> <ul style="list-style-type: none"> • Describe extensions or capacity expansions proposed to serve this project: _____ 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? _____	
If Yes: <ul style="list-style-type: none"> • Applicant/sponsor for new district: _____ • Date application submitted or anticipated: _____ • What is the receiving water for the wastewater discharge? _____ 	
v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans): _____	
vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? _____	
If Yes: <ul style="list-style-type: none"> i. How much impervious surface will the project create in relation to total size of project parcel? _____ Square feet or _____ acres (impervious surface) _____ Square feet or _____ acres (parcel size) ii. Describe types of new point sources. _____ 	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)? _____	
<ul style="list-style-type: none"> • If to surface waters, identify receiving water bodies or wetlands: _____ 	
<ul style="list-style-type: none"> • Will stormwater runoff flow to adjacent properties? _____ 	
iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? _____	
f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? _____	
If Yes, identify: <ul style="list-style-type: none"> i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) _____ ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) _____ iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) _____ 	
g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? _____	
If Yes: <ul style="list-style-type: none"> i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) _____ ii. In addition to emissions as calculated in the application, the project will generate: <ul style="list-style-type: none"> • _____ Tons/year (short tons) of Carbon Dioxide (CO₂) • _____ Tons/year (short tons) of Nitrous Oxide (N₂O) • _____ Tons/year (short tons) of Perfluorocarbons (PFCs) • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆) • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs) • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs) 	

<p>h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate methane generation in tons/year (metric): _____</p> <p>ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____</p>			
<p>i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____</p>			
<p>j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. When is the peak traffic expected (Check all that apply): <input type="checkbox"/> Morning <input type="checkbox"/> Evening <input type="checkbox"/> Weekend <input type="checkbox"/> Randomly between hours of _____ to _____.</p> <p>ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____</p> <p>iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____</p> <p>iv. Does the proposed action include any shared use parking? Yes No</p> <p>v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____</p> <p>vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate annual electricity demand during operation of the proposed action: _____</p> <p>ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____</p> <p>iii. Will the proposed action require a new, or an upgrade, to an existing substation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>l. Hours of operation. Answer all items which apply.</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> <td style="width: 50%; vertical-align: top;"> <p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> </tr> </table>		<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____
<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ 		

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>n. Will the proposed action have outdoor lighting? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>_____</p> <p>_____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p> <p>_____</p> <p>_____</p>	
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p> <p>_____</p>	
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ tons per _____ (unit of time) • Operation : _____ tons per _____ (unit of time) <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: _____ _____ • Operation: _____ _____ <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • Construction: _____ _____ • Operation: _____ _____ 	

s. Does the proposed action include construction or modification of a solid waste management facility? ☐ Yes ☐ No
 If Yes:
 i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____
 ii. Anticipated rate of disposal/processing:
 • _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
 • _____ Tons/hour, if combustion or thermal treatment
 iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? ☐ Yes ☐ No
 If Yes:
 i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

 ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

 iii. Specify amount to be handled or generated _____ tons/month
 iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

 v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? ☐ Yes ☐ No
 If Yes: provide name and location of facility: _____

 If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site			
a. Existing land uses. i. Check all uses that occur on, adjoining and near the project site. <input type="checkbox"/> Urban <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Rural (non-farm) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ ii. If mix of uses, generally describe: _____ _____			
b. Land uses and coverytypes on the project site.			
Land use or Coverytype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces			
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____ _____			

c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, i. Identify Facilities: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Does the project site contain an existing dam? If Yes: i. Dimensions of the dam and impoundment: <ul style="list-style-type: none"> • Dam height: _____ feet • Dam length: _____ feet • Surface area: _____ acres • Volume impounded: _____ gallons OR acre-feet ii. Dam's existing hazard classification: _____ iii. Provide date and summarize results of last inspection: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? If Yes: i. Has the facility been formally closed? <ul style="list-style-type: none"> • If yes, cite sources/documentation: _____ ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;"> <input type="checkbox"/> Yes – Spills Incidents database <input type="checkbox"/> Yes – Environmental Site Remediation database <input type="checkbox"/> Neither database </div> <div style="width: 50%;"> Provide DEC ID number(s): _____ Provide DEC ID number(s): _____ </div> </div> ii. If site has been subject of RCRA corrective activities, describe control measures: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? If yes, provide DEC ID number(s): _____ iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

