

GENERAL MUNICIPAL LAW

Subdivision Referral Form

Director
CORTLAND COUNTY PLANNING DEPARTMENT
37 Church St.
Cortland, NY 13045-2838
Telephone: (607) 753-5043
Fax: (607) 753-5150

GML No. 77.17-01-08.200
(Tax Map Number)

Date: 2/26/2018

Submitting Officer: **BRUCE A. WEBER, CEO**

Municipality: **TOWN OF CORTLANDVILLE**

Mailing Address: **RAYMOND G. THORPE MUNICIPAL BUILDING
3577 TERRACE ROAD
CORTLAND, NEW YORK 13045**

Phone Number: (607)756-7490

Fax Number: (607)756-6753

Please Submit the Following Information

1. Identification: Preliminary Subdivision Plan OR Final Subdivision Plan

Name: John DEWEED

Address: P.O. Box 705

Cortland, N.Y. 13045

Phone Number: (607) 423-3000

Fax Number: (607) 756-9056

A. Owner or Lessee: DEWEED Family LLC

1. Date of acquisition: 2012

B. Architect or Engineer: _____

2. Layout Characteristics:

A. Total Acres of Subdivision: 3.31

Total No. of Lots: 3

Has area been previously approved for subdivision: NO If yes, when: _____

and, if any, amount of construction completed 2 FAMILY Duplex

B. Type of Units:

NUMBER OF UNITS

Type	Number of Structures	2 Bedrooms	3 Bedrooms	4+ Bedrooms
Single Family				
Multi-Family				
Townhouses	3		6	
Condominiums				

C. Recreation:

Is there any recreation in the plan? No, if yes, what type and number?

Percentage of recreational area of total subdivision: _____

D. Sanitary Facilities:

Type of Sewage Disposal:

Type of Water Supply:

Public, District No. _____

Public, District No. Public

Private, Septic System

Private, _____

Have Sanitary Facilities been approved by Cortland County Health Department? _____

If not, why? HAVE NOT APPLIED FOR APPROVAL YET

3. Does the subdivision conform to Municipal Master Plan? Yes

If not, why? _____

4. Does the subdivision conform to County Master Plan? Yes If not, why? _____

5. Availability of public utilities and services:

Fire Protection: Yes District: R-1, Police Protection: Yes

District: R-1 Refuse Collection: PRIVATE

Special Services Required: NONE

6. School District: HOMER Central

7. Projected energy consumption: _____ Type: _____

8. Traffic generation (expected vehicle departures and arrivals per 24 hour period) : 20

9. Attach a copy of any environmental assessment or environmental impact statement required under the State Environmental Quality Review Act (SEQR).

10. Subdivision Map Showing:

- A. Title of Development
- B. Date
- C. Scale (at 1" equals 50')
- D. North Arrow
- E. Seal, signature, name and address of licensed engineer or land survey or certifying the subdivision plot.
- F. Name and address of owner(s)
- G. Location Map Showing Location of Subdivision Within Municipality (1"=1000' Scale)
- H. Surrounding Land Use (Within 200')
- I. Zoning Classification of Surrounding Lands (within 200')
- J. Location of State and County Facility within 500' of subject development
- K. Street Layout with pavement widths and names
- L. Street Right-of-Way Widths
- M. Topography (Not greater than 10' contour intervals)
- N. Zoning Classifications of Subdivision and requirements
- O. Location of Recreation Area and type of Improvements
- P. Numbered Lots with Dimensions
- Q. Existing Natural and Manmade Drainage Features (e.g. ponds, streams, culverts)
- R. Present Site Conditions (e.g. easements, existing utilities, structures, trees, streets, etc.)

