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**McGOEY, HAUSER and EDSALL  
CONSULTING ENGINEERS D.P.C.**

MARK J. EDSALL, P.E., P.P. (NY, NJ & PA)  
MICHAEL W. WEEKS, P.E. (NY, NJ & PA)  
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MATTHEW J. SICKLER, P.E. (NY & PA)  
PATRICK J. HINES

**TOWN OF NEWBURGH  
PLANNING BOARD  
TECHNICAL REVIEW COMMENTS**

**PROJECT: HUDSON ASSET SUBDIVISION**  
**PROJECT NO.: 2017-04**  
**PROJECT LOCATION: SECTION 34, BLOCK 1, LOT 25.1**  
**REVIEW DATE: 27 JANUARY 2017**  
**MEETING DATE: 2 FEBRUARY 2017**  
**PROJECT REPRESENTATIVE: TALCOTT ENGINEERING**

1. The proposed project identifies 3 lots utilizing what appears to be a proposed common driveway. The project would require Town Board approval for 3 lots on a common driveway.
2. Access to Tax Lot #18 should be further clarified. Information pertaining to the easement should be submitted for Mike Donnelly's review.
3. Common driveway access and maintenance agreement would be required after Town Board approval.
4. The curb stop detail identifies the use of polyethylene pipe while the Town of Newburgh water service notes require Type K copper.
5. Consultation with the Water Department regarding adequate pressures for the very long water services proposed should be addressed.
6. The septic system design for Lot #5 identifies a fill system. Orange County Health Department approval for fill systems would be required. In addition the soil testing identified as deep test 17 identifies modeling in 4 inches of the surface. Modeling at that elevation does not permit construction of a raised system as one foot of usable soil is required under the raised bed.
7. The use of the Elgin system requires the sand specifications be identified. Chart is as reference, however is not provided on the detail sheet.
8. Septic notes should identify that the As Built survey and certification will be provided to the Town of Newburgh Code Enforcement Department prior to issuance of a Certificate of Occupancy.

9. Highway Superintendents comments regarding driveway location should be received.
10. Pavement replacement detail should be depicted for utilities in the Town roadway.
11. More detailed location maps should be provided.

Respectfully submitted,

***McGoey, Hauser and Edsall  
Consulting Engineers, D.P.C.***

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Patrick J. Hines  
Principal

PJH/kbw

# Talcott Engineering DESIGN, PLLC

1 GARDNERTOWN ROAD ~ NEWBURGH, NY 12550  
(845) 569-8400\* ~ (fax) (845) 569-4583

JAN 23 2017

Town of Newburgh  
Planning Board  
308 Gardnertown Road  
Newburgh, NY 12550

January 23, 2017

Attn: John Ewasutyn, Chairman

Re: Project Narrative/Hudson Asset Subdivision  
Town Project No. 2017-04  
Zone R-2  
SBL: 34-1-25.1  
Job No. 16022-MMR

## PROJECT NARRATIVE

The project is a subdivision of an existing vacant 12.0 AC parcel to create four new single family residential building lots and a residual lot. All lots will be served by Town water and in ground septic systems and will be accessed from the existing town road "Union Avenue".

The subject parcel is in the R-2 zone and as proposed, all lots meet the bulk table requirements and minimum buildable areas. Lot areas range from .07 AC to 8.5 AC.

Attached please find 12 Planning Board Applications, 12 sets of plans, and 12 copies of a long EAF along with this narrative and checks for the application fees (\$1,550.00), escrow (\$4,500.00) and public hearing (\$150.00). I will FedEx 1 set to Michael Donnelly, and deliver 1 set to Patrick Hines.

Respectfully yours,



Charles T. Brown, P.E. – President  
Talcott Engineering

Pc; Mike Maher

**TOWN OF NEWBURGH  
APPLICATION FOR  
SUBDIVISION/SITE PLAN REVIEW**

**RETURN TO:** Town of Newburgh Planning Board  
308 Gardnertown Road  
Newburgh, New York 12550

**DATE RECEIVED:** \_\_\_\_\_ **TOWN FILE NO:** \_\_\_\_\_  
(Application fee returnable with this application)

**1. Title of Subdivision/Site Plan (Project name):**

HUDSON ASSET SUBDIVISION

**2. Owner of Lands to be reviewed:**

**Name** HUDSON ASSET HOMES, LLC ATTN: MIKE WALKER  
**Address** 4171 ALBANY POST ROAD  
HYDE PARK, NY 12538  
**Phone** 845-527-3110

**3. Applicant Information (If different than owner):**

**Name** (58245)  
**Address** \_\_\_\_\_  
\_\_\_\_\_

**Representative** CHARLES T. BROWN, PE / TALCOTT ENGINEERING  
**Phone** 845-569-8400  
**Fax** 845-569-4583  
**Email** TALCOTTDESIGN22@GMAIL.COM

**4. Subdivision/Site Plan prepared by:**

**Name** CHARLES T. BROWN, PE / TALCOTT ENGINEERING  
**Address** 1 GARDNERTOWN ROAD  
NEWBURGH, NY 12550  
**Phone/Fax** 845-569-8400 / 845-569-4583

**5. Location of lands to be reviewed:**

UNION AVE NEAR #1285 & #1289

**6. Zone** R-2 **Fire District** WINONA LAKE  
**Acreage** 12.0 **School District** NEWBURGH

**7. Tax Map: Section** 34 **Block** 1 **Lot** 25.1

8. Project Description and Purpose of Review:

Number of existing lots 1 Number of proposed lots 4 + RESIDUAL  
Lot line change N/A  
Site plan review N/A  
Clearing and grading N/A  
Other N/A

PROVIDE A WRITTEN SINGLE PAGE DESCRIPTION OR NARRATIVE OF THE PROJECT

9. Easements or other restrictions on property:

(Describe generally) DRIVEWAY EASEMENT FOR ADJACENT LOT

10. The undersigned hereby requests approval by the Planning Board of the above identified application and scheduling for an appearance on an agenda:

Signature [Signature] Title Partner

Date: 1/18/17

**NOTE:** If property abuts and has its access to a County or State Highway or road, the following information must be placed on the subdivision map or site plan: entrance location, entrance profile, sizing of pipe (minimum length of pipe to be 24 feet).

TOWN OF NEWBURGH PLANNING BOARD

Hudson Asset Subdivision  
PROJECT NAME

CHECKLIST FOR MAJOR/MINOR SUBDIVISION AND/OR SITE PLAN

I. The following items shall be submitted with a COMPLETED Planning Board Application Form.

1.  Environmental Assessment Form As Required
2.  Proxy Statement
3.  Application Fees
4.  Completed Checklist (Automatic rejection of application without checklist)

II. The following checklist items shall be incorporated on the Subdivision Plat or Site Plan prior to consideration of being placed on the Planning Board Agenda.  
Non-submittal of the checklist will result in application rejection.

1.  Name and address of applicant
2. N/A Name and address of owner (if different from applicant)
3.  Subdivision or Site Plan and Location
4.  Tax Map Data (Section-Block-Lot)
5.  Location map at a scale of 1" = 2,000 ft. or less on a tax map or USCGS map base only with property outlined
6.  Zoning table showing what is required in the particular zone and what applicant is proposing. A table is to be provided for each proposed lot
7. N/A Show zoning boundary if any portion of proposed site is within or adjacent to a different zone
8.  Date of plan preparation and/or plan revisions
9.  Scale the plan is drawn to (Max 1" = 100')
10.  North Arrow pointing generally up

11.  Surveyor,s Certification
12.  Surveyor's seal and signature
13.  Name of adjoining owners
14.  Wetlands and 100 ft. buffer zone with an appropriate note regarding D.E.C. or A.C.O.E. requirements
15.  Flood plain boundaries
16.  Certified sewerage system design and placement by a Licensed Professional Engineer must be shown on plans in accordance with Local Law #1 1989
17.  Metes and bounds of all lots
18.  Name and width of adjacent streets; the road boundary is to be a minimum of 25 ft. from the physical center line of the street
19.  Show existing or proposed easements (note restrictions)
20.  Right-of-way width and Rights of Access and Utility Placement
21.  Road profile and typical section (minimum traveled surface, excluding shoulders, is to be 18 ft. wide)
22.  Lot area (in sq. ft. for each lot less than 2 acres)
23.  Number of lots including residual lot
24.  Show any existing waterways
25.  A note stating a road maintenance agreement is to be filed in the County Clerk's Office where applicable
26.  Applicable note pertaining to owners review and concurrence with plat together with owner's signature
27.  Show any improvements, i.e. drainage systems, water lines, sewer lines, etc.
28.  Show all existing houses, accessory structures, wells and septic systems on and within 200 ft. of the parcel to be subdivided
29.  Show topographical data with 2 or 5 ft. contours on initial submission

30. N/A Indicate any reference to a previous subdivision, i.e. filed map number, date and previous lot number
31. N/A If a private road, Town Board approval of name is required, and notes on the plan that no town services will be provided and a street sign (per town specs) is to be furnished and installed
32. N/A Number of acres to be cleared or timber harvested
33. N/A Estimated or known cubic yards of material to be excavated and removed from the site
34. N/A Estimated or known cubic yards of fill required
35. N/A The amount of grading expected or known to be required to bring the site to readiness
36. N/A Type and amount of site preparation which falls within the 100 ft. buffer strip of wetlands or within the Critical Environmental Area. Please explain in sq. ft. or cubic yards.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
37. N/A Any amount of site preparation within a 100 year floodplain or any water course on the site. Please explain in sq. ft. or cubic yards.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

The plan for the proposed subdivision or site has been prepared in accordance with this checklist.

By:   
 Licensed Professional

Date: 1/20/17

This list is designed to be a guide ONLY. The Town of Newburgh Planning Board may require additional notes or revisions prior to granting approval.



**RE: TOWN OF NEWBURGH CLEARING AND GRADING LAW**

The Town of Newburgh Clearing and Grading Control Law requires a separate permit for most site preparation activities, including clearing, grading, tree cutting, excavating and filling. Site preparation activities performed following site plan or subdivision approval by the Planning Board may be exempt from the permit application, public hearing, fee and bonding requirements of the law provided the subdivision or site plan application has been reviewed for conformance with the clearing and grading law and the approval conditioned on compliance with the standards set forth in the law. Completion of the attached form will enable the Planning Board to review your application for conformance with the law's requirements. In the event it is not completed you may be required to apply for a separated permit for your site preparation activities. A sediment and erosion control plan and a plan showing the areas to be cleared, filled, graded or subjected to tree cutting, the types of vegetation affected and the proposed disposition of the destroyed vegetation must accompany the form. A SEQRA long form or full EAF should be utilized to discuss any environmental impacts and must accompany the application.

W/A

**TOWN OF NEWBURGH  
APPLICATION FOR CLEARING AND GRADING**

Name of applicant: \_\_\_\_\_

Name of owner on premises: \_\_\_\_\_

Address of owner: \_\_\_\_\_

Telephone number of owner: \_\_\_\_\_

Telephone number of applicant: \_\_\_\_\_

State whether applicant is owner, lessee, agent, architect, engineer or contractor:  
\_\_\_\_\_

Location of land on which proposed work will be done: \_\_\_\_\_

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Sub. Div.: \_\_\_\_\_

Zoning District of Property: \_\_\_\_\_ Size of Lot: \_\_\_\_\_

Area of lot to be cleared or graded: \_\_\_\_\_

Proposed completion of date: \_\_\_\_\_

Name of contractor/agent, if different than owner: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Date of Planning Board Approval: \_\_\_\_\_ (if required)

I hereby agree to hold the Town of Newburgh harmless from any claims arising from the proposed activity.

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of applicant (if different than owner): \_\_\_\_\_

**TOWN ACTION:**

Examined: \_\_\_\_\_ 20 \_\_\_\_\_

Approved: \_\_\_\_\_ 20 \_\_\_\_\_

Disapproved: \_\_\_\_\_ 20 \_\_\_\_\_

## **FEE LAW SUMMARY**

### **PENDING APPLICATIONS**

All applicants with matters pending before the Planning Board as of the effective date of this local law shall be required to post as escrow in the manner and upon the terms and conditions set forth below:

- (a) The Planning Board, in consultation with the applicant, shall compute the amount of the escrow to be posted with the Town. Such amount shall be reasonably related to the costs attendant to the Town's review of the application as of the effective date of this local law. Under no circumstances shall the escrow include amounts attributable to any costs incurred by the Town prior to the effective date of this local law.
- (b) Once computed and established by Resolution of the Planning Board, the applicant shall, within fifteen (15) days of said resolution, post escrow fees with the Secretary of the Planning Board. Failure to deliver the said escrow fees may result in delay of the further processing of the application.

### **SEVERABILITY**

In the event a court of law determined that any provision of this chapter is unenforceable, then only that provision shall be affected and all other provisions shall be fully enforceable.

### **EFFECTIVE DATE:**

This local law shall take effect immediately upon filing in the Office of the Secretary of State.

**FEE ACKNOWLEDGEMENT**

The town of Newburgh Municipal Code sets forth the schedule of fees for applications to the Planning Board. The signing of this application indicates your acknowledgement of responsibility for payment of these fees to the Planning Board for review of this application, including, but not limited to escrow fees for professional services (planner/consultant, engineering, legal), public hearing and site inspection. Applicant's submissions and resubmissions are not complete and will not be considered by the planning board or placed upon its agenda unless all outstanding fees have been paid. Fees incurred after the stamping of plans will remain the responsibility of the applicant prior to approval of a building permit or certificate of occupancy. Fee schedules are available from the Planning Board Secretary and are on the Town's website.

Hudson Asset Hous  
APPLICANT'S NAME (printed)

  
APPLICANTS SIGNATURE

1/18/17  
DATE

Note: if the property abuts and has access to a County or State Highway or road, the following information must be place on the subdivision map: entrance location, entrance profile, sizing of drainage pipe (minimum length of pipe to be twenty-four (24) feet).

**PROXY**

(OWNER) MIKE MOHER, DEPOSES AND SAYS THAT HE/SHE  
RESIDES AT 50 COCOA LANE, NEWBURGH  
IN THE COUNTY OF ORANGE  
AND STATE OF NY  
AND THAT HE/SHE IS THE OWNER IN FEE OF UNION AVE,  
5/12/16 34-1-25.1

WHICH IS THE PREMISES DESCRIBED IN THE FOREGOING  
APPLICATION AS DESCRIBED THEREIN TO THE TOWN OF NEWBURGH  
PLANNING BOARD AND CHARLES T. BROWN, PE IS AUTHORIZED  
TO REPRESENT THEM AT MEETINGS OF SAID BOARD.

DATED: 1/18/17

  
OWNERS SIGNATURE

TALCOTE ENGINEERING  
\_\_\_\_\_  
\_\_\_\_\_

Hudson Assoc Home Michael Moher  
OWNERS NAME (printed)

  
WITNESS' SIGNATURE

NAMES OF ADDITIONAL  
REPRESENTATIVES

Katherine M. Miller  
WITNESS' NAME (printed)

**PLANNING BOARD DISCLAIMER STATEMENT**  
**TO APPLICANTS**

The applicant is advised that the Town of Newburgh Municipal Code, which contains the Town's Zoning Law, is subject to amendment. Submission of an application to this Board does not grant the applicant any right to continued review under the Code's current standards and requirements. It is possible that the applicant will be required to meet changed standards or new Code requirements made while the application is pending.

An approval by this Board does not constitute permission, nor grant any right to connect to or use municipal services such as sewer, water or roads. It is the applicant's responsibility to apply for and obtain the Town of Newburgh and other agency approvals not within this Board's authority to grant.

The applicant hereby acknowledges, consents, and agrees to the above.

