



**APPLICATION FOR MAJOR
PROJECTS
GENERAL INFORMATION
REQUEST**

**To be submitted with all applications
except minor projects and variances**

Instructions: Please answer all of the questions in each numbered section and complete all applicable Attachments. A **Supplemental Information Request application form** will also be required that is related to the specific type of project you are proposing. The Agency may also request pertinent additional information based on the information contained in your application.

Type or print clearly in ink. If you need assistance answering the questions, please call the Agency at the above telephone number. **Mail three (3) copies of your application and the required attachments to the Agency at the above address. A site visit by Agency staff will be required.**

Your application will be deemed incomplete if all of the information required by the General Information Request and the appropriate Special Information Request is not provided. **The Adirondack Park Agency Act provides that the time period for the review of this project will not begin to run until the Agency determines that the application is complete.** If the application is not complete, a request for additional information will be issued within 15 days of receipt of the application indicating which information is still required for a complete application. The proposed project may not be undertaken until an Agency permit has been issued.

1. Please fill in the Project Sponsor (the person(s) seeking a permit from the Agency):

	<u>SPONSOR:</u>	<u>CURRENT PROPERTY OWNER:</u>
Name	_____	_____
Address	_____	_____
	_____	_____
Telephone	_____	_____
Fax	_____	_____

2. I authorize the person named below to act as my agent in all matters relating to this permit application before the Adirondack Park Agency. I acknowledge that all contact regarding the permit application will be through my authorized representative. I understand that I am ultimately responsible for the accuracy of the information contained in this permit application and for compliance with all terms and conditions of any permit issued to me by the Agency.

Authorized Representative:

Name: _____

Address: _____

Telephone: _____

Fax: _____

3. Project Site Location/Description:

Road/Highway: _____

Nearby Waterbody: _____

Town(s): _____ **County(ies)** _____

Tax Map Designation: (from the tax bill for the property)

Section: _____ **Block:** _____ **Parcel:** _____

Section: _____ **Block:** _____ **Parcel:** _____

Section: _____ **Block:** _____ **Parcel:** _____

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

_____ **owner** _____ **signed purchase agreement holder**

_____ **lessee** _____ **option holder** _____ **other**

5. Property Deed(s)

Provide, as **Attachment A**, a complete copy of the current recorded deed(s) for the project site containing the recording information. Copies are available from the County Clerk's Office. If you have an executed contract or agreement to purchase or lease the property, please provide a copy of it to Agency staff in order to establish your legal interest in the project site. (The purchase price and other confidential information may be blackened out.)

6. Prior Agency Contact:

a) Have you had any previous discussions with Agency staff regarding this project or project site, or has any Agency staff visited the project site with you or your representative?

_____ No

_____ Yes. Staff person's name: _____

Date of Contact: _____

b) Has the project been the subject of a past Agency action (i.e., project permit, variance, Jurisdictional inquiry, enforcement case or wetland flagging)?

_____ No

_____ Yes. If known, provide the following number and date:

Past Permit or Variance Number: _____ date: _____

Jurisdictional Inquiry Number: _____ date: _____

Enforcement Case Number: _____ date: _____

Wetland Boundary Flagging : _____ date: _____

7. Adjacent Properties

Provide, as **Attachment B**, a complete and current list of the names and addresses of all landowners whose property adjoins the project site with the tax map references (tax map section, block, and parcel numbers) of all adjoining parcels based on the latest completed tax assessment roll. This list must include landowners whose property would otherwise adjoin the project site but is located across a public road or right-of-way from the site. Attached is a sheet which should be used to provide the required list of adjoining landowners. (This information is typically available from the Real Property Tax Services at County Offices or from the Town/Village assessors.)

8. Project Site History

Before a permit can be issued, Agency staff must review and understand the history of the project site. If the project site was part of a larger parcel on May 22, 1973 (the enactment date of the Adirondack Park Agency Land Use and Development Plan), the exact property boundaries of the larger parcel and the size of all buildings on that date must be established.

a) Was the project site part of a larger parcel as of May 22, 1973?