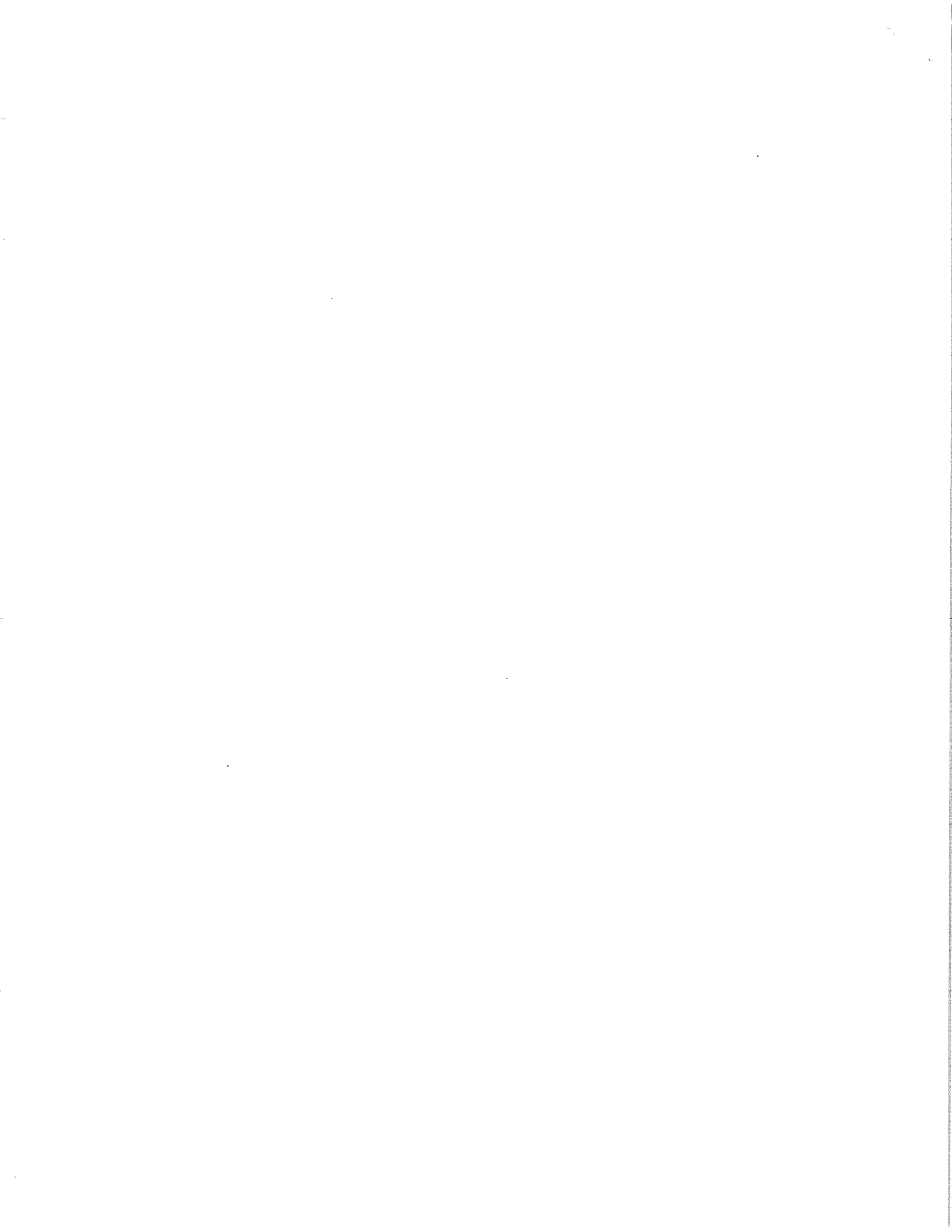
11. For Subdivisions of 25 lots or more, an assessment covering but not limited to the following: public utilities, environmental considerations, existing services and facilities and traffic generation may be required.

Additional Comments: _____

NOTE: All maps require the name and address of the N.Y.S. licensed engineer or land surveyor responsible for preparing the seal and map.