1/18/17

DATED

Hudson Ave. Boro Michelman  
APPLICANT'S NAME (printed)

  
APPLICANT'S SIGNATURE

**DISCLOSURE ADDENDUM STATEMENT TO APPLICATION,  
PETITION AND REQUEST**

Mindful of the provisions of Section 809 of the General Municipal Law of the State of New York, and of the Penal provisions thereof as well, the undersigned applicant states that no State Officer, Officer or Employee of the Town of Newburgh, or Orange County, has any interest, financial or otherwise, in this application or with, or in the applicant as defined in said Statute, except the following person or persons who is or are represented to have only the following type of interest, in the nature and to the extent hereinafter indicated:

  X   NONE

\_\_\_\_\_  
NAME, ADDRESS, RELATIONSHIP OR INTEREST  
(financial or otherwise)

\_\_\_\_\_

\_\_\_\_\_

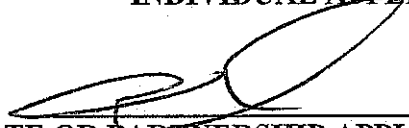
\_\_\_\_\_

This disclosure addendum statement is annexed to and made a part of the petition, application and request made by the undersigned applicant to the following Board or Officer of the Town of Newburgh.

- X   TOWN BOARD
- PLANNING BOARD
- ZONING BOARD OF APPEALS
- ZONING ENFORCEMENT OFFICER
- BUILDING INSPECTOR
- OTHER

  1/18/17    
DATED

\_\_\_\_\_  
INDIVIDUAL APPLICANT



\_\_\_\_\_  
CORPORATE OR PARTNERSHIP APPLICANT

BY:   Partner    
(Pres.) (Partner) (Vice-Pres.)  
(Sec.) (Treas.)

**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 project sponsor to verify that the information contained in Part 1 is accurate and complete.

**A. Project and Sponsor Information.**

Name of Action or Project: HUDSON ASSET SUBDIVISION			JOB # 16022
Project Location (describe, and attach a general location map): UNION AVE AROUND #1285 AND #1289			
Brief Description of Proposed Action (include purpose or need): SUBDIVIDE AN EXISTING 12 ACRE VACANT PARCEL INTO FOUR BUILDING LOTS AND A RESIDUAL LOT. PARCEL IS IN THE R-2 ZONE AND HAS TOWN WATER. LOTS WILL HAVE ONSITE SEPTING SYSTEMS AND DRIVEWAYS TO GARDNERTOWN ROAD.			
Name of Applicant/Sponsor: HUDSON ASSET HOMES, LLC ATTN:MIKE MAHER		Telephone: 845-527-3110	
		E-Mail: MIKCHEIF99@AOL.COM	
Address: 4171 ALBANY POST ROAD			
City/PO: HYDE PARK		State: NY	Zip Code: 12538
Project Contact (if not same as sponsor; give name and title/role): (SAME)		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
Property Owner (if not same as sponsor): (SAME)		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:



**B. Government Approvals**

<b>B. Government Approvals, Funding, or Sponsorship.</b> ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)		
<b>Government Entity</b>	<b>If Yes: Identify Agency and Approval(s) Required</b>	<b>Application Date (Actual or projected)</b>
a. City Council, Town Board, <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees	TOWN BOARD THREE HOUSES ON A COMMON DRIVEWAY	MARCH 2017
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	SUBDIVISION APPROVAL	JANUARY 2017
c. City Council, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TOWN OF NEWBURGH HIGHWAY DEPT. DRIVEWAY LOCATIONS	MARCH 2017
e. County agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Is the project site within a Coastal Erosion Hazard Area?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**C. Planning and Zoning**

<b>C.1. Planning and zoning actions.</b>	
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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<ul style="list-style-type: none"> <li>• If Yes, complete sections C, F and G.</li> <li>• If No, proceed to question C.2 and complete all remaining sections and questions in Part 1</li> </ul>	
<b>C.2. Adopted land use plans.</b>	
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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, identify the plan(s):	
_____	
_____	
_____	

<b>C.3. Zoning</b>	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? R-2 RESIDENTIAL	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the use permitted or allowed by a special or conditional use permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. Is a zoning change requested as part of the proposed action? If Yes, i. What is the proposed new zoning for the site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>C.4. Existing community services.</b>	
a. In what school district is the project site located? NEWBURGH ENLARGED SCHOOL DISTRICT	
b. What police or other public protection forces serve the project site? TOWN OF NEWBURGH POLICE	
c. Which fire protection and emergency medical services serve the project site? WINONA LAKE FIRE DEPARTMENT	
d. What parks serve the project site? CROMNER PARK, ALGONQUIN PARK, CHADWICK LAKE PARK	

**D. Project Details**

<b>D.1. Proposed and Potential Development</b>	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? RESIDENTIAL	
b. a. Total acreage of the site of the proposed action? _____ 12.0 acres b. Total acreage to be physically disturbed? _____ 2.15 acres c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 12.0 acres	
c. Is the proposed action an expansion of an existing project or use? 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: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. Is the proposed action a subdivision, or does it include a subdivision? If Yes, i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) RESIDENTIAL ii. Is a cluster/conservation layout proposed? _____ iii. Number of lots proposed? _____ 5 iv. Minimum and maximum proposed lot sizes? Minimum _____ 0.7 _____ Maximum _____ 8.5	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
e. Will proposed action be constructed in multiple phases? i. If No, anticipated period of construction: _____ 10 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: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

f. Does the project include new residential uses?  Yes  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	5			
At completion of all phases	5			

g. Does the proposed action include new non-residential construction (including expansions)?  Yes  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?  Yes  No  
 If Yes,

i. Purpose of the impoundment: \_\_\_\_\_  
 ii. If a water impoundment, the principal source of the water:  Ground water  Surface water streams  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?  Yes  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?  
 • 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?  Yes  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?  Yes  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?  Yes  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 proposed action cause or result in disturbance to bottom sediments?  Yes  No  
If Yes, describe: \_\_\_\_\_

iv. Will 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: \_\_\_\_\_ 2,200 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: NEWBURGH CONSOLIDATED WATER DISTRICT
- 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), 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: \_\_\_\_\_ 2,200 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): \_\_\_\_\_

SANITARY WASTEWATER

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

- Do existing sewer lines serve the project site?  Yes  No
- Will line extension within an existing district be necessary to serve the project?  Yes  No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_  
\_\_\_\_\_

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?  Yes  No

If Yes:

- 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):

NEW SUBSURFACE INDIVIDUAL SEWERAGE DISPOSAL SYSTEMS

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?  Yes  No

If Yes:

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)?

- If to surface waters, identify receiving water bodies or wetlands: \_\_\_\_\_  
\_\_\_\_\_

- Will stormwater runoff flow to adjacent properties?  Yes  No

iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?  Yes  No

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?  Yes  No

If Yes, identify:

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?  Yes  No

If Yes:

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)  Yes  No

ii. In addition to emissions as calculated in the application, the project will generate:

- \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide (CO<sub>2</sub>)
- \_\_\_\_\_ Tons/year (short tons) of Nitrous Oxide (N<sub>2</sub>O)
- \_\_\_\_\_ Tons/year (short tons) of Perfluorocarbons (PFCs)
- \_\_\_\_\_ Tons/year (short tons) of Sulfur Hexafluoride (SF<sub>6</sub>)
- \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
- \_\_\_\_\_ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?  Yes  No

If Yes:

i. Estimate methane generation in tons/year (metric): \_\_\_\_\_

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): \_\_\_\_\_

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i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?  Yes  No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): \_\_\_\_\_

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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?  Yes  No

If Yes:

i. When is the peak traffic expected (Check all that apply):  Morning  Evening  Weekend  
 Randomly between hours of \_\_\_\_\_ to \_\_\_\_\_.

ii. For commercial activities only, projected number of semi-trailer truck trips/day: \_\_\_\_\_

iii. Parking spaces: Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Net increase/decrease \_\_\_\_\_

iv. Does the proposed action include any shared use parking?  Yes  No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: \_\_\_\_\_

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vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site?  Yes  No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles?  Yes  No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes?  Yes  No

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k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy?  Yes  No

If Yes:

i. Estimate annual electricity demand during operation of the proposed action: \_\_\_\_\_

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): \_\_\_\_\_

iii. Will the proposed action require a new, or an upgrade to, an existing substation?  Yes  No

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l. Hours of operation. Answer all items which apply.

i. During Construction:

- Monday - Friday: \_\_\_\_\_ 8 AM TO 8 PM
- Saturday: \_\_\_\_\_ 8 AM TO 8 PM
- Sunday: \_\_\_\_\_
- Holidays: \_\_\_\_\_

ii. During Operations:

- Monday - Friday: \_\_\_\_\_
- Saturday: \_\_\_\_\_
- Sunday: \_\_\_\_\_
- Holidays: \_\_\_\_\_

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?  Yes  No  
 If yes:  
 i. Provide details including sources, time of day and duration:  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

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n. Will the proposed action have outdoor lighting?  Yes  No  
 If yes:  
 i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

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o. Does the proposed action have the potential to produce odors for more than one hour per day?  Yes  No  
 If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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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?  Yes  No  
 If Yes:  
 i. Product(s) to be stored \_\_\_\_\_  
 ii. Volume(s) \_\_\_\_\_ per unit time \_\_\_\_\_ (e.g., month, year)  
 iii. Generally describe proposed storage facilities: \_\_\_\_\_  
 \_\_\_\_\_

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q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?  Yes  No  
 If Yes:  
 i. Describe proposed treatment(s):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will the proposed action use Integrated Pest Management Practices?  Yes  No

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r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?  Yes  No  
 If Yes:  
 i. Describe any solid waste(s) to be generated during construction or operation of the facility:  
 • Construction: \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)  
 • Operation : \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)  
 ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:  
 • Construction: \_\_\_\_\_  
 \_\_\_\_\_  
 • Operation: \_\_\_\_\_  
 \_\_\_\_\_

iii. Proposed disposal methods/facilities for solid waste generated on-site:  
 • 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 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.  
 Urban  Industrial  Commercial  Residential (suburban)  Rural (non-farm)  
 Forest  Agriculture  Aquatic  Other (specify): \_\_\_\_\_  
 ii. If mix of uses, generally describe:  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0.00	0.08	+0.08
• Forested	10.90	8.75	-2.15
• 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)	1.10	1.10	0.00
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: <u>LAWNS</u>	0.00	1.97	+1.97



c. Is the project site presently used by members of the community for public recreation?  Yes  No  
i. If Yes: explain: \_\_\_\_\_

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?  Yes  No  
If Yes,  
i. Identify Facilities: \_\_\_\_\_

e. Does the project site contain an existing dam?  Yes  No  
If Yes:  
i. Dimensions of the dam and impoundment:  
• 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: \_\_\_\_\_

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?  Yes  No  
If Yes:  
i. Has the facility been formally closed?  Yes  No  
• If yes, cite sources/documentation: \_\_\_\_\_  
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: \_\_\_\_\_  
iii. Describe any development constraints due to the prior solid waste activities: \_\_\_\_\_

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?  Yes  No  
If Yes:  
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: \_\_\_\_\_

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?  Yes  No  
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:  Yes  No  
 Yes – Spills Incidents database Provide DEC ID number(s): \_\_\_\_\_  
 Yes – Environmental Site Remediation database Provide DEC ID number(s): \_\_\_\_\_  
 Neither database  
ii. If site has been subject of RCRA corrective activities, describe control measures: \_\_\_\_\_  
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?  Yes  No  
If yes, provide DEC ID number(s): \_\_\_\_\_  
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): \_\_\_\_\_

v. Is the project site subject to an institutional control limiting property uses?  Yes  No

- 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?  Yes  No
- Explain: \_\_\_\_\_

**E.2. Natural Resources On or Near Project Site**

a. What is the average depth to bedrock on the project site? \_\_\_\_\_ 6+ feet

b. Are there bedrock outcroppings on the project site?  Yes  No  
 If Yes, what proportion of the site is comprised of bedrock outcroppings? \_\_\_\_\_ %

c. Predominant soil type(s) present on project site:

ESB-ERIE EXTREMELY STONY	80 %
MdC-MARDIN GRAVELY SILT LOA	20 %
_____	_____ %

d. What is the average depth to the water table on the project site? Average: \_\_\_\_\_ 4+/- feet

e. Drainage status of project site soils:

<input type="checkbox"/> Well Drained:	_____ % of site
<input checked="" type="checkbox"/> Moderately Well Drained:	20 % of site
<input checked="" type="checkbox"/> Poorly Drained	80 % of site

f. Approximate proportion of proposed action site with slopes:

<input checked="" type="checkbox"/> 0-10%:	80 % of site
<input checked="" type="checkbox"/> 10-15%:	15 % of site
<input checked="" type="checkbox"/> 15% or greater:	5 % of site

g. Are there any unique geologic features on the project site?  Yes  No  
 If Yes, describe: \_\_\_\_\_

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?  Yes  No

ii. Do any wetlands or other waterbodies adjoin the project site?  Yes  No

If Yes to either i or ii, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?  Yes  No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name 862-227 Classification C
- Lakes or Ponds: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Wetlands: Name Federal Waters, Federal Waters, Federal Waters,... Approximate Size \_\_\_\_\_
- Wetland No. (if regulated by DEC) \_\_\_\_\_

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?  Yes  No

If yes, name of impaired water body/bodies and basis for listing as impaired: \_\_\_\_\_

i. Is the project site in a designated Floodway?  Yes  No

j. Is the project site in the 100 year Floodplain?  Yes  No

k. Is the project site in the 500 year Floodplain?  Yes  No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?  Yes  No

If Yes:

i. Name of aquifer: \_\_\_\_\_

m. Identify the predominant wildlife species that occupy or use the project site: \_\_\_\_\_  
 DEER \_\_\_\_\_ WILD TURKEY \_\_\_\_\_  
 SQUIRELS \_\_\_\_\_

n. Does the project site contain a designated significant natural community?  Yes  No  
 If Yes:  
 i. Describe the habitat/community (composition, function, and basis for designation): \_\_\_\_\_  
 ii. Source(s) of description or evaluation: \_\_\_\_\_  
 iii. Extent of community/habitat:  
 • Currently: \_\_\_\_\_ acres  
 • Following completion of project as proposed: \_\_\_\_\_ acres  
 • Gain or loss (indicate + or -): \_\_\_\_\_ acres

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?  Yes  No

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?  Yes  No

q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing?  Yes  No  
 If yes, give a brief description of how the proposed action may affect that use: \_\_\_\_\_

**E.3. Designated Public Resources On or Near Project Site**

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?  Yes  No  
 If Yes, provide county plus district name/number: \_\_\_\_\_

b. Are agricultural lands consisting of highly productive soils present?  Yes  No  
 i. If Yes: acreage(s) on project site? \_\_\_\_\_  
 ii. Source(s) of soil rating(s): \_\_\_\_\_

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark?  Yes  No  
 If Yes:  
 i. Nature of the natural landmark:  Biological Community  Geological Feature  
 ii. Provide brief description of landmark, including values behind designation and approximate size/extent: \_\_\_\_\_

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area?  Yes  No  
 If Yes:  
 i. CEA name: \_\_\_\_\_  
 ii. Basis for designation: \_\_\_\_\_  
 iii. Designating agency and date: \_\_\_\_\_

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District	
<i>ii.</i> Name: _____	
<i>iii.</i> 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 checked="" type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?	
If Yes:	
<i>i.</i> Describe possible resource(s): _____	
<i>ii.</i> 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 checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Identify resource: _____	
<i>ii.</i> Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____	
<i>iii.</i> 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 checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Identify the name of the river and its designation: _____	
<i>ii.</i> 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**

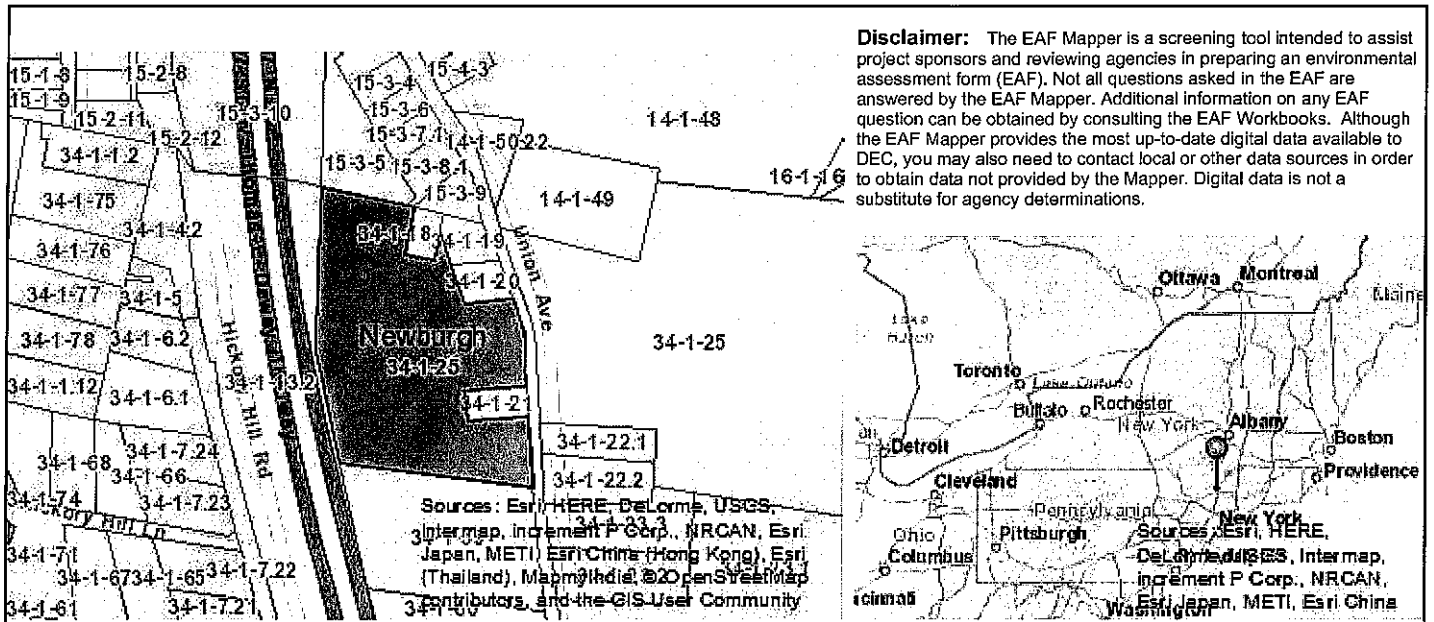
I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name CHARLES T. BROWN, PE Date 1-17-2017

Signature  Title PROJECT ENGINEER

**PRINT FORM**

**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.



B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	No
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	Yes
E.2.h.ii [Surface Water Features]	Yes
E.2.h.iii [Surface Water Features]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
E.2.h.iv [Surface Water Features - Stream Name]	862-227
E.2.h.iv [Surface Water Features - Stream Classification]	C
E.2.h.iv [Surface Water Features - Wetlands Name]	Federal Waters
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No

E.2.j. [Aquifers]	No
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	No
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National Register of Historic Places]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.3.f. [Archeological Sites]	No
E.3.i. [Designated River Corridor]	No

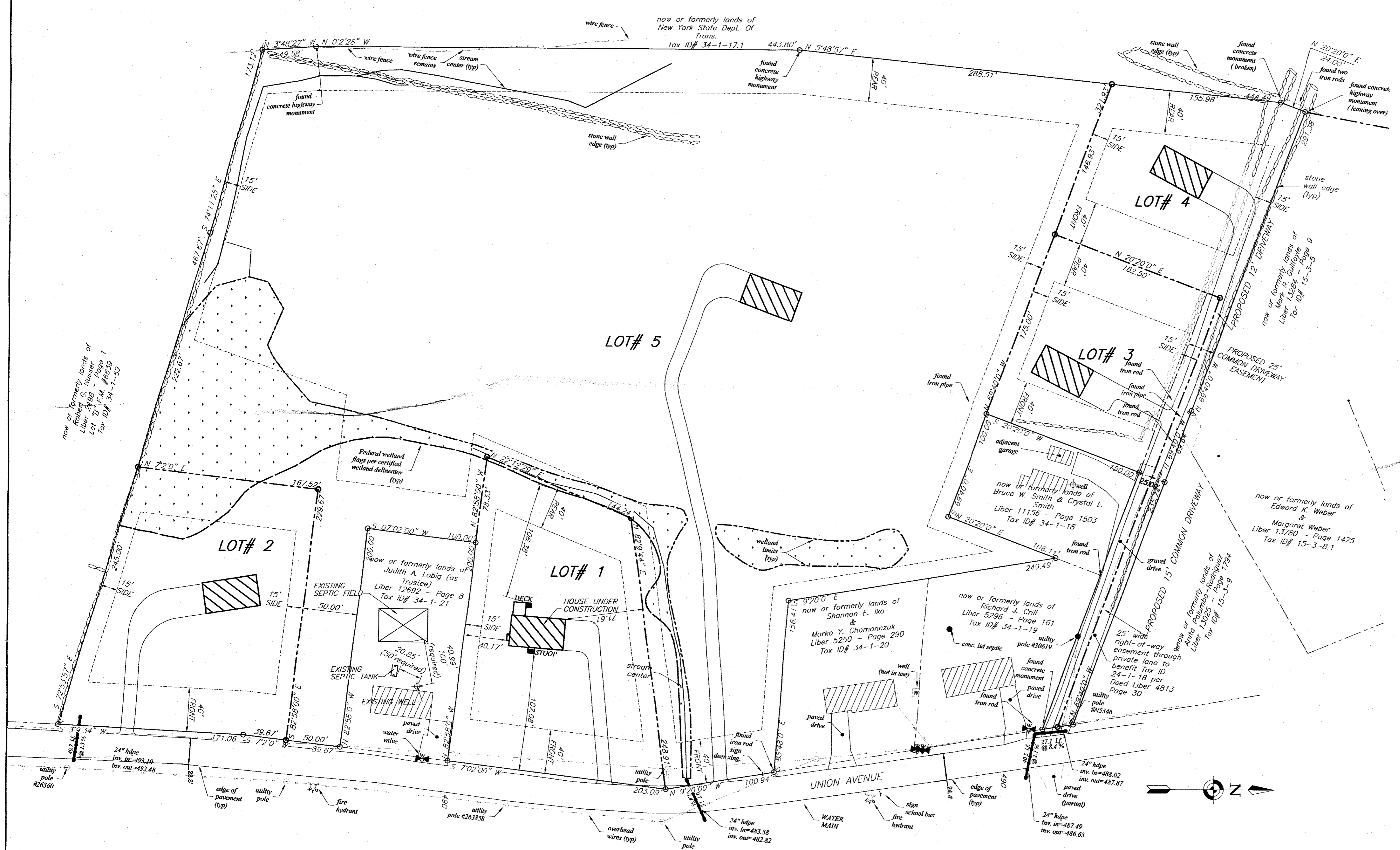
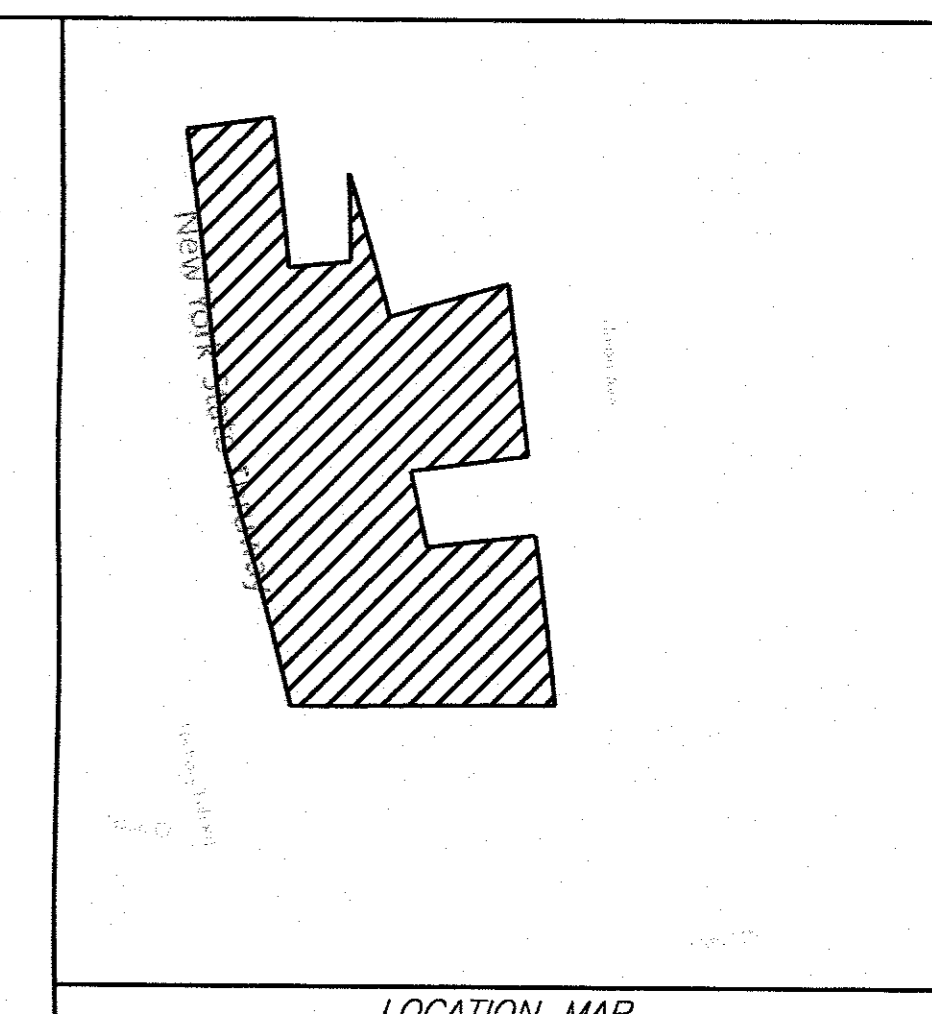
**ZONING SCHEDULE**

ZONE: R-2

	REQUIRED	LOT # 1 PROVIDED	LOT # 2 PROVIDED	LOT # 3 PROVIDED	LOT # 4 PROVIDED	LOT # 5 PROVIDED
MINIMUM LOT AREA w/ PUBLIC WATER or SEWER	17,500sf.	43,802sf.	44,130sf.	31,518sf.	34,782sf.	37,012sf.
MINIMUM YARDS (feet)						
FRONT	40'	107'	40'MIN.	40'MIN.	40'MIN.	40'MIN.
REAR	40'	106'	40'MIN.	40'MIN.	40'MIN.	40'MIN.
SIDE						
ONE	15'	40'	15'MIN.	15'MIN.	15'MIN.	15'MIN.
BOTH	30'	111'	30'MIN.	30'MIN.	30'MIN.	30'MIN.
MINIMUM LOT WIDTH (feet)	100'	169'	187'	175'	168'	837'
MINIMUM LOT DEPTH (feet)	125'	256'	232'	175'	178'	728'
MAXIMUM LOT SURFACE COVERAGE (%)	30%	12%	30%MAX	30%MAX	30%MAX	30%MAX
MAXIMUM HEIGHT	35'	35'MAX.	35'MAX.	35'MAX.	35'MAX.	35'MAX.

**LOT NOTES:**

1. LOT SPECIFIC PLOT PLAN'S FOR EACH LOT SHALL BE SUBMITTED WITH EACH BUILDING PERMIT APPLICATIONS AND FOUNDATIONS, WELLS AND SEPTIC FIELDS SHALL BE STAKED OUT PER PLOT PLANS BY A LICENSED SURVEYOR PLAN PRIOR TO CONSTRUCTION.



**LEGEND**

(Symbol)	PROPERTY LINE EXISTING	(Symbol)	FIRE HYDRANT
(Symbol)	PROPERTY LINE PROPOSED	(Symbol)	WATER VALVE
(Symbol)	PROPERTY LINE ADJOINING	(Symbol)	EXISTING MANHOLE
(Symbol)	EXISTING CONTOURS (2')	(Symbol)	UTILITY POLE
(Symbol)	EXISTING CONTOURS (10')	(Symbol)	CATCH BASIN
(Symbol)	CONTOURS PROPOSED (2')	(Symbol)	SWALE
(Symbol)	CONTOURS PROPOSED (10')	(Symbol)	STONEWALL
(Symbol)	EASEMENT	(Symbol)	WELL EXISTING
(Symbol)	SEWER LINE	(Symbol)	WELL PROPOSED
(Symbol)	WATERLINE	(Symbol)	HOUSE EXISTING
(Symbol)	SETBACKS	(Symbol)	HOUSE PROPOSED (single family)
(Symbol)	SILT FENCE	(Symbol)	SEPTIC TANK
(Symbol)	FEDERAL WETLANDS	(Symbol)	PUMP CHAMBER
(Symbol)	WATER/POND/STREAM	(Symbol)	CURTAIN DRAIN DISTRIBUTION BOX
(Symbol)		(Symbol)	LATERALS
(Symbol)		(Symbol)	TOE OF PAD
(Symbol)		(Symbol)	EXPANSION AREA

**FEDERAL WETLANDS NOTE:**  
FEDERAL WETLAND WERE LOCATED BY BIOLOGIST MICHAEL NOWICKI AND SURVEYED BY JONATHAN MILLEN LLS DURING MARCH 2016.

**SURVEYOR'S CERTIFICATION:**  
I HEREBY CERTIFY TO THE PARTIES OF INTEREST LISTED BELOW THAT THIS MAP SHOWS THE RESULTS OF AN ACTUAL SURVEY COMPLETED IN THE FIELD IN APRIL 2016.

**RECORD OWNER'S CONSENT NOTE:**  
THE UNDERSIGNED OWNERS OF THE PROPERTY HEREON STATE THAT THEY ARE FAMILIAR WITH THIS PLAN, ITS CONTENTS AND ITS LEGENDS AND HEREBY CONSENT TO ALL SAID TERMS AND CONDITIONS AS STATED HEREON AND TO THE FILING OF THIS PLAN IN THE OFFICE OF THE CLERK OF THE COUNTY OF ORANGE, IF SO REQUIRED.

**APPLICANT:**  
HUDSON ASSET HOMES, LLC "MIKE MAHER"  
4171 ALBANY POST ROAD  
HYDE PARK NY 12538

SIGNATURE \_\_\_\_\_ JONATHAN N. MILLEN, L.L.S.

