

# APPLICATION FOR SPECIAL PERMIT

**Town of Union Department of Planning**

**3111 East Main Street, Endwell, New York 13760**

**Phone: 607-786-2926 ❖ Fax: 607-748-0041 ❖ E-Mail: m.lane@townofunion.com**

## Property Owner Information

OWNER NAME: Town of Union

OWNER ADDRESS: 3111 E. Main Street

OWNER CITY, ST., ZIP: Endwell, NY 13760

OWNER HOME PHONE #: \_\_\_\_\_

OWNER WORK PHONE #: 607-786-2995

OWNER FAX #: \_\_\_\_\_

OWNER E-MAIL: supervisor@townofunion.com

## Contact Information (If Different Than Owner)

CONTACT NAME: Marina Lane

CONTACT ADDRESS: \_\_\_\_\_

CONTACT CITY, ST., ZIP: \_\_\_\_\_

CONTACT HOME PHONE #: \_\_\_\_\_

CONTACT WORK PHONE #: 607-786-2926

CONTACT FAX #: \_\_\_\_\_

CONTACT E-MAIL: m.lane@townofunion.com

SUBJECT PROPERTY ADDRESS: 340 Scarborough Drive

SUBJECT PROPERTY TAX MAP #: DISTRICT: 157 SECTION: 08 BLOCK: 7 LOT: 19

☒ FLOOD PLAIN DEVELOPMENT ☐ CELLULAR TOWER ☐ SPECIAL USE PERMIT ☐ OTHER

## PURPOSE OF REQUEST

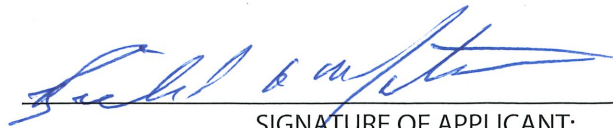
The flood control pump station is at the end of life and requires evaluation and upgrades as necessary. An elevated control panel and generator are to be installed outside of the existing building structure which houses the actual pump.

SPECIAL PERMIT SECTION OF ZONING ORDINANCE: 300-66 Special Use Permits / 121-10.4 Flood Fringe Provisions

PREVIOUS SPECIAL PERMIT APPLICATIONS/APPEALS: N.A.

**The owner of the above referenced property requests the review and approval of a Special Permit by the Town of Union Planning Board.**

DATE: 3/13/22

  
SIGNATURE OF APPLICANT:

\$100 AQUIFER, SPECIAL PERMIT, OR FLOODPLAIN APPLICATION FEE PAID DATE: \_\_\_\_\_

\$5,000 NEW CELL TOWER APPLICATION FEE PAID DATE: \_\_\_\_\_

\$75 NEW MICRO TOWER APPLICATION FEE PAID DATE: \_\_\_\_\_

# Short Environmental Assessment Form

## Part 1 - Project Information

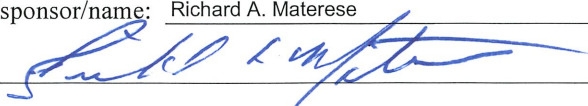
### Instructions for Completing

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

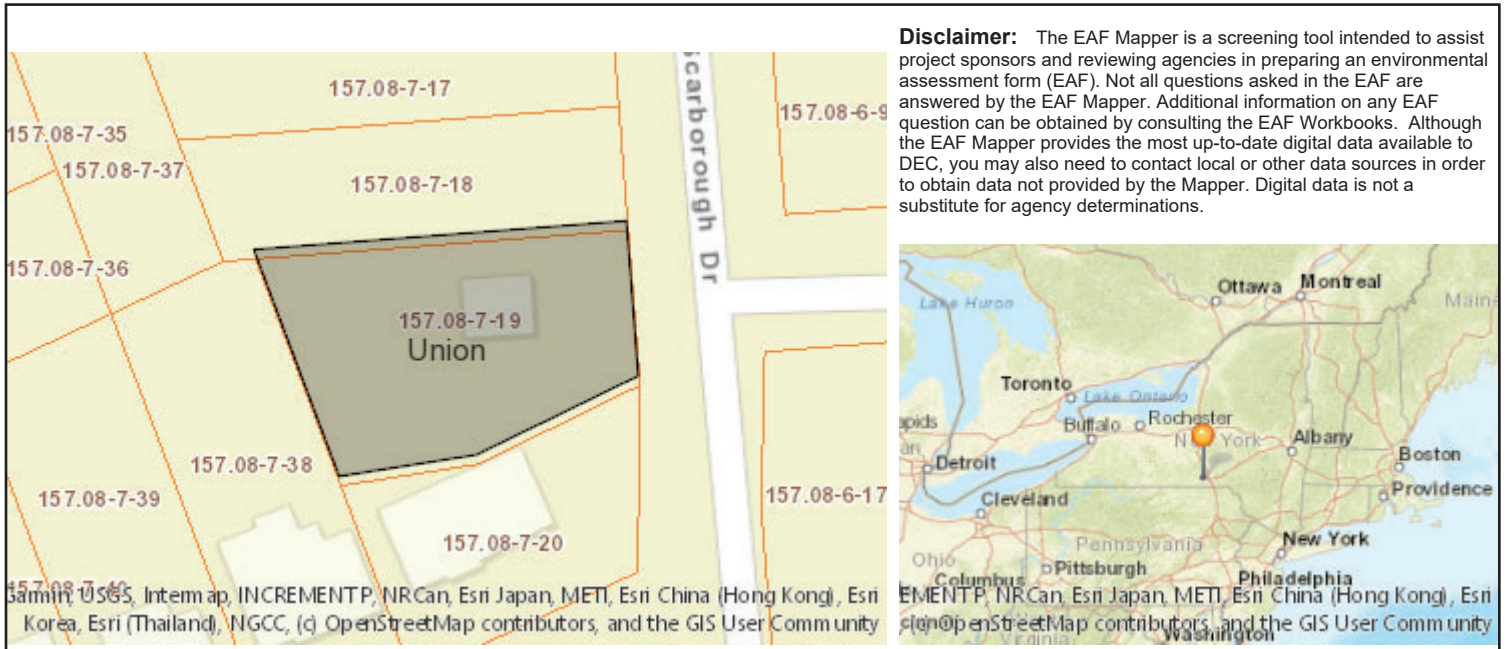
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

<b>Part 1 – Project and Sponsor Information</b>			
Town of Union - American Rescue Plan Act Infrastructure Improvements			
Name of Action or Project: Scarborough Dr. Flood Pump Station Upgrades and Installation of Emergency Backup Generator			
Project Location (describe, and attach a location map): 340 Scarborough Dr., Endwell, NY 13760			
Brief Description of Proposed Action: The existing Flood Station is at the end of its useful life. An engineering analysis of the station is needed to determine if replacement or upgrade is appropriate at this time. The station requires an appropriately sized elevated emergency backup generator, with elevated controls.			
Name of Applicant or Sponsor: Town of Union		Telephone: 607-786-2995 E-Mail: supervisor@townofunion.com	
Address: 3111 E. Main St.			
City/PO: Endwell		State: NY	Zip Code: 13760
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: United States Treasury, American Rescue Plan Act (ARPA)		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		0.17 acres	
b. Total acreage to be physically disturbed?		0.03 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		0.17 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): <input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ Not Applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ Not Applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. 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"/>	<input checked="" type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered? Bald Eagle	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____ 704038 - the Endicott Area-Wide Investigation. This site is not affected by contamination from the remediation site.	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>  Applicant/sponsor/name: <u>Richard A. Materese</u> Date: <u>3/13/2022</u> Signature: <u></u> Title: <u>Town of Union Supervisor</u>		





**Disclaimer:** The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.

Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Bald Eagle
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	Yes