Signature and Title of Submitting Official

(REVISED: 8/01)



GENERAL MUNICIPAL LAW

Zoning Referral Form

Conditional Permits, Special Permits, Site Plan Reviews & Variances

Director
CORTLAND COUNTY PLANNING DEPARTMENT
37 Church St.
Cortland, NY 13045-2838
Telephone: (607) 753-5043
Fax: (607) 753-5150

GML No. 77-17-01-00-200
(Tax Map Number)

Date: 2/26/2018

Submitting Officer: Bruce Weber, Planning & Zoning Officer

Municipality: Town of Cortlandville

Mailing Address: 3577 Terrace Road, Cortland, NY 13045

Phone Number: (607) 756-7052

Fax Number: (607) 758-7922

Type of Referral

The applicant request the following:

Variance: _____ Bulk – Article _____ Section _____
_____ Use – Article _____ Section _____

Special Permit: Article _____ Section _____

Conditional Permit: Article _____ Section _____

Site Plan Review: Article _____ Section _____

Reason(s) for request: Request A SUBDIVISION ADD
Within 500' of NYS Route 13

Is the above action a Type 1 _____, Type 2 _____, or unlisted action under the State Environmental Quality Review Act? Attach required environmental assessment forms for Type I and unlisted actions.

The following information is required for your application to be complete:

1. Name of petitioner: John DEWEZCHIO

Owners name (if different): DEWEZCHIO Family LLC

Date of acquisition: 1/18/2012

Address: 1703 Route 13 Cortland
State: N.Y. Zip: 13045
Phone Number: (607) 423-3000 Fax Number: (607) 753-8077

2. A Site Plan Map showing:

- a. Scale (1 inch equals 20 feet if site is less than 1 acre or an agreed upon scale for a site larger than 1 acre)
- b. North Arrow
- c. Physical Characteristics of Site, existing and proposed (Topography, Water and Vegetation)
- d. Layout Plan Showing buildings, parking and available utilities
- e. Surface and Subsurface Drainage Plan, incorporated with Layout Plan
- f. Location of County or State facility pursuant to Section 239 l, m and n of the General Municipal Law
- g. Location Map at 1"=1000' scale
- h. Area Map at 1"=200' or an agreed upon scale
 - (1) zoning classification of subject and adjoining properties
 - (2) surrounding land use within 500 feet of subject property
 - (3) surrounding zoning classifications

3. A certified Tax Map from the Cortland County Office of Real Property and Assessment showing the property lines of the applicant's property.

4. Availability of public utilities and services:

Water X District _____ ; Sewer N/A District _____ ;
Fire Protection YES District _____ ; Refuse Collection NO

Special services required: _____

5. Does Site Plan conform to municipal master plan? _____ If not why? _____

6. Does Site Plan conform to county land use plan? _____ If not why? _____

7. School District: HOMER CENTRAL

8. Projected energy consumption: _____ Type: _____

9. Traffic generation (expected vehicle departures and arrivals per 24 hour period) : 20

NOTE: All maps require the name and address of the N.Y.S. licensed engineer or land surveyor responsible for preparing the seal and map.

Signature and Title of Submitting Official

(REVISED: 8/01)

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

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

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

Part 1 - Project and Sponsor Information			
Name of Action or Project: 1703 Route 13			
Project Location (describe, and attach a location map): 1703 Route 13 Cortland, NY.			
Brief Description of Proposed Action: SUBDIVIDE A 3.31 ACRE PARCEL INTO 3 LOTS			
Name of Applicant or Sponsor: DEWECCHIO Family LLC.		Telephone: (607) 423-3000	
Address: P.O. Box 705		E-Mail: WESTROAD4030@YALCO.COM	
City/PO: Cortland		State: NY	Zip Code: 13045
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? 3.31 acres			
b. Total acreage to be physically disturbed? Less than 1 Acre acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 0 acres			
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>John DEWEEDHIO</u>	Date: <u>2/26/2018</u>	
Signature: <u>[Signature]</u>		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT