ADIRONDACK PARK AGENCY **Division of** **Regulatory Programs** PO Box 99, 1133 NYS Route 86 Ray Brook, New York 12977 Telephone (518) 891- 4050 www.apa.ny.gov	NEW YORK STATE OF OPPORTUNITY. | Adirondack Park Agency	**APPLICATION FOR STATE AGENCY PROJECTS** **General Information Request**

Applicability: This General Information Request, together with a Supplemental Information Request, is the application for an Adirondack Park Agency permit/order **to be used by any State Agency which intends to undertake new land use and development on State or private land within the Adirondack Park.** The General Information Request seeks general information about the project site and proposal while the Supplemental Information Request is specific to the type of project being proposed. The Agency may also request pertinent additional information based on the information contained in the application. See APA Act Section 814 and Agency Rules and Regulations (9 NYCRR) Part 579 for more detail on the requirements for Agency review of State Agency projects.

Instructions: Please answer all of the questions in each numbered section and provide all applicable attachments. Type or print clearly in ink. **Submit <u>three</u> completed copies of the General Information Request, this Supplemental Information Request, and all required attachments to the Agency at the above address**. A site visit by Agency staff will also be required. The Adirondack Park Agency Act provides that the time period for review of the proposed project will not begin until the Agency determines that the application is complete. If the application is not complete, a request for missing and/or additional information will be issued within 15 days of receipt of the application, indicating what information is still required for a complete application. The proposed project may not be undertaken until a permit/order has been issued by the Agency.

Assistance: For assistance in completing this application or to request a pre-application meeting, please contact the Agency's Regulatory Programs division at the above address/telephone number and/or refer to the Agency's website.

Note: For those project requiring a Section 814 Order, the completed General Information Request and appropriate Supplemental Information Request will be considered a "Notice of Intent to Undertake Land Use or Development Within the Adirondack Park."

1. Project Sponsor(s)*:

Name(s): _____

_____

Mailing Address: _____

_____

_____

Telephone (Daytime): _____

Fax/E-mail: _____

2. Current Property Owner(s):** (if different than Project Sponsor)

Name(s): _____

_____

Mailing Address: _____

_____

_____

Telephone (Daytime): _____

Fax/E-mail: _____

* The project sponsor is the State Agency/Department seeking a permit/order from the Adirondack Park Agency. Land use or development proposed to be undertaken on State land by any person shall be considered the project of the State Agency having jurisdiction over the land.

** List all names on the current deed of record.

3. Authorized Representative:

The person named below shall act as the State Agency's/Department's agent in all matters relating to this permit/order application before the Adirondack Park Agency. All contact regarding the permit/order application will be through the Authorized Representative. The State Agency/Department is ultimately responsible for the accuracy of the information contained in this application and for compliance with all terms and conditions of any permit or order issued by the Agency.

Name and Title:_____
Mailing Address:_____
Telephone (daytime):_____Fax/E-mail:_____

4. Project Site Location/Identification:

Road/Highway:_____
Nearby Waterbody:_____
Town(s):_____County(s):_____
Size:_____acres

Mile Marker (if a road/bridge project):_____
State Land Unit (if applicable):_____
Project Identification Number (PIN) (if applicable):_____

Tax Map Designation (from the tax bill for the property):
Section:_____ Block:_____ Parcel:_____
Section:_____ Block:_____ Parcel:_____
Section:_____ Block:_____ Parcel:_____

5. Project Sponsor's Legal Interest in Project Site (check the one that applies)**:**

____ owner _____ signed purchase agreement holder
____ lessee _____ option holder _____ other (Identify: _____)

6. Deed(s) and Easement(s):

a) Is the project site on State Land and under the jurisdiction of the Project Sponsor for this application?

No ____ - If no, then answer the questions in this Section.

Yes ___ - If yes, then skip to Section 7 – Project Description

b) *If the project site is owned in fee:* Provide, as **Attachment A**, a complete copy of the recorded deed(s) for the project site containing the recorded information. Copies are available from the County Clerk's Office. Also, if the project sponsor has an executed contract or agreement to purchase or lease

the project site, please provide a copy in order to establish the project sponsor's legal interest in the project site. (The purchase price and other confidential information may be blackened out.)

c) *If the project site is or involves an easement or right-of-way:* Provide, as **Attachment B**, a complete copy of any documentation and/or mapping establishing the easement or right-of-way. If a necessary easement or right-of-way does not yet exist, then provide a signed statement from all property owners on the current deed of record that indicates their intent to establish or concede an easement or right-of-way to the project sponsor.

7. Project Description and New Land Use:

Provide a brief description of the proposed project:

_____
_____
_____
_____
_____

Which of the following types of new land use and development does the project include? Check all that apply and attach the appropriate completed Supplemental Information Request.

____ Single Family Dwelling
____ Multiple Family Dwelling
____ Individual Mobile Home
____ Mobile Home Court
____ Subdivision
____ Commercial Use
____ Public or Semi-Public Building
____ Industrial Use
____ Forestry Use
____ Forestry Use Structure
____ Sawmill, Chipping Mill, Pallet Mill or similar Wood Using Facility
____ Agricultural Use or Structure
____ Agricultural Service Use
____ Tourist Accommodation
____ Tourist Attraction
____ Ski Center
____ Golf Course
____ Campground
____ Commercial Sand and Gravel Extraction
____ Private Sand and Gravel Extraction
____ Mineral Extraction or Structure
____ Group Camp
____ Cemetery
____ Open Space Recreational Use
____ Game Preserve or Private Park
____ Hunting and Fishing Cabin or other Private Club Structure
____ Watershed Management or Flood Control Project
____ Marina, Boat Yard & Boat Launching Site
____ Commercial Seaplane Base
____ Commercial or Private Airport
____ Sewage Treatment Plant
____ Waste Disposal Area
____ Junkyard
____ Private Road
____ Municipal Road
____ Public Utility Use
____ Major Public Utility Use
____ Accessory Use or Accessory Use Structure to any of the above
____ Construction in or adjacent to a jurisdictional wetland
____ Other:_____

8. Prior Agency Contact:

a) Has there been any previous contact or discussion with Agency staff regarding this project or project site, or has Agency staff visited the project site?

____ No
____ Yes Staff person's name: _____
Date of Contact: _____

b) Has the project or project site been the subject of a past Agency action (e.g., permit, variance, jurisdictional inquiry, enforcement case, wetland flagging, or approved Unit Management Plan)?

____ No
____ Yes If yes, provide the following number and date:

Permit/Variance/Order Number: _____ date:_____
Jurisdictional Inquiry Number: _____ date:_____
Enforcement Case Number: _____ date:_____
Wetland Boundary Flagging: _____ date:_____
UMP: _____ date:_____

9. Historic Resources:

Does the project site have any buildings that are more than 50 years old, or does the project site or surrounding area contain any structures or districts which are listed or deemed eligible to be listed on the State or National Register of Historic Places or does the project site involve any known archeological resources?
____ No
____ Yes to any of the above criteria

If yes, provide a location map, project description, site plan map, and recent photographs keyed to the location map to the New York State Office of Parks, Recreation and Historic Preservation (OPRHP) as part of consultation required by the State Historic Preservation Act. Please be advised that the Agency cannot deem an application as complete until the OPRHP's determination and/or recommendations for historic resource impact mitigation have been provided to the Agency.

10. Shoreline:

Shoreline means that line at which land adjoins water of lakes or ponds or navigable (by boat or canoe) rivers and streams. If the project site has shoreline and you propose construction of any kind within 100 feet of the shoreline (or on private land within 150 feet of Recreational Rivers or 250 feet of Scenic Rivers), the mean high water mark (MHWM – the average of the annual high water levels) will have to be established and shown on a site plan map in order to have a complete application. At the project sponsor's request, Agency staff will determine the MHWM at the project site or you can have the determination made by a NYS licensed land surveyor. If you are unsure of navigability, contact Agency staff.

a) Does the project site contain any navigable water?

____ No (If no, go to Section 11-Wetlands)

____ Yes Name of water body:_____

Length of shoreline on the project site (as it winds and turns):____ feet

b) Will any vegetation be cut or removed on private or State Land within 35 feet of a lake or pond or navigable river or stream or on private land within 100 feet of a designated NYS Wild, Scenic or Recreational River? (If you are uncertain whether the shoreline is along a designated river, check the Adirondack Park Land Use and Development Plan Map, or the APA Regulations Appendix Q-6, or contact Agency staff.)

____ No

____ Yes If yes, describe type, amount and location of vegetation to be removed:

_____

_____

_____

11. Wetlands:

a) Are there any wetlands on the project site?

____ No If no, go to Section 12 – Other Regulatory Permits and Approvals

____ Yes If yes, answer the following questions. The wetland boundaries as delineated and/or confirmed by Agency staff must be shown and labeled on the Site Plan Map.

b) Are any of the activities listed below proposed to occur within the boundaries of a freshwater wetland?

____ No

____ Yes If yes, check all that apply:

____ Draining; dredging; excavation; removing soil, peat, muck, sand, shells or gravel

____ Dumping or filling with soil, stone, sand, gravel, mud, or fill of any kind

____ Erecting structures, building roads or driveways, driving pilings, or placing any other obstructions

____ Clearcutting of more than three acres: state number of acres____

____ Applying pesticides or fertilizers

____ Constructing a wastewater treatment system or discharging a sewer outfall

If yes, please also provide a detailed written description of the measures taken to avoid or minimize wetland impacts:

_____

_____

_____

_____

_____

c) Will the project result in the temporary or permanent loss of any wetland acreage by filling or draining?

____ No

____ Yes If yes, amount of acreage to be lost: _____ square feet

d) Will any of the activities listed below occur within 100 feet of a wetland?

____ No

____ Yes If yes, check all that apply:

___ Constructing a wastewater treatment leaching or absorption facility

___ Applying pesticides

___ Conducting other activities that could impair the functions or benefits derived from wetlands, including any diversion of water or change in hydrology, or substantial increase of erosion or sedimentation.

If "Yes" was checked for any of the questions in this section, a compensatory wetland mitigation plan prepared in accordance with the "New York State Adirondack Park Agency Compensatory Mitigation Guidelines" may be required. A Copy of these guidelines is available on the Agency's website (www.apa.gov) or upon request.

12. Other Regulatory Permits and Approvals:

The project should be designed to the regulatory requirements of other involved agencies.

a) State and Federal Agency Contacts:
Complete the following table and indicate whether any of the following agencies or departments have been contacted. Your APA application may remain incomplete until all state agency applications are complete, to allow a coordinated review.

Agency	No	Yes	Date	Contact Person & Phone Number
NYS Department of Health				
NYS Department of Transportation				
NYS Department of Environmental Conservation				
NYS Office of Parks, Recreation & Historic Preservation				
NYS Department of Law				
U.S. Army Corps of Engineers				
Lake George Park Commission				
Other				

b) State and Federal Permits, Approvals and Determinations:
Provide, as **Attachment C**, copies of all permits, approvals and determinations received from the above agencies.

13. Required Signatures:

I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS APPLICATION, INCLUDING ALL ATTACHMENTS. I BELIEVE THIS INFORMATION TO BE TRUE, ACCURATE AND COMPLETE.

I HEREBY AUTHORIZE THE ADIRONDACK PARK AGENCY AND MEMBERS OF ITS STAFF TO ENTER ON THE PROPERTY DESCRIBED HEREIN FOR THE PURPOSES OF CONDUCTING SUCH INVESTIGATIONS, EXAMINATIONS, TESTS AND SITE EVALUATIONS AS IT DEEMS NECESSARY, AT REASONABLE TIMES AND WITH ADVANCE NOTICE WHERE POSSIBLE, TO VERIFY INFORMATION CONTAINED IN OR RELATED TO THIS APPLICATION FOR A PROJECT PERMIT/ORDER.

Signature of all Project Sponsors (if not the landowners)**:**
(Required for all applications)

_____	_____	_____
_____	_____	_____
Signature	**Print Name/Title**	**Date**

Signature(s) of all Landowner(s) from current deed:
(Required if not State Land)

_____	_____	_____
_____	_____	_____
Signature	**Print Name/Title**	**Date**

Signature of State Agency/Department Authorized Representative:

(Required-see Section 3 of this application**)**

_____	_____	_____
Signature	**Print Name**	**Date**