v. Is the project site subject to an institutional control limiting property uses? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> • If yes, DEC site ID number: _____ • Describe the type of institutional control (e.g., deed restriction or easement): _____ • Describe any use limitations: _____ • Describe any engineering controls: _____ • Will the project affect the institutional or engineering controls in place? <input type="checkbox"/> Yes <input type="checkbox"/> No • Explain: _____ _____ 	
E.2. Natural Resources On or Near Project Site	
a. What is the average depth to bedrock on the project site? _____ feet	
b. Are there bedrock outcroppings on the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %	
c. Predominant soil type(s) present on project site: <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____ %</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____ %</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____ %</div> </div>	
d. What is the average depth to the water table on the project site? Average: _____ feet	
e. Drainage status of project site soils: <input type="checkbox"/> Well Drained: _____ % of site <input type="checkbox"/> Moderately Well Drained: _____ % of site <input type="checkbox"/> Poorly Drained: _____ % of site	
f. Approximate proportion of proposed action site with slopes: <input type="checkbox"/> 0-10%: _____ % of site <input type="checkbox"/> 10-15%: _____ % of site <input type="checkbox"/> 15% or greater: _____ % of site	
g. Are there any unique geologic features on the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, describe: _____ _____	
h. Surface water features. <div style="margin-top: 10px;"> i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="margin-top: 5px;"> ii. Do any wetlands or other waterbodies adjoin the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="margin-top: 5px;"> If Yes to either <i>i</i> or <i>ii</i>, continue. If No, skip to E.2.i. </div> <div style="margin-top: 5px;"> iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="margin-top: 5px;"> iv. For each identified regulated wetland and waterbody on the project site, provide the following information: <ul style="list-style-type: none"> • Streams: Name _____ Classification _____ • Lakes or Ponds: Name _____ Classification _____ • Wetlands: Name _____ Approximate Size _____ • Wetland No. (if regulated by DEC) _____ </div>	

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____</p> <p>_____</p> <p>_____</p>	
<p>n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe the habitat/community (composition, function, and basis for designation): _____</p> <p style="margin-left: 20px;">ii. Source(s) of description or evaluation: _____</p> <p style="margin-left: 20px;">iii. Extent of community/habitat:</p> <ul style="list-style-type: none"> • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres 	
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing (endangered or threatened): _____</p> <p>_____</p> <p>_____</p>	
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing: _____</p> <p>_____</p> <p>_____</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, give a brief description of how the proposed action may affect that use: _____</p> <p>_____</p> <p>_____</p>	
<p>E.3. Designated Public Resources On or Near Project Site</p>	
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="margin-left: 20px;">i. If Yes: acreage(s) on project site? _____</p> <p style="margin-left: 20px;">ii. Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature</p> <p style="margin-left: 20px;">ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____</p> <p>_____</p> <p>_____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. CEA name: _____</p> <p style="margin-left: 20px;">ii. Basis for designation: _____</p> <p style="margin-left: 20px;">iii. Designating agency and date: _____</p>	

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District ii. Name: _____ iii. Brief description of attributes on which listing is based: _____
f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? <input type="checkbox"/> Yes <input type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: i. Describe possible resource(s): _____ ii. Basis for identification: _____
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: i. Identify resource: _____ ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____ iii. Distance between project and resource: _____ miles.
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: i. Identify the name of the river and its designation: _____ ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? <input type="checkbox"/> Yes <input type="checkbox"/> No

F. Additional Information

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

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

G. Verification

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

Applicant/Sponsor Name _____ Date _____

Signature _____ Title _____