_____ Yes

_____ No

b) What is the current acreage of all connected lands owned by the current landowner, even if the parcels have different deeds and/or tax map numbers and even if larger than the project site.

_____ Acres

c) On May 22, 1973, did the owner at that time own any adjoining property, including parcels on

the opposite sides of public roads?
_____ Yes. Provide the Tax Map Numbers:

Section: _____ Block: _____ Parcel: _____
Section: _____ Block: _____ Parcel: _____

_____ No

d) Has any portion of the total landholding in Questions 9.b) and 9.c) above as it existed on May 22, 1973 been sold, given away or otherwise subdivided or developed since that date?

_____ No

Yes If yes, please list the lots or parcels conveyed from the original parcel and the size of each in square feet or acres. (Use a separate 8-1/2"x11" paper if necessary)

Parcel Number from current tax map	Date of Conveyance	Lot Size (sq. ft. or acres)	Was conveyance by sale or bona fide gift?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Provide, as **Attachment C**, a complete copy of all recorded deeds (not just abstracts) for the above conveyances back through May 22, 1973.

Provide, as **Attachment D**, a full scale copy of a survey map or the current real property tax map clearly showing the property boundaries of the project site and any tax parcel or lot that the project site was part of on May 22, 1973.

e) Are there structures (buildings) on the total contiguous landholding now owned by the present landowner?

_____ No

_____ Yes (Provide the information below. Attach additional sheets if necessary).

Number	Date of Construction	Size (sq. ft. of footprint)	Height (feet)	Type/Use (e.g. store, garage)
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

_____ Describe any other structures which existed on the property as of August 1, 1973 which have since been removed or destroyed and its use (e.g., residential, commercial). Include the date that the structure was removed or destroyed:

_____ None removed or destroyed

9. Historic Resources

Does the project site have any buildings that are more than 50 years old, or does the site or surrounding area contain any structures or districts which are listed or deemed eligible to be listed on the State or National Register of Historic Places or does the project site involve any known archeological resources?

- _____ No
 _____ Yes (to any of the above criteria)

If Yes, you must provide to the NYS Office of Parks Recreation and Historic Preservation (OPRHP) a location map, project description, site plan map, and recent photographs.

ATTACH, as part of a complete application, documentation from OPRHP that the project will not have an impact on historic resources or their recommendations for studies or surveys to be done and their recommendations for mitigation of any impacts to historic resources. OPRHP may be contacted at the following address or phone number.

Deputy Commissioner for Historic Preservation
 NYS Office of Parks, Recreation and Historic Preservation
 Peebles Island, P.O. Box 189
 Waterford, NY 12188-0189
 (518)237-8643

10. Project Description and New Land Use:

Provide a brief description of your proposed project.

Does the project include any of the following types of new land use and development? (Check all that apply and attach the appropriate completed Special Information Request)

- | | |
|--|---|
| <input type="checkbox"/> Single Family Dwellings | <input type="checkbox"/> Marinas, Boat Yards, and Boats |
| <input type="checkbox"/> Individual Mobile Homes | <input type="checkbox"/> Launching Sites |
| <input type="checkbox"/> Subdivisions | <input type="checkbox"/> Golf Courses |
| <input type="checkbox"/> Open Space Recreational Uses | <input type="checkbox"/> Campgrounds |
| <input type="checkbox"/> Agricultural Uses | <input type="checkbox"/> Group Camps |
| <input type="checkbox"/> Agricultural Use Structures | <input type="checkbox"/> Ski Centers |
| <input type="checkbox"/> Forestry Uses | <input type="checkbox"/> Commercial Seaplane Bases |
| <input type="checkbox"/> Forestry Use Structures | <input type="checkbox"/> Commercial or Private Airports |
| <input type="checkbox"/> Hunting and Fishing Cabins and other
Private Club Structures | <input type="checkbox"/> Sawmills, Chipping Mills, Pallet Mills
or similar Wood Using Facilities |
| <input type="checkbox"/> Cemeteries | <input type="checkbox"/> Commercial Sand and Gravel |
| <input type="checkbox"/> Private Roads | <input type="checkbox"/> Extractions |
| <input type="checkbox"/> Private Sand and Gravel Extractions | <input type="checkbox"/> Mineral Extractions |
| <input type="checkbox"/> Public Utility Uses | <input type="checkbox"/> Mineral Extraction Structures |
| <input type="checkbox"/> Game Preserves and Private Parks | <input type="checkbox"/> Watershed Management and Flood
Control Projects |
| <input type="checkbox"/> Multiple Family Dwellings | <input type="checkbox"/> Sewage Treatment Plants |
| <input type="checkbox"/> Mobile Home Courts | <input type="checkbox"/> Waste Disposal Areas |
| <input type="checkbox"/> Public or Semi-Public Buildings | <input type="checkbox"/> Junkyards |
| <input type="checkbox"/> Municipal Roads | <input type="checkbox"/> Major Public Utility Uses |
| <input type="checkbox"/> Agricultural Service Uses | <input type="checkbox"/> Industrial Uses |
| <input type="checkbox"/> Commercial Uses | |