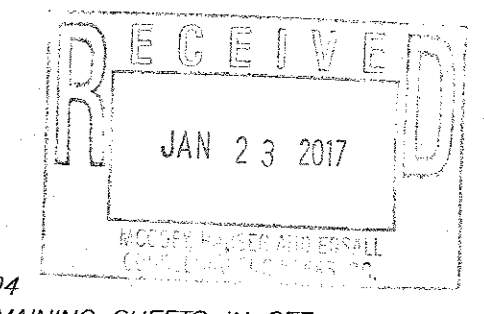
RECORD OWNER'S SIGNATURE \_\_\_\_\_ HUDSON ASSET HOMES, LLC  
4171 ALBANY POST ROAD  
HYDE PARK NY 12538

**REVISIONS**

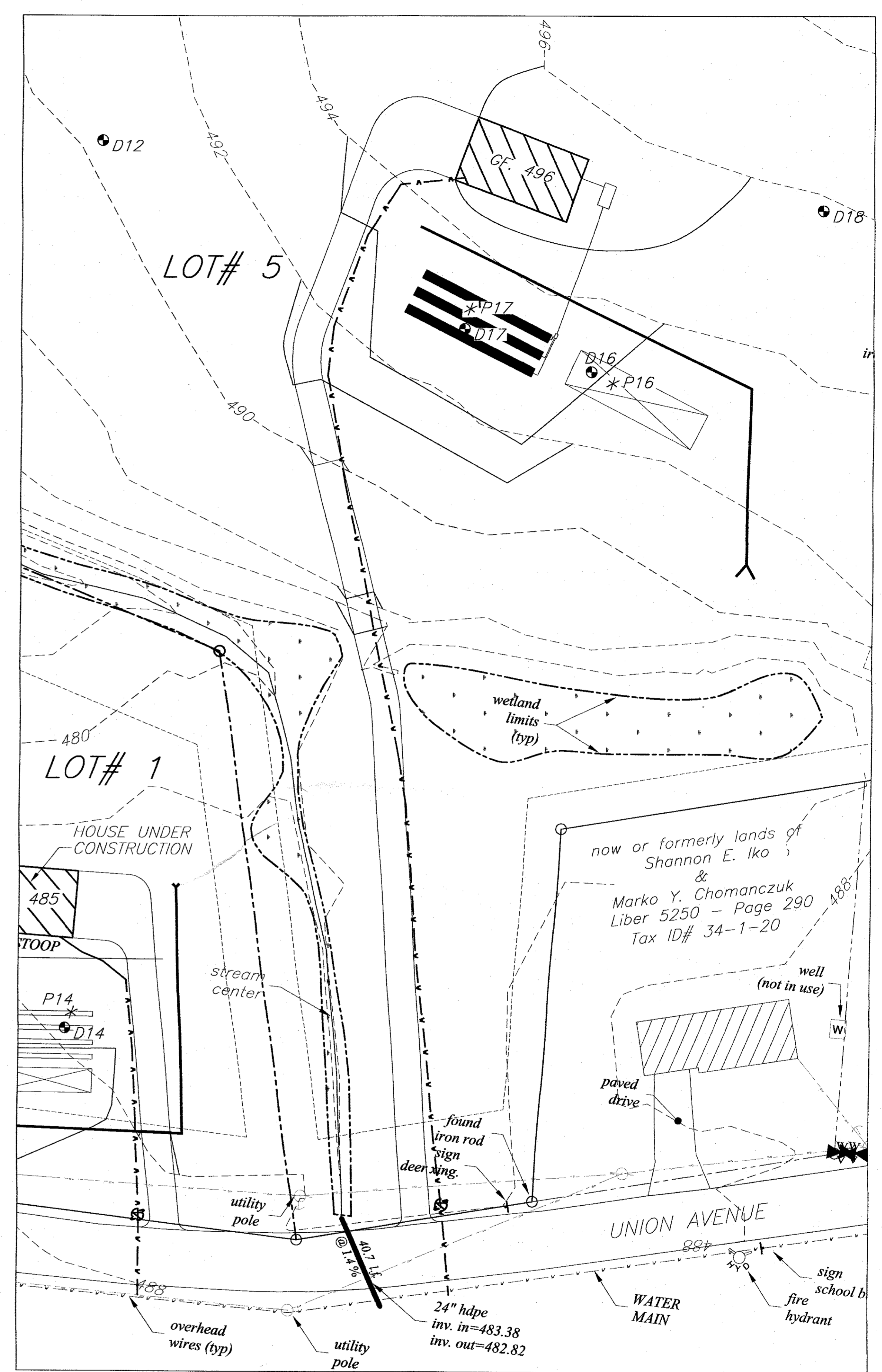
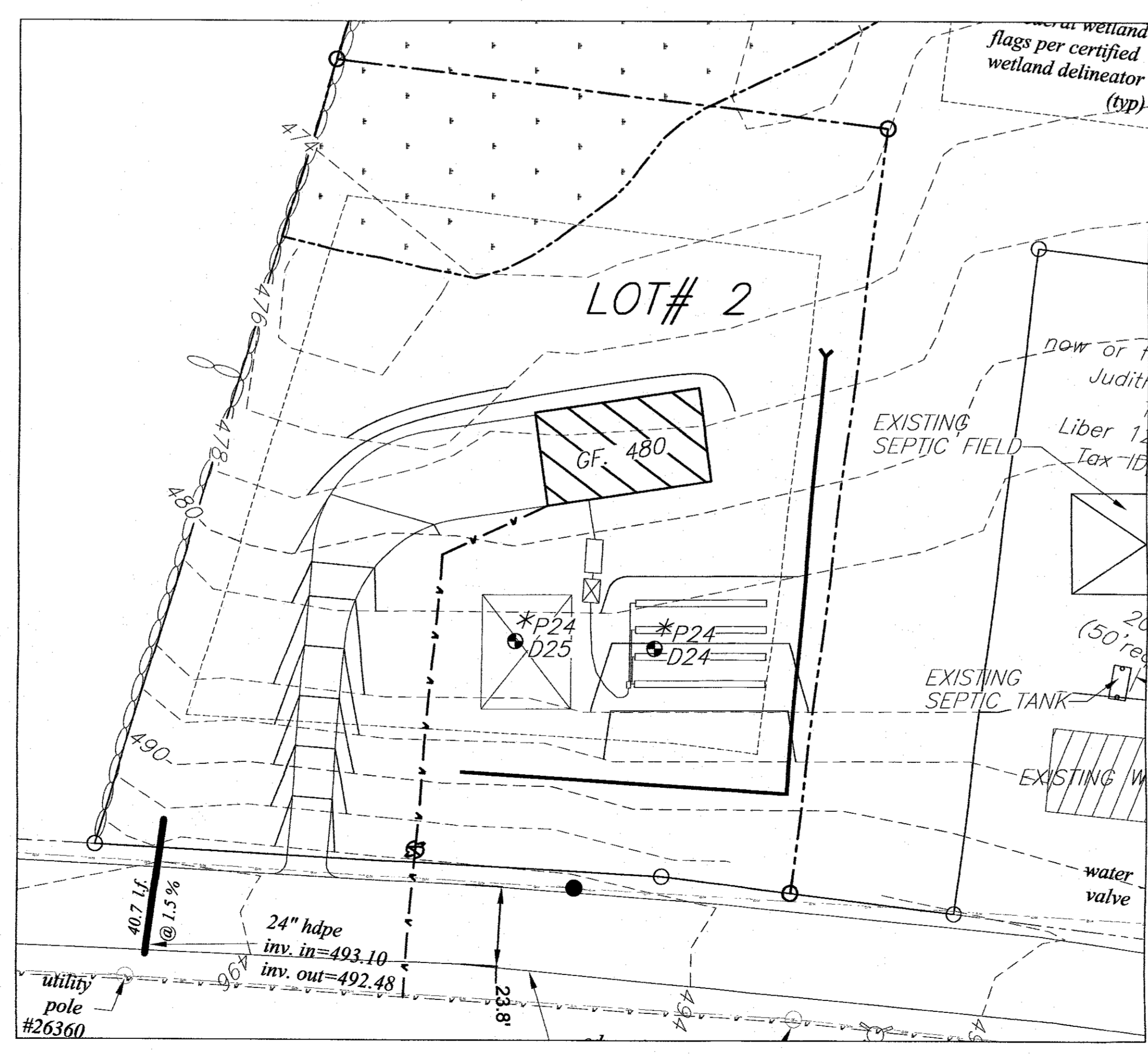
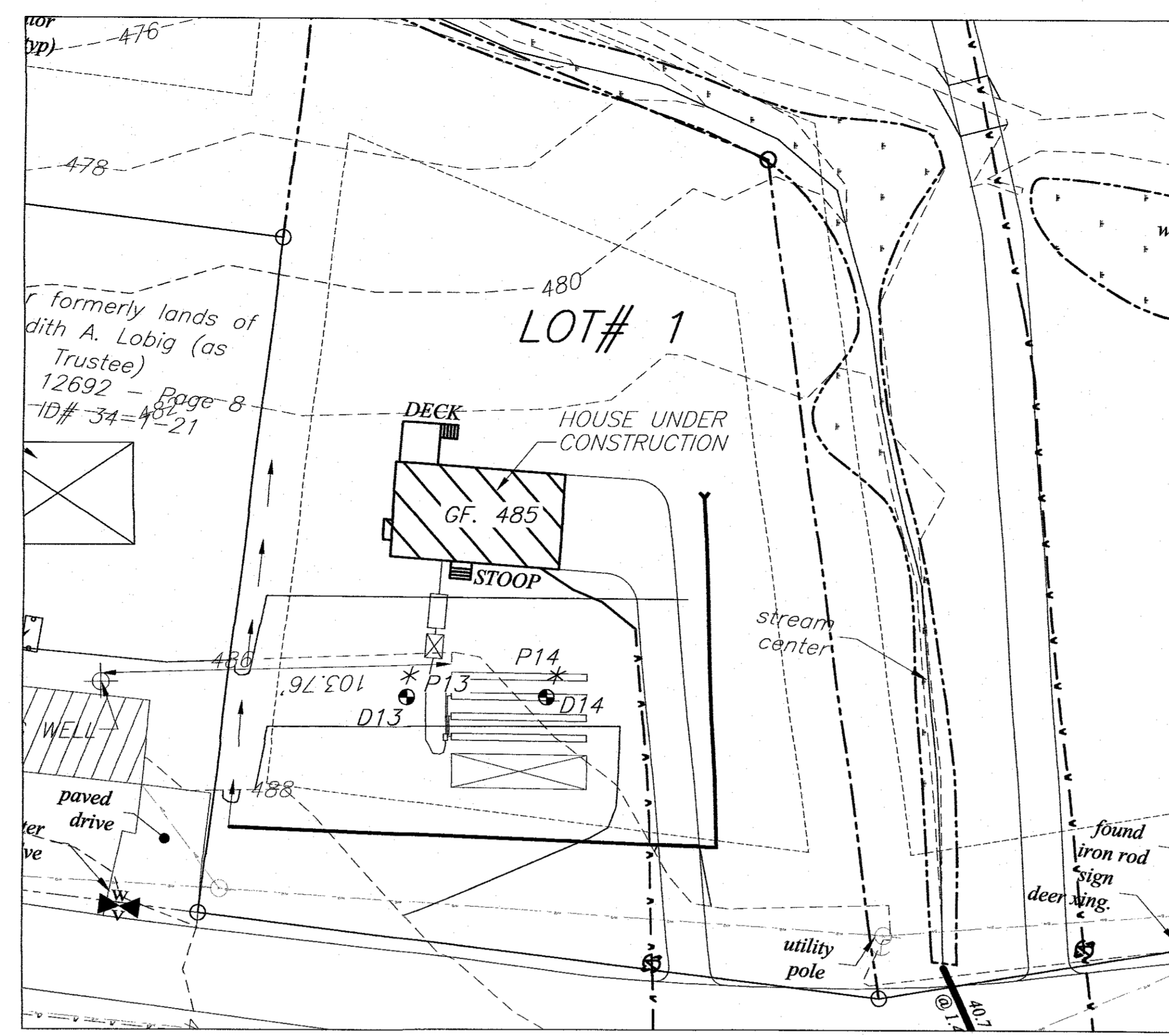
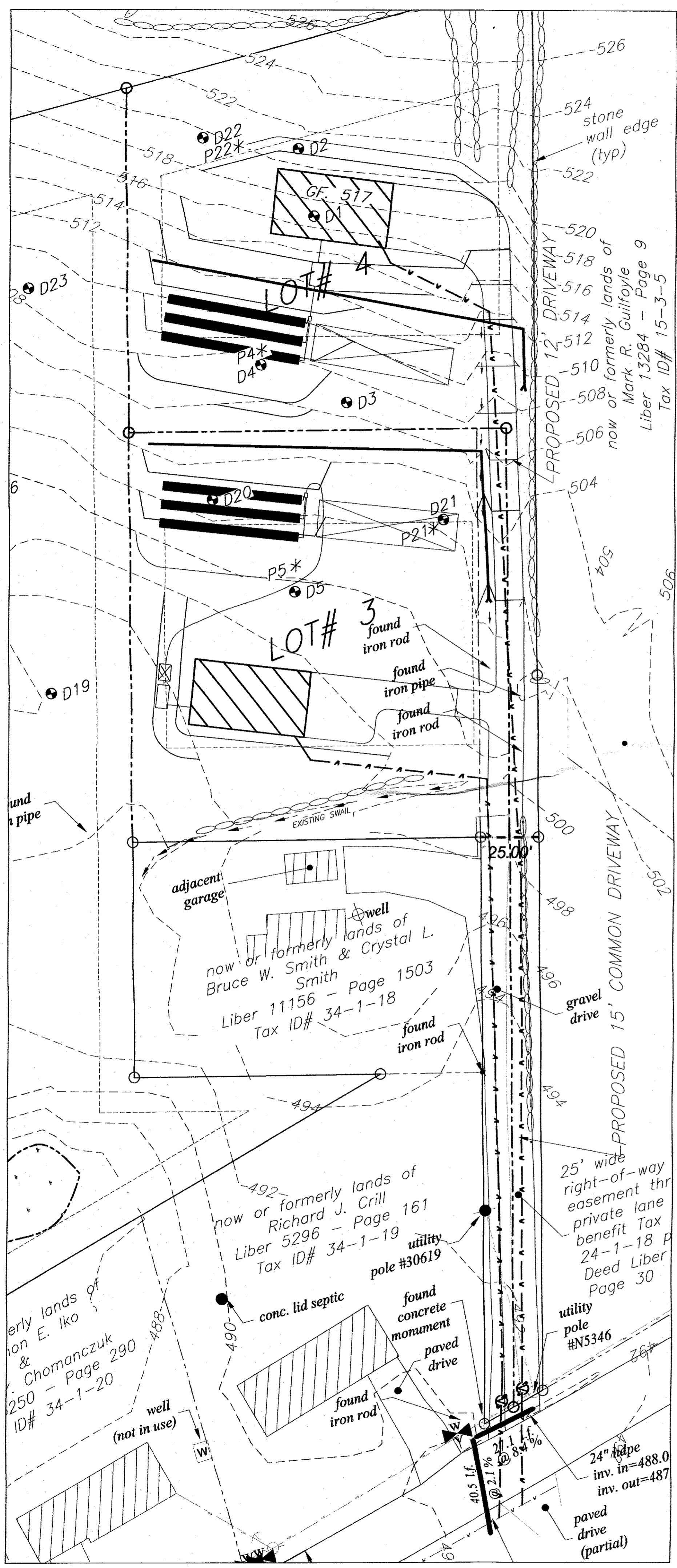
REV.	DATE	BY	DESCRIPTION

TOWN OF NEWBURGH PROJECT # 2017-04  
THIS SHEET IS INVALID AND VOID UNLESS ACCOMPANIED BY REMAINING SHEETS IN SET.

	<p><b>ENGINEER</b> <b>TALCOTT ENGINEERING DESIGN PLLC</b></p> <p>1 GARDNERTOWN ROAD NEWBURGH, NY 12550 (845)-589-8400 (FAX)(845)-589-4583 TALCOTTDDESIGN12@GMAIL.COM</p>
	<p><b>PROPOSED SUBDIVISION ENTITLED</b> <b>HUDSON ASSET</b> <b>UNION AVENUE, S-B-L: 34-1-25.1</b> <b>TOWN OF NEWBURGH, ORANGE COUNTY, NY</b></p>
<p>DATE: 01/20/17</p>	<p>SCALE: 1" = 50'</p>
<p>JOB NUMBER: 16022 - MMR</p>	<p>SHEET NUMBER: 1 OF 5</p>



WHETHER YOU'RE LAYING A FOUNDATION FOR A BUILDING OR PLANTING A TREE, YOU MUST FIRST CHECK FOR THE EXISTENCE OF UNDERGROUND UTILITY LINES AND CABLES. IF YOU OR YOUR CONTRACTOR DISRUPT ANY OF THESE LINES, THE RESULTS CAN BE DANGEROUS AND COSTLY--TO EVERYONE. CALL BEFORE YOU DIG, TOLL FREE, 811



TOWN OF NEWBURGH PROJECT # 2017-04  
THIS SHEET IS INVALID AND VOID UNLESS ACCOMPANIED BY REMAINING SHEETS IN SET.

**TOWN OF NEWBURGH CERTIFICATION:**  
"I HEREBY CERTIFY TO THE TOWN OF NEWBURGH THAT THE SEWERAGE SYSTEM DEPICTED ON THIS PLAN HAS BEEN DESIGNED IN ACCORDANCE WITH THE NEW YORK STATE PUBLIC HEALTH LAW AND ALL REGULATIONS PROMULGATED THEREUNDER."

REV.	DATE	BY	DESCRIPTION

**ENGINEER**  
CHARLES T. BROWN, P.E.

**TALCOTT ENGINEERING DESIGN PLLC**  
1 CARDNERTOWN ROAD  
NEWBURGH, NY 12550  
(845)-569-8400  
(FAX) (845)-569-4383  
TALCOTTDESIGN12@GMAIL.COM

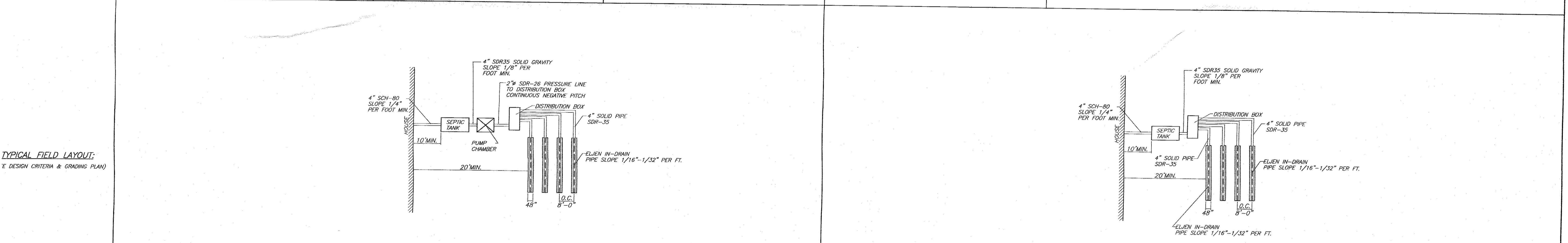
**PROPOSED SUBDIVISION ENTITLED HUDSON ASSET**  
UNION AVENUE, S-B-L: 34-1-25.1  
TOWN OF NEWBURGH, ORANGE COUNTY, NY

DATE: 01/20/17  
SCALE: 1" = 30'  
JOB NUMBER: 16022-MMR  
SHEET NUMBER: 2 OF 3



LOT #	LOT 1	LOT 2	LOT 3	LOT 4	LOT 5
DEEP TEST DATA:	D13 56" DEEP 03/15/16 0-5" TOP SOIL 5"-56" CLAY LOAM W/GRAVEL NO ROCK, WATER @ 53", MOTTLING @ 38"  D14 60" DEEP 03/15/16 0-6" TOP SOIL 5"-60" CLAY LOAM NO ROCK, WATER @ BOTTOM, MOTTLING @ 34"	D24 60" DEEP 11/08/16 0-5" TOP SOIL 5"-48" GRAVELLY CLAY LOAM NO ROCK, WATER @ 48", NO MOTTLING  D25 44" DEEP 11/08/16 0-5" TOP SOIL 5"-44" GRAVELLY CLAY LOAM NO ROCK, WATER @ 44", NO MOTTLING	D5 64" DEEP 03/15/16 0-5" TOP SOIL 5"-64" CLAY LOAM W/GRAVEL SOME MOTTLING NO ROCK, WATER @ 62", MOTTLING @ 32"  D20 60" DEEP 04/22/16 0-8" TOP SOIL 8"-44" SILTY CLAY LOAM 44"-60" WET NO ROCK, WATER @ 60", MOTTLING @ 60"  D21 54" DEEP 4/22/16 0-8" TOP SOIL 8"-54" SILTY LOAM W/GRAVEL NO ROCK, WATER, MOTTLING	D1 60" DEEP 03/15/16 0-8" TOP SOIL 8"-60" GRAVELLY CLAY LOAM ROCK @ 60", NO WATER, MOTTLING  D2 36" DEEP 03/15/16 0-4" TOP SOIL 4"-30" GRAVELLY CLAY LOAM 30"-36" SILTY CLAY LOAM ROCK @ 36", NO WATER, MOTTLING  D3 64" DEEP 03/15/16 0-5" TOP SOIL 5"-54" CLAY LOAM GRAVEL 54"-64" GRAVELLY CLAY LOAM NO ROCK, WATER @ 60", MOTTLING @ 60"  D4 70" DEEP 03/15/16 0-5" TOP SOIL 5"-54" GRAVELLY CLAY LOAM 54"-70" GRAVELLY CLAY LOAM WET NO ROCK, NO WATER, NO MOTTLING  D22 58" DEEP 04/22/16 0-4" TOP SOIL 4"-58" SILTY LOAM ROCK @ 58", NO WATER, MOTTLING	D12 44" DEEP 03/15/16 0-5" TOP SOIL 5"-41" GRAVELLY CLAY LOAM ROCK @ BOTTOM, NO WATER, MOTTLING @ 16"  D16 60" DEEP 04/22/16 0-5" TOP SOIL 5"-40" CLAY LOAM W/STONES 40"-60" GRAVELLY CLAY LOAM NO ROCK, WATER, MOTTLING @ 18"  D17 60" DEEP 4/22/16 0-4" TOP SOIL 5"-16" MOTTLED CLAY W/STONE 16"-60" CLAY LOAM W/STONE NO ROCK, WATER, MOTTLING @ 4" & 60"  D18 47" DEEP 04/22/16 0-6" TOP SOIL 5"-47" CLAY LOAM W/GRAVEL NO ROCK, WATER, MOTTLING @ 18"

PERCOLATION DATA:	* P13 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td>FINISH</td><td>12:40</td><td>1:11</td><td>1:50</td><td>2:26</td><td>3:06</td></tr> <tr><td>START</td><td>12:19</td><td>12:41</td><td>1:16</td><td>1:51</td><td>2:30</td></tr> <tr><td>TIME</td><td>:21</td><td>:30</td><td>:34</td><td>:35</td><td>:36</td></tr> </table> STABILIZED PERCOLATION RATE: 35 MINUTES /INCH  * P14 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr> <tr><td>FINISH</td><td>1:10</td><td>1:38</td><td>2:09</td><td>2:45</td><td>3:25</td><td>4:02</td></tr> <tr><td>START</td><td>12:47</td><td>1:11</td><td>1:39</td><td>2:11</td><td>2:50</td><td>3:26</td></tr> <tr><td>TIME</td><td>:23</td><td>:27</td><td>:30</td><td>:34</td><td>:35</td><td>:36</td></tr> </table> STABILIZED PERCOLATION RATE: 35 MINUTES /INCH	1	2	3	4	5	FINISH	12:40	1:11	1:50	2:26	3:06	START	12:19	12:41	1:16	1:51	2:30	TIME	:21	:30	:34	:35	:36	1	2	3	4	5	6	FINISH	1:10	1:38	2:09	2:45	3:25	4:02	START	12:47	1:11	1:39	2:11	2:50	3:26	TIME	:23	:27	:30	:34	:35	:36	* P24 12" DEEP 11/08/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td>FINISH</td><td>2:01</td><td>2:12</td><td>2:26</td><td>2:40</td></tr> <tr><td>START</td><td>1:54</td><td>2:02</td><td>2:13</td><td>2:27</td></tr> <tr><td>TIME</td><td>:07</td><td>:10</td><td>:13</td><td>:13</td></tr> </table> STABILIZED PERCOLATION RATE: 13 MINUTES /INCH  * P25 12" DEEP 11/08/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td>FINISH</td><td>3:13</td><td>3:24</td><td>3:46</td><td>3:59</td><td>4:12</td></tr> <tr><td>START</td><td>3:09</td><td>3:13</td><td>3:35</td><td>3:46</td><td>3:46</td></tr> <tr><td>TIME</td><td>:04</td><td>:11</td><td>:11</td><td>:13</td><td>:13</td></tr> </table> STABILIZED PERCOLATION RATE: 13 MINUTES /INCH	1	2	3	4	FINISH	2:01	2:12	2:26	2:40	START	1:54	2:02	2:13	2:27	TIME	:07	:10	:13	:13	1	2	3	4	5	FINISH	3:13	3:24	3:46	3:59	4:12	START	3:09	3:13	3:35	3:46	3:46	TIME	:04	:11	:11	:13	:13	* P5 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td>FINISH</td><td>11:43</td><td>12:20</td><td>1:12</td><td>2:09</td></tr> <tr><td>START</td><td>11:24</td><td>11:44</td><td>12:21</td><td>1:22</td></tr> <tr><td>TIME</td><td>:19</td><td>:36</td><td>:56</td><td>:56</td></tr> </table> STABILIZED PERCOLATION RATE: 51 MINUTES /INCH  * P21 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>FINISH</td><td>10:31</td><td>11:14</td><td>11:57</td></tr> <tr><td>START</td><td>10:01</td><td>10:32</td><td>11:15</td></tr> <tr><td>TIME</td><td>:30</td><td>:42</td><td>:42</td></tr> </table> STABILIZED PERCOLATION RATE: 42 MINUTES /INCH	1	2	3	4	FINISH	11:43	12:20	1:12	2:09	START	11:24	11:44	12:21	1:22	TIME	:19	:36	:56	:56	1	2	3	FINISH	10:31	11:14	11:57	START	10:01	10:32	11:15	TIME	:30	:42	:42	* P4 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td>FINISH</td><td>11:24</td><td>12:18</td><td>1:09</td><td>2:00</td></tr> <tr><td>START</td><td>11:02</td><td>11:25</td><td>12:19</td><td>1:10</td></tr> <tr><td>TIME</td><td>:22</td><td>:48</td><td>:50</td><td>:50</td></tr> </table> STABILIZED PERCOLATION RATE: 50 MINUTES /INCH  * P22 12" DEEP 06/15/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td>FINISH</td><td>11:13</td><td>11:52</td><td>12:41</td><td>1:30</td></tr> <tr><td>START</td><td>10:46</td><td>11:14</td><td>11:53</td><td>12:42</td></tr> <tr><td>TIME</td><td>:27</td><td>:38</td><td>:48</td><td>:48</td></tr> </table> STABILIZED PERCOLATION RATE: 48 MINUTES /INCH	1	2	3	4	FINISH	11:24	12:18	1:09	2:00	START	11:02	11:25	12:19	1:10	TIME	:22	:48	:50	:50	1	2	3	4	FINISH	11:13	11:52	12:41	1:30	START	10:46	11:14	11:53	12:42	TIME	:27	:38	:48	:48	* P17 12" DEEP 11/08/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>FINISH</td><td>12:00</td><td>12:58</td><td>2:00</td></tr> <tr><td>START</td><td>11:20</td><td>12:00</td><td>1:00</td></tr> <tr><td>TIME</td><td>:40</td><td>:58</td><td>:60</td></tr> </table> STABILIZED PERCOLATION RATE: 60 MINUTES /INCH  * P16 12" DEEP 11/08/16 <table border="1"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>FINISH</td><td>11:42</td><td>12:35</td><td>2:28</td></tr> <tr><td>START</td><td>11:00</td><td>11:43</td><td>12:36</td></tr> <tr><td>TIME</td><td>:42</td><td>:52</td><td>:52</td></tr> </table> STABILIZED PERCOLATION RATE: 52 MINUTES /INCH	1	2	3	FINISH	12:00	12:58	2:00	START	11:20	12:00	1:00	TIME	:40	:58	:60	1	2	3	FINISH	11:42	12:35	2:28	START	11:00	11:43	12:36	TIME	:42	:52	:52
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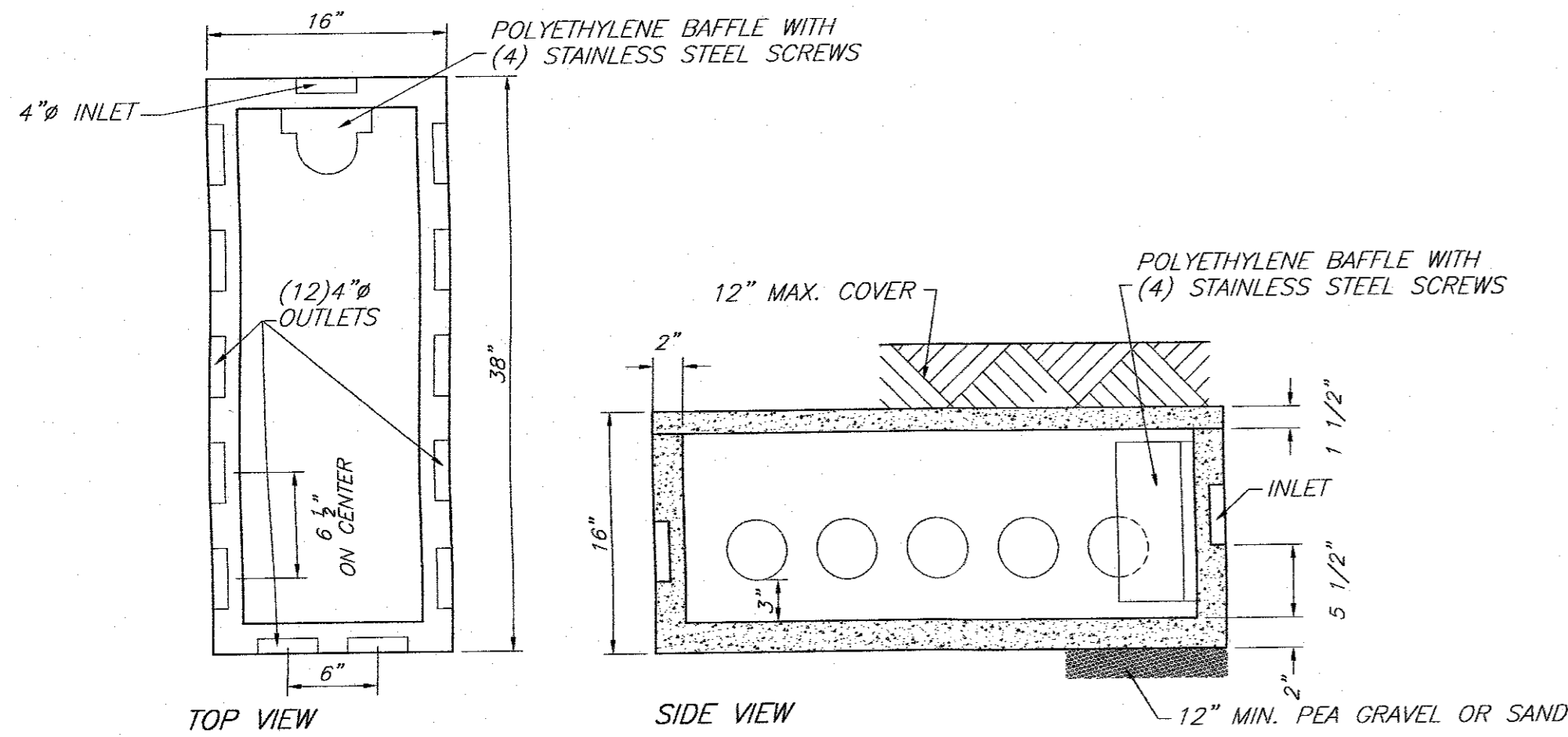


SEPTIC DESIGN CRITERIA:	1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 31-45 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 4 ROWS OF 10 ELJEN UNITS(40'ROWS) = 40 units total(37units REQ'D) * 6. SHALLOW FILL SYSTEM 7. PUMP CHAMBER REQUIRED 8. CURATAIN DRAIN REQUIRED  NOTE: HOUSE UNDER CONSTRUCTION	1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 16-20 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 4 ROWS OF 10 ELJEN UNITS(60'ROWS) = 40 units total(27units REQ'D) * 6. SHALLOW FILL SYSTEM 7. PUMP CHAMBER REQUIRED 8. CURATAIN DRAIN REQUIRED	1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 46-60 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 3 ROWS OF 15 ELJEN UNITS(60'ROWS) = 45 units total(41units REQ'D) * 6. SHALLOW FILL SYSTEM 7. PUMP CHAMBER REQUIRED 8. CURATAIN DRAIN REQUIRED	1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 60-45 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 3 ROWS OF 15 ELJEN UNITS(60'ROWS) = 45 units total(41units REQ'D) * 6. SHALLOW FILL SYSTEM 7. PUMP CHAMBER REQUIRED 8. CURATAIN DRAIN REQUIRED	1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 46-60 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 3 ROWS OF 15 ELJEN UNITS(60'ROWS) = 45 units total(41units REQ'D) * 6. RAISED FILL SYSTEM 7. PUMP CHAMBER REQUIRED 8. CURATAIN DRAIN REQUIRED
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TOWN OF NEWBURGH PROJECT # 2017-04  
THIS SHEET IS INVALID AND VOID UNLESS ACCOMPANIED BY REMAINING SHEETS IN SET.

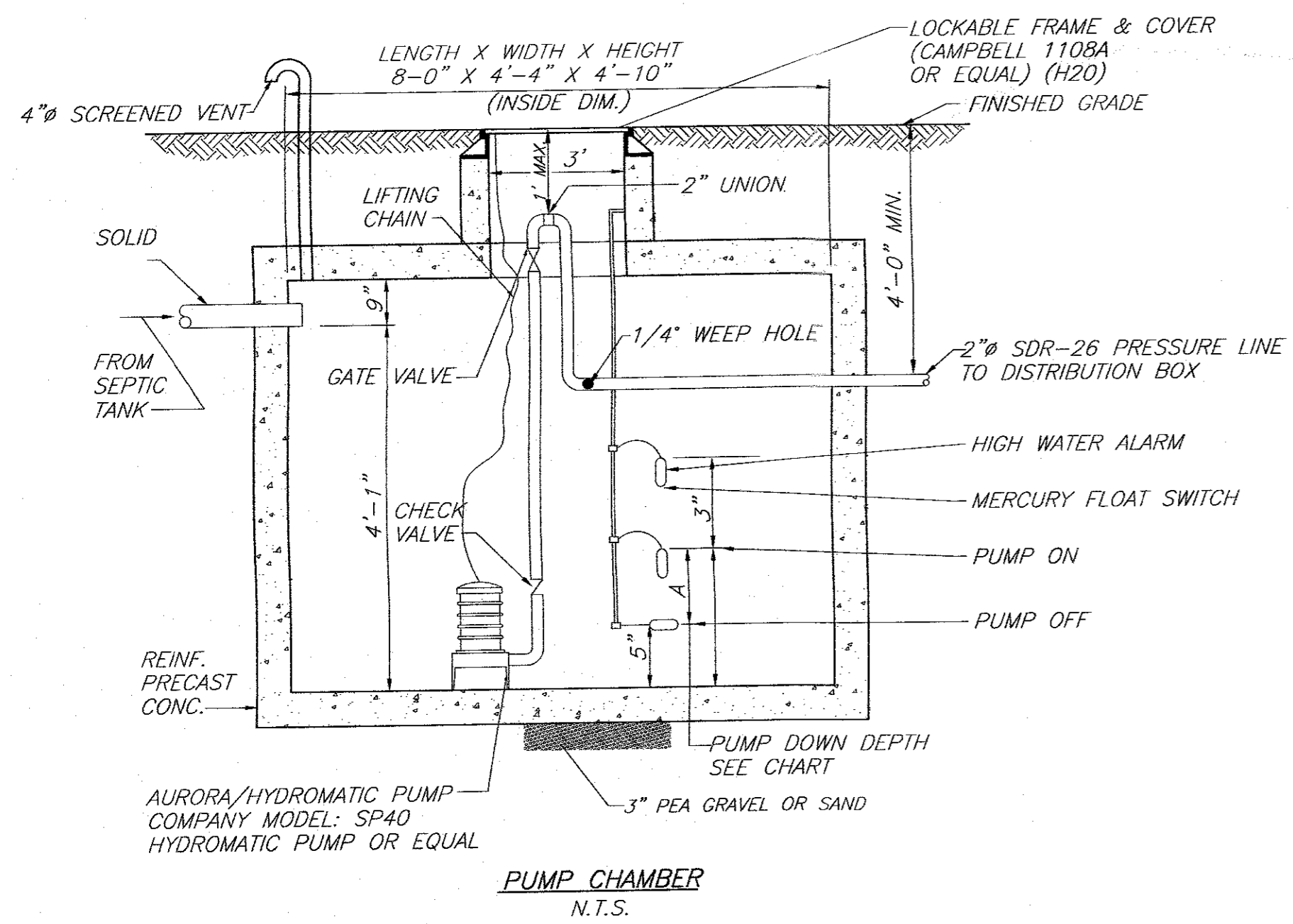
ENGINEER	TALCOTT ENGINEERING DESIGN PLLC		
	1 GARDNERTOWN ROAD NEWBURGH, NY 12550 (845)-569-8400 (FAX)(845)-569-1263 TALCOTTDESIGN12@GMAIL.COM		
	PROPOSED SUBDIVISION ENTITLED <b>HUDSON ASSET</b> UNION AVENUE, S-B-L: 34-1-25.1 TOWN OF NEWBURGH, ORANGE COUNTY, NY		
DATE	SCALE	JOB NUMBER	SHEET NUMBER
01/20/17	N.T.S.	16022- MMR	3 OF 5

\* SEWAGE DISPOSAL SYSTEMS MUST BE CONSTRUCTED USING THE "ELJEN B43 GSF TRENCH" AS MANUFACTURED BY ELJEN SYSTEMS. SEE ELJEN SYSTEMS NOTES AND DETAILS ON SHEET 4



**WOODARD'S 12 OUTLET DISTRIBUTION BOX OR EQUAL**  
N.T.S.

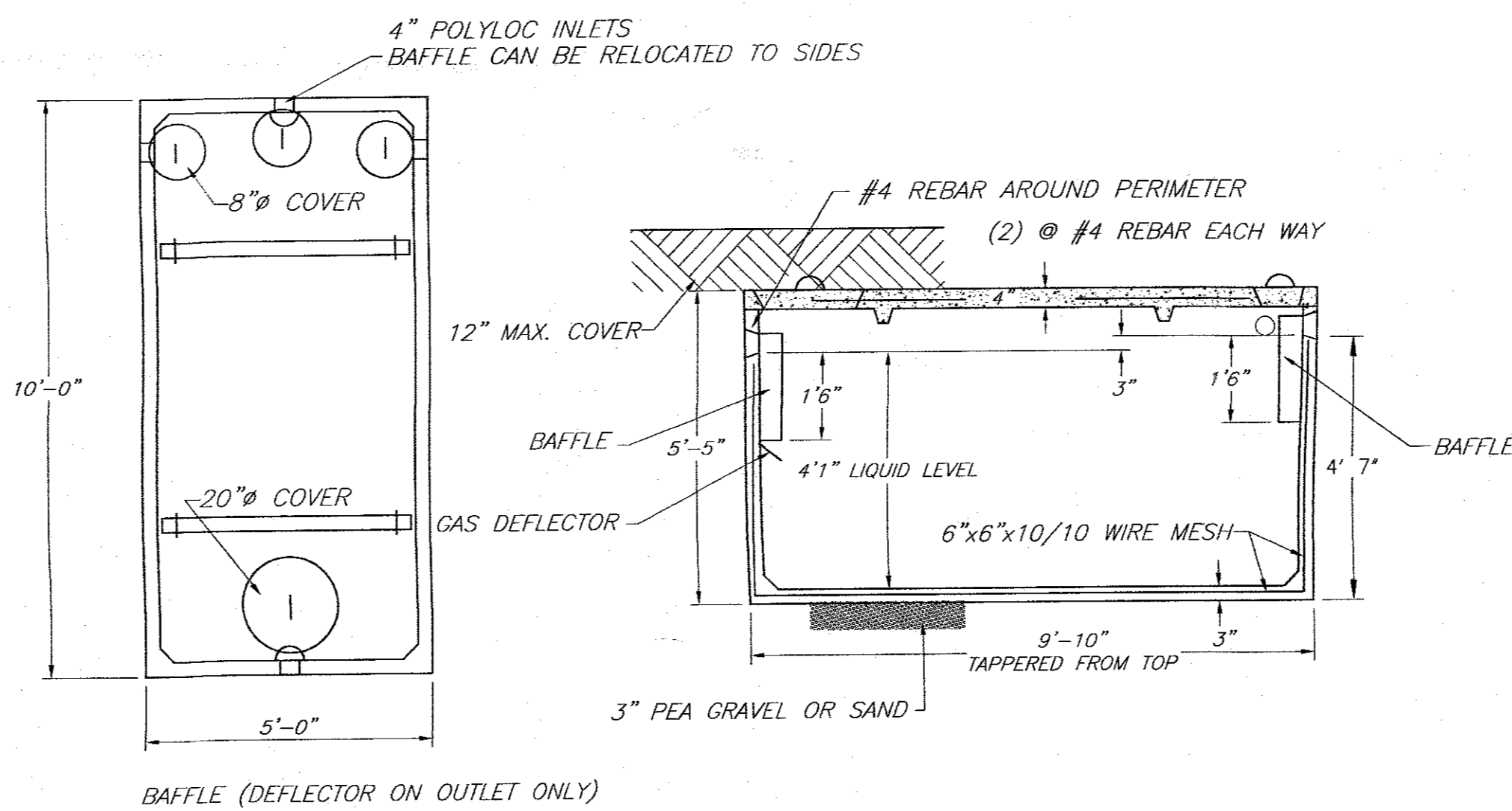
SPECIFICATIONS	
CONCRETE MINIMUM STRENGTH-	4,000 PSI AT 28 DAYS
REINFORCEMENT-	6"x6"10GA. WIRE MESH
AIR ENTRAPMENT-	5%
PIPE CONNECTION-	POLYLOK SEAL (PATENTED)
LOAD RATING-	300PSF WEIGHT= 325 LBS.



**PUMP CHAMBER**  
N.T.S.

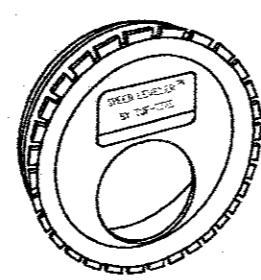
**PUMP CHAMBER NOTES:**

- CONTRACTOR SHALL DETERMINE LENGTHS OF REQUIRED ELECTRICAL CABLE AND AVAILABLE VOLTAGE PRIOR TO ORDERING EQUIPMENT.
- ALL WIRING SHALL CONFORM TO NATIONAL ELECTRICAL CODE & LOCAL CODE REQUIREMENTS.
- THE POWER AND CONTROL WIRING SHALL BE MADE DIRECTLY TO THE CONTROL PANEL WITHOUT AND OUTSIDE SPLICES. CONTROL PANEL TO BE LOCATED INSIDE BASEMENT OF HOUSE AUDIBLE ALARMS AND FLASHING LIGHT.
- A N.Y.S. PROFESSIONAL ENGINEER MUST CERTIFY TO THE CONSTRUCTION OF THE SYSTEM.
- QUANTITY DOSED IS BASED UPON 75% OF 4" PIPE AND 100% OF FORCE MAIN.
- QUANTITY STORED IS BASED UPON (1) DAYS FLOW MINIMUM.
- AS-BUILT MUST SHOW FORCE MAIN LOCATION.



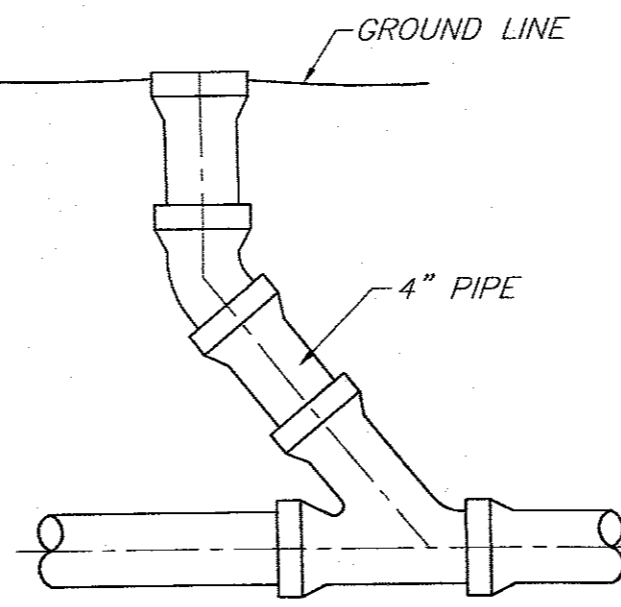
**WOODARD'S 1250gal. SEPTIC TANK OR EQUAL**  
N.T.S.

SPECIFICATIONS	
CONCRETE MINIMUM STRENGTH-	4,000 PSI AT 28 DAYS
REINFORCEMENT-	6"x6"10GA. WWF, #4 REBAR
AIR ENTRAPMENT-	5%
CONSTRUCTION JOINT-	BUTYL RUBBER - BASE CEMENT
PIPE CONNECTION-	POLYLOK SEAL (PATENTED)
LOAD RATING-	300PSF WEIGHT = 9,500LBS



- INSERT A SPEED LEVELER IN THE END OF ALL OUTLET PIPES IN THE DROPBOX.
- ROTATE UNTIL EFFLUENT ENTERS ALL OUTLETS EQUALLY.

**WOODARD'S SPEED LEVELER FSL-4**  
N.T.S.

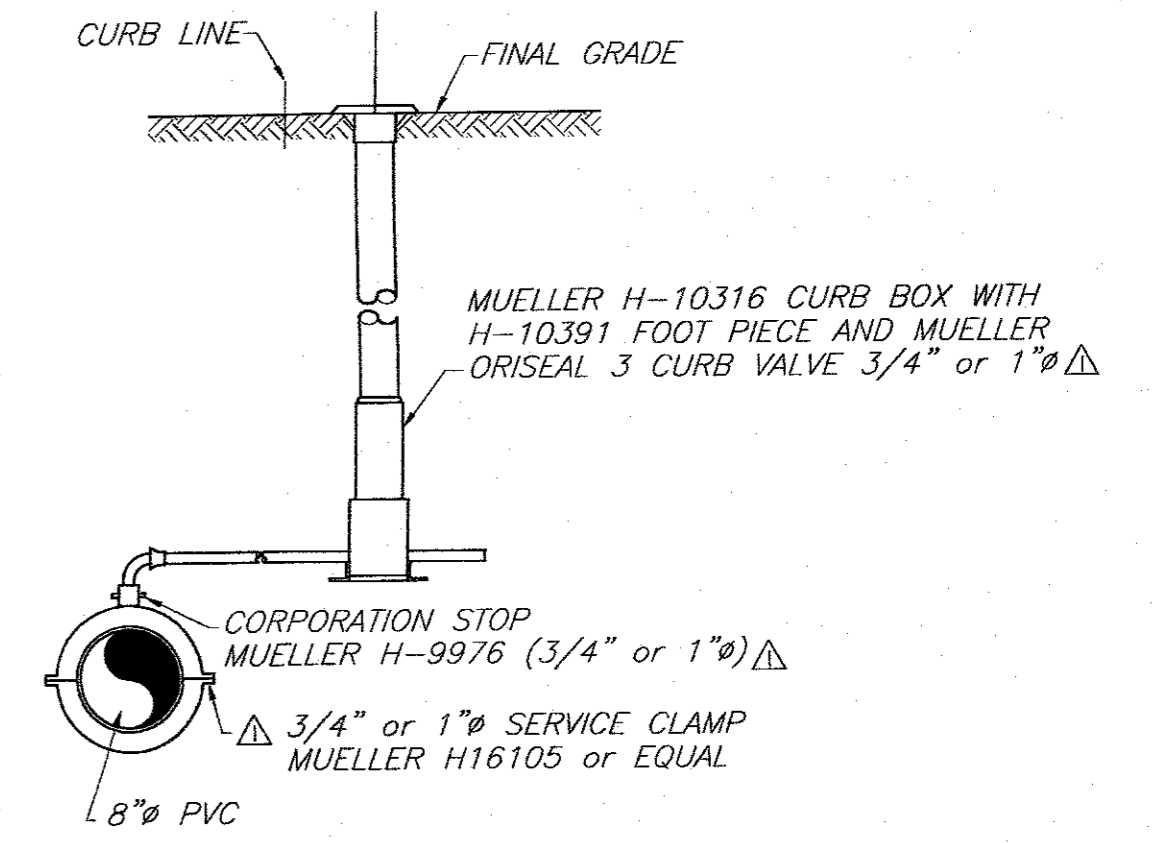


**CLEANOUT DETAIL**  
N.T.S.

TO BE INSTALLED BEFORE BEND AT ALL BEND LOCATIONS AND AT EVERY 75' OF STRAIGHT PIPE. (DO NOT USE WITH PUMP CHAMBER)

**TOWN OF NEWBURGH WATER SERVICE NOTES**

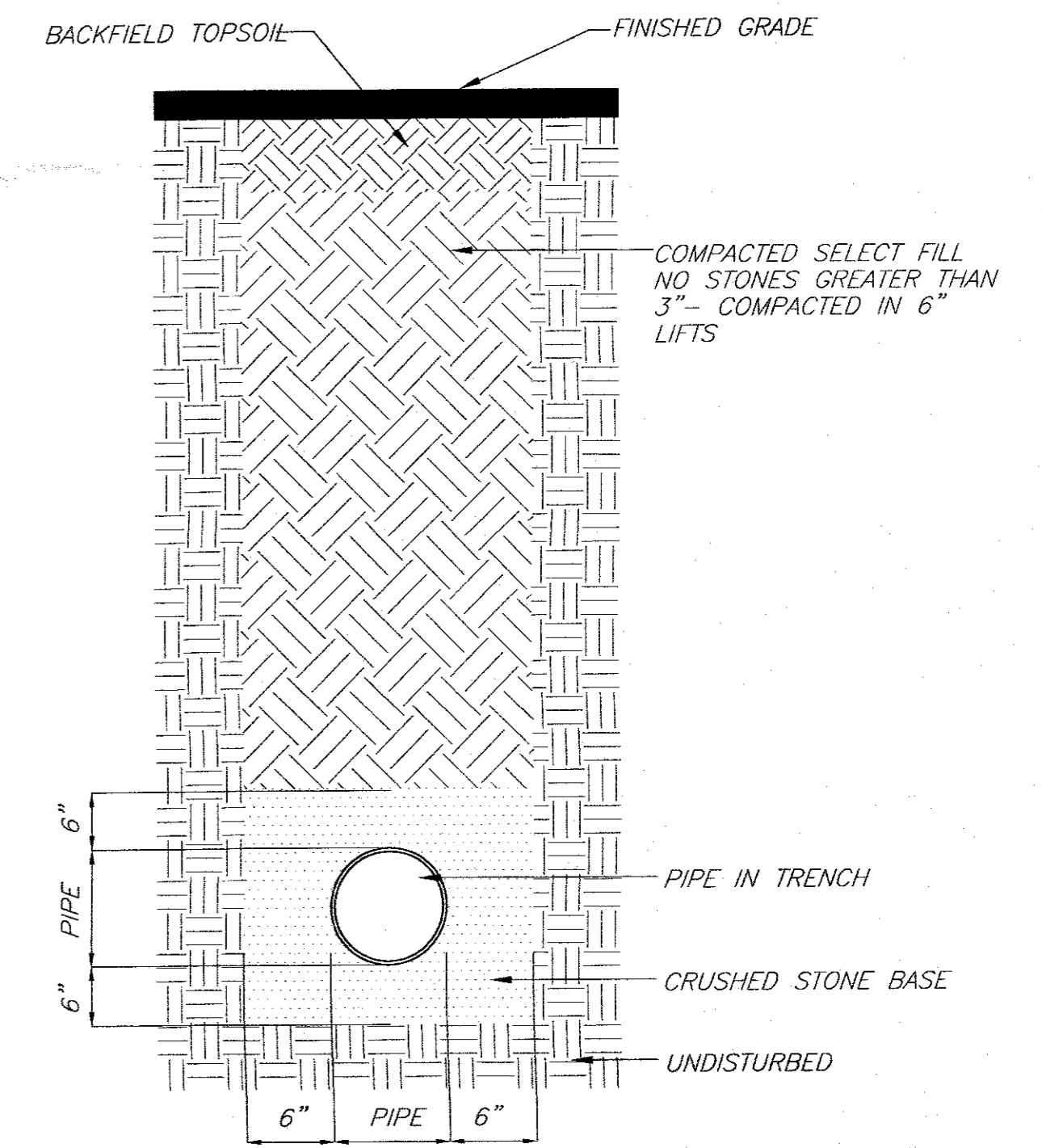
- CONSTRUCTION OF POTABLE WATER UTILITIES AND CONNECTION TO THE T.O.N. WATER SYSTEM REQUIRES A PERMIT FROM THE T.O.N. WATER DEPARTMENT. ALL WORK AND MATERIALS SHALL CONFORM TO THE REQUIREMENTS OF THE NYSDOH AND THE T.O.N.
- ALL WATER SERVICE LINES FOUR (4) INCHES AND LARGER IN DIAMETER SHALL BE CEMENT LINED CLASS 52 DUCTILE IRON PIPE CONFORMING TO ANSI/AWWA C151/A21.51-91 FOR DUCTILE IRON PIPE. JOINTS SHALL BE EITHER PUSH-ON OR MECHANICAL JOINT AS REQUIRED.
- THRUST RESTRAINT OF THE PIPE SHALL BE THROUGH THE USE OF JOINT RESTRAINT. THRUST BLOCKS ARE NOT ACCEPTABLE. JOINT RESTRAINT SHALL BE THROUGH THE USE OF MECHANICAL JOINT PIPE WITH RETAINER GLANDS. ALL FITTINGS AND VALVES SHALL BE INSTALLED WITH RETAINER GLANDS FOR JOINT RESTRAINT. RETAINER GLANDS SHALL BE EBBA IRON MEGALUG SERIES 1100 OR APPROVED EQUAL. THE USE OF A MANUFACTURED RESTRAINED JOINT PIPE IS ACCEPTABLE WITH PRIOR APPROVAL OF THE WATER DEPARTMENT.
- ALL FITTINGS SHALL BE CAST IRON OR DUCTILE IRON, MECHANICAL JOINT, CLASS 250 AND CONFORM TO ANSI/AWWA C110/A21.10-87 FOR DUCTILE AND GRAY IRON FITTINGS OR ANSI/AWWA C153/A21.53-94 FOR DUCTILE IRON COMPACT FITTINGS.
- ALL VALVES 4 TO 12 INCHES SHALL BE RESILIENT WEDGE GATE VALVES CONFORMING TO ANSI/AWWA C509 SUCH AS MUELLER MODEL A-2360-23 OR APPROVED EQUAL. ALL GATE VALVES SHALL OPEN LEFT (COUNTERCLOCKWISE).
- TAPPING SLEEVE SHALL BE MECHANICAL JOINT SUCH AS MUELLER H-615 OR EQUAL. TAPPING VALVES 4 TO 12 INCHES SHALL BE RESILIENT WEDGE GATE VALVES CONFORMING TO ANSI/AWWA C509 SUCH AS MUELLER MODEL T-2360-19 OR APPROVED EQUAL. ALL TAPPING SLEEVES AND VALVES SHALL BE TESTED TO 150 PSI MINIMUM; TESTING OF THE TAPPING PRIOR TO CUTTING INTO THE PIPE.
- ALL WATER SERVICE LINES TWO (2) INCHES IN DIAMETER AND SMALLER SHALL BE TYPE K COPPER TUBING. CORPORATION STOPS SHALL BE MUELLER H-15020 FOR 3/4 AND 1 INCH, MUELLER H-15000 OR B-25000 FOR 1 1/2 AND 2 INCH SIZES. CURB VALVES SHALL BE MUELLER H-1502-2 FOR 3/4 AND 1 INCH AND MUELLER B-25204 FOR 1 1/2 AND 2 INCH SIZES. CURB BOXES SHALL BE MUELLER H-10314 FOR 3/4 AND 1 INCH AND MUELLER H-10310 FOR 1 1/2 AND 2 INCH SIZES.
- ALL PIPE INSTALLATION SHALL BE SUBJECT TO INSPECTION BY THE T.O.N. WATER DEPARTMENT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR COORDINATING ALL INSPECTIONS AS REQUIRED WITH THE T.O.N. WATER DEPARTMENT.
- THE WATER MAIN SHALL BE TESTED, DISINFECTED AND FLUSHED IN ACCORDANCE WITH THE T.O.N. REQUIREMENTS. ALL TESTING, DISINFECTION AND FLUSHING SHALL BE COORDINATED WITH THE T.O.N. WATER DEPARTMENT. PRIOR TO PUTTING THE WATER MAIN IN SERVICE SATISFACTORY SANITARY RESULTS FROM A CERTIFIED LAB MUST BE SUBMITTED TO THE T.O.N. WATER DEPARTMENT. THE TEST SAMPLES MUST BE COLLECTED BY A REPRESENTATIVE OF THE TESTING LABORATORY AND WITNESSED BY THE WATER DEPARTMENT.



**NOTES**

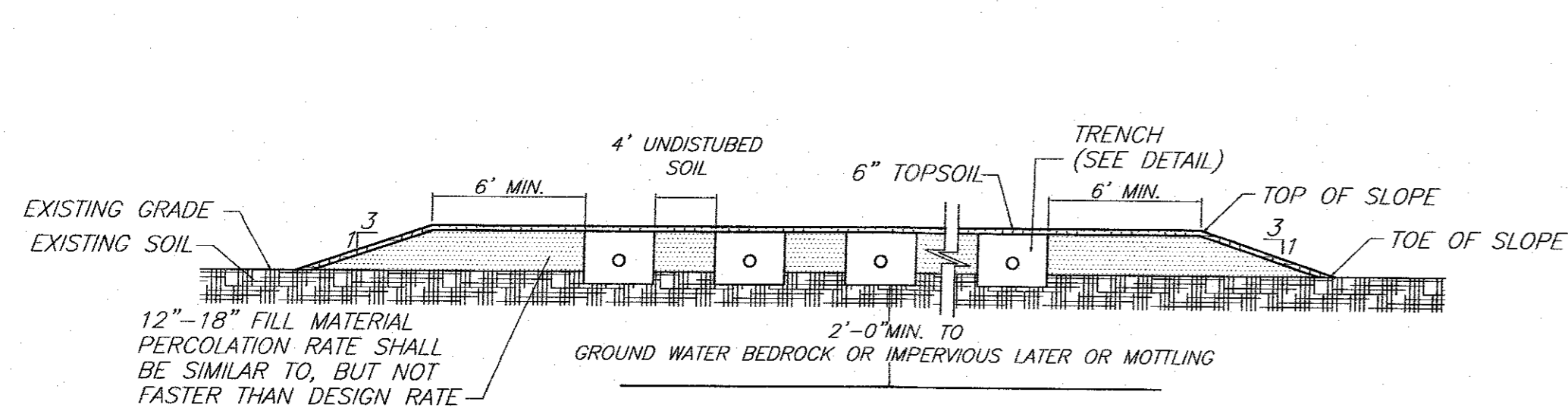
- ALL WATER SERVICE LINES TO BE VERY HIGH MOLECULAR WEIGHT POLYETHYLENE (PE 3408) w/COPPER COMPRESSION TYPE (MUELLER 110, OR EQUAL) FITTINGS. PIPE SHALL BE NSF-PW APPROVED FOR POTABLE WATER USE. TO BE PLACED AT 4'-6" MIN. DEPTH.
- PROVIDED SLEEVES WHERE CURB BOX LIP WILL BE SET IN CONCRETE
- THE FOLLOWING ACCESSORIES SHALL BE PROVIDED TO THE THE OWNER:
  - SIX (6) SPARE LIDS w/PLUG (MUELLER 89981)
  - TWO (2) PENTAGON KEYS (MUELLER H-10323)
  - TWO (2) SHUT-OFF KEYS (MUELLER H-10321)

**CURB STOP DETAIL**  
N.T.S.



**PIPE BEDDING DETAIL**  
NO SCALE

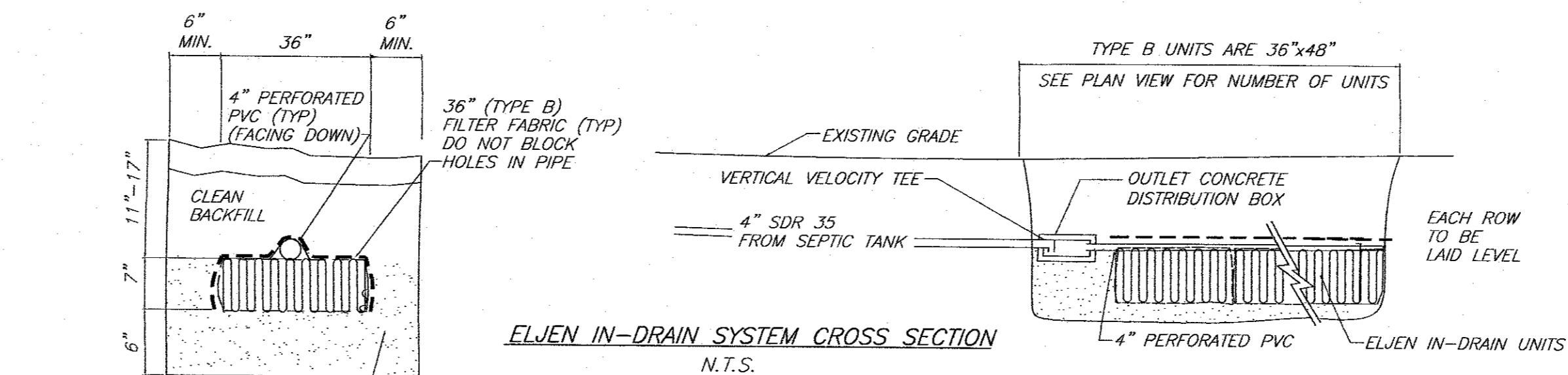
TOWN OF NEWBURGH PROJECT # 2017-04 THIS SHEET IS INVALID AND VOID UNLESS ACCOMPANIED BY REMAINING SHEETS IN SET.	
<b>ENGINEER</b>	<b>TALCOTT ENGINEERING DESIGN PLLC</b> 1 GARDNERTOWN ROAD NEWBURGH, NY 12550 (845)-569-8400 (FAX)(845)-569-4583 TALCOTTDESIGN12@GMAIL.COM
	<b>PROPOSED SUBDIVISION ENTITLED HUDSON ASSET</b> UNION AVENUE, S-B-L: 34-1-25.1 TOWN OF NEWBURGH, ORANGE COUNTY, NY
DATE: 01/20/17	SCALE: AS NOTED
JOB NUMBER: 16022-MMR	SHEET NUMBER: 4 OF 5



**SHALLOW SYSTEM DETAIL**  
N.T.S.

**NOTES:**

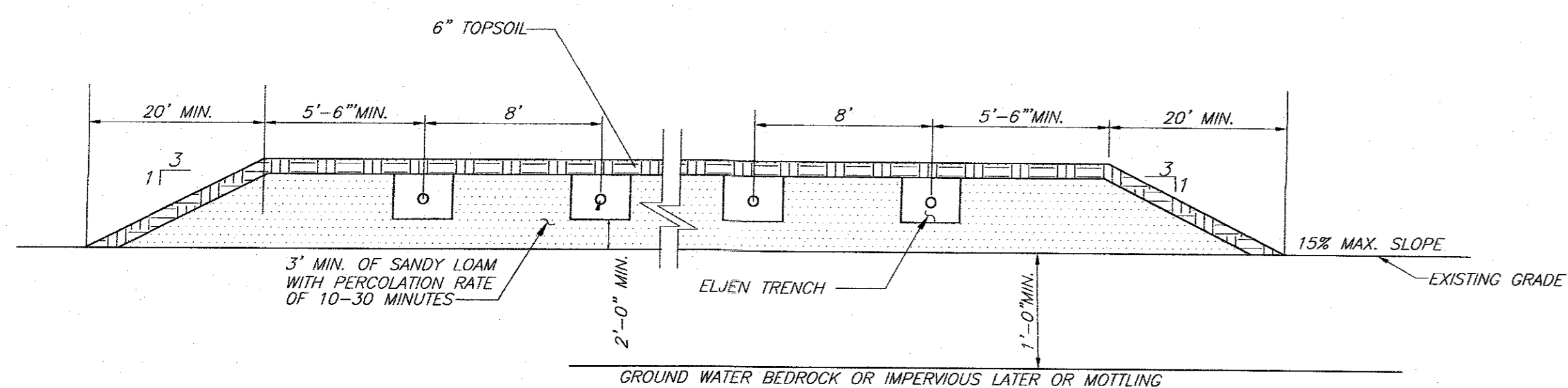
1. BOTTOM OF ALL TRENCHES SHALL NOT BE ABOVE ORIGINAL USABLE SOIL.
2. MAXIMUM DEPTH OF USABLE FILL PLUS 6" OF TOPSOIL SHALL NOT EXCEED 30".
3. MAXIMUM COVER OVER TRENCH AGGREGATE SHALL NOT EXCEED 12".



**ELJEN IN-DRAIN SYSTEM CROSS SECTION**  
N.T.S.

**ELJEN IN-DRAIN SYSTEM**  
N.T.S.

INSTALLER SHALL INSTALL A 6" LAYER ASTM C33 SAND WITH LESS THAN 10% PASSING #100 SIEVE AND LESS THAN 5% PASSING #200 SIEVE LISTED BELOW IS A CHART OUTLINING THE SIEVE REQUIREMENT FOR THE SPECIFIED SAND AS REQUIRED BY ELJEN.  
ASTM C33  
SAND SPECIFICATION

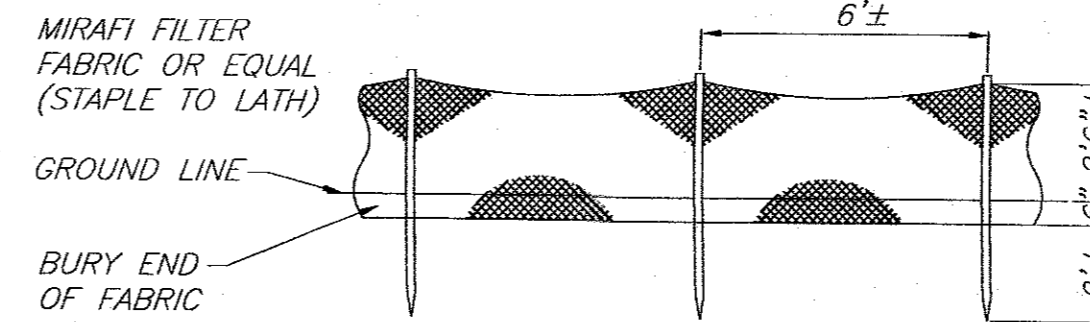


**RAISED SEPTIC SYSTEM GENERAL NOTES:**

1. PERCOLATION RATE OF FILL MATERIAL SHALL BE BETWEEN 5 AND 30 MINUTES PER INCH BOTH AT THE BORROW PIT PRIOR TO EXCAVATION AND AFTER THE MATERIAL HAS BEEN PLACED.
2. FILL SHALL BE EITHER PLACED IN 8" LIFTS AND COMPACTED WITH A TRACK TYPE MACHINE OR ALLOWED TO SETTLE FOR 6 MONTHS MINIMUM AND A FREEZE THAW CYCLE.
3. FILL MATERIAL SHALL EXTEND 3'-6" BEYOND END OF LATERALS, EACH END.
4. FILL MATERIAL WILL NOT BE PLACED WHEN UNDERLYING SOIL HAVE HIGH MOISTURE CONTENT.
5. ALL TREES, STUMPS BRUSH, WEEDS ETC. SHALL BE CUT AT GRADE AND REMOVED. ALL LEAVES, LIMBS, AND BOULDERS ABOVE GRADE SHALL BE CAREFULLY REMOVED.
6. SITE SOILS MUST BE LEFT UNDISTURBED PRIOR TO PLACEMENT OF FILL.

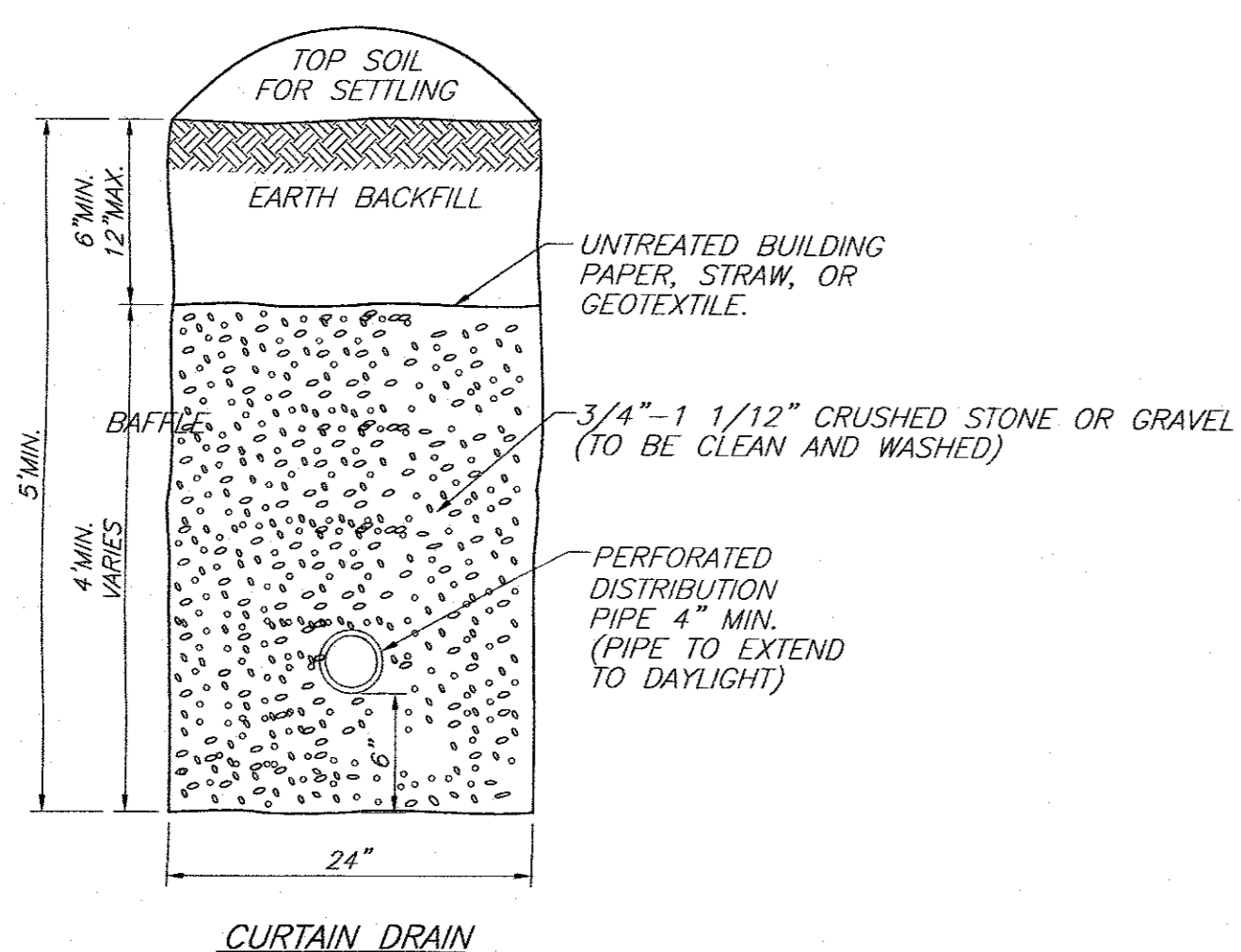
**NOTE:**

SILT FENCE IS TO BE INSTALLED PRIOR TO ANY CONSTRUCTION AND SHALL BE CHECKED AFTER EVERY RAIN STORM. SILT FENCES ARE TO BE REPLACED AS NECESSARY DUE TO DAMAGE OR WHEN FILLED WITH SILT. SILT TO BE REMOVED IN FRONT OF FENCES REGULARLY TO PREVENT EXCESSIVE SOIL BEARING WEIGHT ON THE FENCES AND FENCE POSTS.

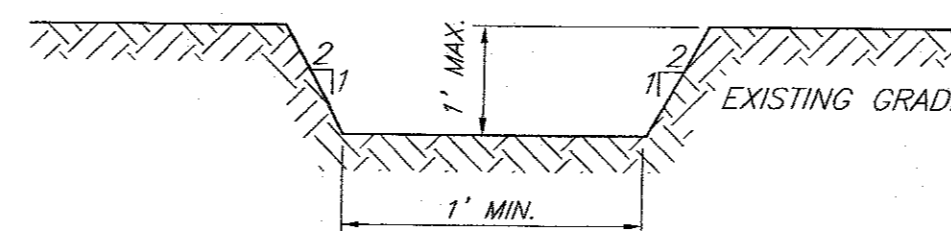


**SILT FENCE DETAIL**  
N.T.S.

IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO PROVIDE AND INITIALIZE EROSION CONTROL MEASURES. SILT FENCING IS TO BE USED FOR SILTATION CONTROL AROUND ALL AREAS THAT WILL BE DISRUPTED DURING CONSTRUCTION. SILT FENCING IS TO BE MAINTAINED TO THE SATISFACTION OF THE ENGINEER AND WILL BE REMOVED BY THE CONTRACTOR ONCE GROUND COVER IS REESTABLISHED.



**CURTAIN DRAIN**



**GRASS SWALE DETAIL**  
N.T.S.

**SEPTIC SYSTEM GENERAL NOTES:**

1. ALL PORTIONS OF THE SEPTIC FIELD WILL BE A MINIMUM DISTANCE OF 200 FEET UP SLOPE AND 100 FEET DOWN SLOPE FROM ANY WELL.
2. SEPTIC TANK TO BE LOCATED A MINIMUM DISTANCE OF 10 FEET FROM ANY BUILDING OR PROPERTY LINE AND 50' FROM WELL.
3. CELLAR DRAINS, ROOF DRAINS OR FOOTING DRAINS SHALL NOT BE DISCHARGED IN OR INTO THE VICINITY OF ABSORPTION FIELD.
4. NO SWIMMING POOLS, DRIVEWAYS, OR STRUCTURES THAT MAY COMPACT THE SOIL SHALL BE CONSTRUCTED OVER ANY PORTION OF THE ABSORPTION FIELD.
5. NO TRENCHES TO BE INSTALLED IN WET SOIL.
6. RAKE SIDES AND BOTTOM OF TRENCH PRIOR TO PLACING GRAVEL IN ABSORPTION TRENCH.
7. GROUT ALL PIPE PENETRATIONS TO CONC. SEPTIC TANK & DISTRIBUTION BOX.
8. DISTRIBUTION LINES ARE TO BE CAPPED.
9. THE PERIMETER OF THE ABSORPTION FIELD SHOULD BE GRADED TO DIVERT SURFACE WATER.
10. ALL NEWLY DISTURBED AREAS SHALL BE IMMEDIATELY STABILIZED UPON CONSTRUCTION COMPLETION USING GRASS SEED & MULCH.
11. NO SEWAGE SYSTEM SHALL BE PLACED WITHIN 100' OF ANY WATER COURSE OR 35' DRAINAGE DITCH.
12. ALL LAUNDRY AND KITCHEN WASTES SHALL BE DISCHARGED INTO SEWAGE SYSTEM.
13. BENDS SHALL BE USED WHEN ENTRANCE OR EXIT FROM SEPTIC TANK IS NOT APPROXIMATELY STRAIGHT. IF BENDS ARE USED AT POINTS OTHER THAN ENTRANCE OR EXIT POINTS, THEN A CLEANOUT IS REQUIRED.
14. THE DESIGN AND LOCATION OF THE SANITARY FACILITIES SHALL NOT BE CHANGED WITHOUT RESUBMISSION FOR APPROVAL.
15. HEAVY EQUIPMENT SHALL BE KEPT OFF THE AREA OF THE ABSORPTION FIELDS EXCEPT DURING THE ACTUAL CONSTRUCTION. THERE SHALL BE NO UNNECESSARY MOVEMENT OF CONSTRUCTION EQUIPMENT IN THE ABSORPTION FIELD AREA BEFORE, DURING, OR AFTER CONSTRUCTION.
16. THIS SYSTEM WAS NOT DESIGNED TO ACCOMMODATE GARBAGE GRINDERS, JACUZZI TYPE SPA TUBS OVER 100 GALLONS, OR WATER CONDITIONERS. AS SUCH, THESE ITEMS SHALL NOT BE INSTALLED UNLESS THE SYSTEM IS REDESIGNED TO ACCOUNT FOR THESE.
17. THERE MUST BE AN UNINTERRUPTED POSITIVE SLOPE FROM THE SEPTIC TANK (OR ANY PUMPING OR DOSING CHAMBER) TO THE HOUSE, ALLOWING SEPTIC GASES TO DISCHARGE THROUGH THE STACK VENT.
18. THE PURCHASER OF THIS LOT SHALL BE PROVIDED WITH A COPY OF THE APPROVED PLANS AND AN ACCURATE AS-BUILT DRAWING OF ANY EXISTING SANITARY FACILITIES.
19. THE DESIGN ENGINEER WILL BE REQUIRED TO CERTIFY THE COMPLETED DISPOSAL FACILITY.

**STANDARD NOTES:**

THE DESIGN, CONSTRUCTION AND INSTALLATION SHALL BE IN ACCORDANCE WITH THIS PLAN AND GENERALLY ACCEPTED STANDARDS IN EFFECT AT THE TIME OF CONSTRUCTION WHICH INCLUDE:

- "APPENDIX 75-A, WASTE TREATMENT - INDIVIDUAL HOUSEHOLD SYSTEMS, NEW YORK STATE SANITARY CODE."
- "WASTE TREATMENT HANDBOOK, INDIVIDUAL HOUSEHOLD SYSTEMS, NEW YORK STATE DEPARTMENT OF HEALTH."
- "RURAL WATER SUPPLY, NEW YORK STATE DEPARTMENT OF HEALTH."
- "PLANNING THE SUBDIVISION AS PART OF THE TOTAL ENVIRONMENT, NEW YORK STATE DEPARTMENT OF HEALTH."

"THIS PLAN IS APPROVED AS MEETING THE APPROPRIATE AND APPLIED TECHNICAL STANDARDS, GUIDELINES, POLICIES AND PROCEDURES FOR ARRANGEMENT OF SEWAGE DISPOSAL AND TREATMENT AND WATER SUPPLY FACILITIES."

ALL WELLS AND S.D.S. EXISTING OR APPROVED WITHIN 200' OF THE PROPOSED WELLS AND S.D.S. ARE SHOWN ON THIS PLAN ALONG WITH ANY OTHER ENVIRONMENTAL HAZARDS IN THE AREA THAT MAY AFFECT THE DESIGN AND FUNCTIONAL ABILITY OF THE S.D.S. AND WELL. IT SHALL BE DEMONSTRATED BY THE CONTRACTOR TO THE CERTIFYING ENGINEER THAT THE SEPTIC TANK IS SEALED, WATER TIGHT AND ACCEPTABLE FOR USE. THIS SHALL REQUIRE, AS A MINIMUM, THE FILLING OF THE TANK WITH WATER TO OBSERVE IF IT IS IN FACT SEALED, WATERTIGHT AND ACCEPTABLE FOR USE. ALL PROPOSED WELLS AND SERVICE LINES ON THIS PLAN ARE ACCESSIBLE FOR INSTALLATION AND PLACEMENT. TRENCH BOTTOMS TO BE SET LEVEL AND PARALLEL TO EXISTING CONTOURS. MAXIMUM DEPTH OF USABLE FILL PLUS 6" OF TOPSOIL SHALL NOT EXCEED 30".

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