11. Shoreline:

Shoreline means that line at which land adjoins waters of lakes or ponds or navigable (by boat or canoe) rivers and streams. There are minimum shoreline vegetative cutting restrictions, lot widths, structure setbacks, sewage disposal system setbacks and shoreline access requirements under the APA Act and regulations implementing the NYS Wild, Scenic and Recreational Rivers Act. These shoreline protection standards are measured from the mean high water mark (MHWM - the average of the annual high water levels) Please contact Agency staff for requirements. If your project site has shoreline and you propose construction of any kind within 100 feet of the shoreline(150 feet for Recreational Rivers, 250 feet for Scenic Rivers), the MHWM will have to be established and shown on a site plan map in order to have a complete application. At the applicant's request, APA staff will determine the MHWM at the project site or you can have the determination made by a NYS licensed land surveyor. If you are unsure of navigability, please contact Agency staff.

- a) Does the project site contain any navigable water?
 No. (If no, go to Section 13. Wetlands)
 Yes. Name of water body: _____
Length of shoreline on the project site(as it winds and turns): _____feet

- b) Is any portion of the shoreline currently being used or proposed for use by others for deeded or contractual access to the water body?
 No
 Yes

Please identify and describe all shoreline access parcels, the number of lots having access to each parcel and the dates access was granted. Also provide a complete copy of all deeds for property which has been granted to the water body via a shoreline access parcel.

- c) Do you propose to cut any vegetation within 35 feet of a lake or pond or navigable river or stream or within 100 feet of a designated NYS Wild, Scenic or Recreational River? *(If you are uncertain whether the shoreline is along a designated river, check on the APA Land Use and Development Plan Map, or the APA Regulations Appendix Q-6, or contact Agency staff.)*
 No
 Yes. Please describe type, amount and location of vegetation to be removed:

12. Wetlands:

- a) Are there any wetlands on the project site?
 No
 Yes (Answer the following questions. The wetland boundaries as delineated or confirmed by Agency staff must be shown and labeled on the Site Plan Map)
- b) Will any of the activities listed below be proposed and occur within the boundaries of a freshwater wetland?
 No
 Yes(check all that apply):

- Draining; dredging; excavation;removing soil, peat, muck, sand, shells or gravel
 Dumping or filling with soil, stone, sand, gravel, mud, or fill of any kind
 Erecting structures, building roads or driveways, driving pilings, or placing any other obstructions
 Clearcutting of more than three acres :provide number of acres_____

- Applying pesticides or fertilizers
- Constructing a wastewater treatment system or discharging a sewer outfall

If yes to any of the above, provide a detailed written description of the measures Taken to avoid or minimize wetland impacts:

- c) Will any of the activities listed below occur within the 100 feet of a wetland?
- No
 - Yes (check all that apply)
 - Constructing a wastewater treatment leaching or absorption facility
 - Applying pesticides
 - Conducting other activities that could impair the functions or benefits derived from wetlands, including any diversion of water or change in hydrology, or substantially increases erosion or sedimentation
- d) Will the project result in the temporary or permanent loss of any wetland acreage by filling or draining?
- No
 - Yes. Amount of acreage to be lost: _____ square feet.

If you checked Yes to any of the above questions, you may be required to provide a Wetland Mitigation Report as part of your Special Information Request. Contact the Agency for a copy Of the Agency's Wetlands Mitigation Guidelines for further information.

13. Other Regulatory Permits and Approvals

The Agency cannot approve a project which has been denied a permit or which is a prohibited use under local zoning requirements and other local laws or ordinances. The Agency will also recognize community goals expressed in a formally adopted land use plan. The project should be designed to the regulatory requirements of other involved agencies.

a) Local Government Notice Form

Provide as **Attachment E**, a completed copy of the Local Government Notice form (last page of this application) to the municipality in which your project is located. Have it filled out and signed by an appropriate official (e.g., Zoning Administrator, Planning Board Chairman or Supervisor, if no Zoning Administrator or Planning Board Chairman) and return it with the project application. Please read the form for instructions.

b) Municipal Approval Documents

If local approval has been obtained for the proposed project, then provide as **Attachment F**, documentation (e.g., permit, site plan approval or final subdivision plat) to the Agency which confirms that the project has been approved pursuant to all applicable town and county laws including any necessary approvals from the planning and zoning boards. Also, please provide a copy of the relevant minutes of all local meetings at which the project has been discussed. (This last request is continuous; the information should be provided to the Agency as it becomes available.)

c) State and Federal Agency Contacts

Complete the following and indicate whether you have contacted any of the following agencies or departments. Your APA application may remain incomplete until all state agency applications are complete to allow a coordinated review.

AGENCY	NO	YES	DATE	CONTACT PERSON & PHONE #
NYS Department of Health	_____	_____	_____	_____
NYS Department of Transportation	_____	_____	_____	_____
NYS Department of Environmental Conservation	_____	_____	_____	_____
NYS Department of Law	_____	_____	_____	_____
NYS Office of Parks, Rec. & Historic Preservation	_____	_____	_____	_____
US Army Corps of Engineers	_____	_____	_____	_____
Other	_____	_____	_____	_____

d) State and Federal Permits, Approvals and Determinations

Provide as **Attachment G**, copies of all permits, approvals and determinations received from the above agencies.

14. Required Signatures

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

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

_____	_____	_____
_____	_____	_____
_____	_____	_____
signature	print name	date

**Signature(s) of all Landowner(s) from current deed of record:
(Required for all applications)**

_____	_____	_____
_____	_____	_____
signature	print name	date

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

_____	_____	_____
_____	_____	_____
signature	print name	date

**Signature of Authorized Contact Person:
(Required if designated in Section 3 of this application)**

_____	_____
signature	date

Adjacent Properties:
(sample)
Name
Address
Tax Map No.

LOCAL GOVERNMENT NOTICE FORM

If your local town or village has zoning or other regulations which apply to your project, the Adirondack Park Agency will be unable to issue a permit if the town or village has either (a) refused to grant a necessary permit or (b) the project would be a prohibited use in that jurisdiction.

Accordingly, the Adirondack Park Agency will not complete your permit application until you describe your project to municipal officials and have the form below completed by a local official and returned to the Agency.

TO: Adirondack Park Agency

FROM: Town/Village of

PROJECT APPLICANT:

PROJECT TYPE:

~ Applicant will require municipal approval under:

- ~ zoning ordinances
- ~ subdivision regulations
- ~ local floodplain regulations
- ~ sanitary code
- ~ other municipal code or law (specify)

~ Applicant does not require municipal approval.

~ Applicant has been granted a municipal permit.

~ Applicant has been denied a municipal permit.

~ Project is prohibited under municipal law or ordinance.

Specify municipal concerns with project, if any: _____
_____.

~ Check here if municipality wishes to discuss this project with Agency staff. _____
(Phone #)

Zoning Administrator, Planning Board Chairman,
or Mayor/Supervisor (Signature)

Date

(Print Name and Title)