



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

T-02-OAK-11-25

Review Date

11/13/2025

Municipality

OAKFIELD, T.

Board Name

PLANNING BOARD

Applicant's Name

Michael Dilcher

Referral Type

Subdivision: Preliminary

Variance(s)

Description:

Preliminary Subdivision to divide two parcels into twenty-one (21) building lots.

Location

Fox and Fisher Rds., Oakfield

Zoning District

Residential-Agriculture (R&A) District

PLANNING BOARD RECOMMENDS:

APPROVAL WITH MODIFICATION(S)

EXPLANATION:

Given that the development only received water hookup authorization for nine of the proposed 21 building lots, the required modification is that the applicant obtain the remaining authorizations. With this required modification, the proposed subdivision should pose no significant county-wide or inter-community impact. It is recommended that the applicant submits the attached application for 9-1-1 Address Verification to the Genesee County Sheriff's Office to ensure that addresses are assigned to the lots that meet Enhanced 9-1-1 standards.

Director

November 13, 2025

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:

GENESEE COUNTY DEPARTMENT OF PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 815-7901

DEPARTMENT USE ONLY:

GCDP Referral # T-02-OAK-11-25



*** GENESEE COUNTY ***
PLANNING BOARD REFERRAL

RECEIVED

By the Genesee County Dept. of Planning at 8:27 am, Nov 03, 2025

Required According to:

GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N
(Please answer ALL questions as fully as possible)

1. REFERRING BOARD(S) INFORMATIONBoard(s) Oakfield Town Planning BoardAddress 3219 Drake Street RoadCity, State, Zip Oakfield NY 14125Phone (585) 948-5835 Ext. _____**2. APPLICANT INFORMATION**Name Michael DilcherAddress 133 West Flamingo CircleCity, State, Zip Marco Island, FL 34145Phone (585) 993-7012 Ext. _____Email md.oakgrille@yahoo.comMUNICIPALITY: ☐ City ☒ Town ☐ Village of Oakfield**3. TYPE OF REFERRAL:** (Check all applicable items)

- ☐ Area Variance
☐ Use Variance
☐ Special Use Permit
☐ Site Plan Review

- ☐ Zoning Map Change
☐ Zoning Text Amendments
☐ Comprehensive Plan/Update
☐ Other: _____

- Subdivision Proposal
☒ Preliminary
☐ Final

4. LOCATION OF THE REAL PROPERTY PERTAINING TO THIS REFERRAL:A. Full Address Between Fox and Fisher Road, 1/2 mile north of Drake St. OakfieldB. Nearest intersecting road Fox Road, Fisher RoadC. Tax Map Parcel Number 6.-1-73 and 6.-1-80D. Total area of the property 21 acres Area of property to be disturbed 12 acresE. Present zoning district(s) R/A**5. REFERRAL CASE INFORMATION:**

A. Has this referral been previously reviewed by the Genesee County Planning Board?

☒ NO ☐ YES If yes, give date and action taken _____

B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law

C. Please describe the nature of this request Preliminary plat approval submittal for Fox Hollow Landly residential development.

6. ENCLOSURES – Please enclose copy(s) of all appropriate items in regard to this referral See emails of items

- ☒ Local application
☒ Site plan
☒ Subdivision plot plans
☒ SEQR forms

- ☐ Zoning text/map amendments
☒ Location map or tax maps
☒ Elevation drawings
☒ Agricultural data statement

- ☐ New or updated comprehensive plan
☐ Photos
☐ Other: _____

Full EAF**7. CONTACT INFORMATION** of the person representing the community in filling out this form (required information)Name Greg HouseknechtTitle Oakfield Planning Board ChairPhone (585) 861-0047

Ext. _____

Address, City, State, Zip 35 Coe Ave, Oakfield NY 14125Email gahouse50@gmail.com

TOWN OF OAKFIELD

3219 Drake Street Road
Oakfield, NY 14125
585-948-5835
Townofoakfieldny.gov

PLANNING BOARD

SUBDIVISION APPLICATION

SUBDIVISION

The division of any parcel of land into two or more lots, plots, sites or other division of land for the purpose, whether immediate or future, of transfer of ownership or building development and shall include re-subdivision; provided, however, that the public acquisition by purchase of strips of land for the widening or opening of streets shall not be included within this definition nor subject to these regulations.

NOTICE TO ALL APPLICANTS:

Pursuant Town of Oakfield Land Subdivision Regulations, Subdivision of Land, the Town of Oakfield Planning Board reviews submitted applications for subdivision of land. The objective of the Board is to process all applications in a timely and efficient manner, and in accordance with Town Code and New York State Law.

It is the responsibility of the applicant that all forms are filled out completely and accurately prior to the application being processed. All completed applications are subject to the rules and standards set forth by the Town of Oakfield and State statutes. The Building & Zoning Department does not guarantee any board approvals for completed applications.

PD
10/16/2025
J# 2959

TOWN OF OAKFIELD

3219 Drake Street Road
Oakfield, NY 14125
585-948-5835
Townofoakfieldny.gov

SUBDIVISION APPLICATION FORM

WHEN TO USE THIS FORM: This form is to be used by an applicant seeking approval of a Subdivision as defined in Town of Oakfield Land Subdivision Regulations. The applicant is responsible for complying with established rules and procedures which are available for inspection from the Code Enforcement Officer.

Submit the completed application package with payment to the Code Enforcement Officer. Please make checks payable to the Town of Oakfield.

SUBDIVISION FEE ☐ \$50.00 + \$10.00 per lot

PUBLICATION FEE ☐ ~~\$45.00~~ 100⁰⁰

☐ Check#: _____ Rec'd Date: _____ ☐ Cash

APPLICANT INFORMATION:

Applicant: Michael Dilcher Corporation Name: _____
Street Address: 6968 Fox Rd City: OAKFIELD Zip: 14125
Phone: 585-993-7012 Fax: _____ Email: md.oakgrill@yahoo.com

PROJECT INFORMATION:

Project Name: Fox Hollow Run Date: 10/16/25
Project Address: Fox Rd
Tax Map ID: 6.-1-73 6.-1-80 Zoning District: _____

APPLICATION STAGE: ☐ Sketch (optional) ☐ Preliminary/Final (required)

Is the subject property within 500' of a State or County Road or Town Boundary? ☐ Yes ☒ No
(If yes, the Town may be required to refer your application to the Genesee County Planning Board.)

Brief Summary of Proposed Project:

21 building lots between Fox Rd and Fisher Rd

REQUIRED DOCUMENTS

- | | |
|--|---|
| <input type="checkbox"/> Application Fee | <input type="checkbox"/> Sketch Plan (Sketch Plan Application Only) |
| <input type="checkbox"/> Subdivision Plat prepared by licensed land surveyor (Preliminary/Final) | <input type="checkbox"/> SEQR - Environmental Assessment Form (EAF) Part 1 |
| <input type="checkbox"/> Letter of Consent from Owner | <input type="checkbox"/> Consultant Fees Agreement |
| <input type="checkbox"/> Disclosure Affidavit Form | <input type="checkbox"/> Authorized Representative Form |
| <input type="checkbox"/> Completed Application Checklist | <input type="checkbox"/> Agricultural Data Statement (if within 500' of an agricultural district) |

I have examined this application and declare that it is true, correct, and complete. I understand that my application and all supporting documentation will be examined by the Planning Board as an integral component of deliberations.

Michael Dilcher
Signature of Property Owner

10/16/25
Date

TOWN OF OAKFIELD

3219 DRAKE STREET RAOD
OAKFIELD, NY 14125

585-948-5835
townofOakfieldny.gov

AGREEMENT TO PAY FEES FOR CONSULTANT SERVICES INCURRED BY THE TOWN OF OAKFIELD

When reviewing an application for, or when conducting inspections in relation to an application, the Town of Oakfield, New York may determine that the assistance of outside consultants is warranted due to the size, scale or complexity of a proposed project, because of a project's potential impacts, or because the Town lacks the necessary expertise to perform the work related to the application. Whenever possible, the Town of Oakfield, New York shall work cooperatively with the applicant to identify what scope of work shall require the employment of consultants. In the event that such sum is insufficient to fund the necessary consulting services, the Town of Oakfield, New York may require additional deposits.

Let it be understood and the property owner agrees that:

1. In hiring outside consultants, the Town of Oakfield, New York may engage registered design professionals, financial analysts, planners, lawyers or other appropriate professionals who can assist the Town in analyzing a project to ensure compliance with all relevant laws, bylaws, and regulations. Such assistance may include, but not be limited to, analyzing an application, monitoring or inspecting a project or site for compliance with the Town's decision or regulations, or inspecting a project during construction or implementation.
2. Funds received by the Town of Oakfield, New York pursuant to this section shall be deposited with the Code Enforcement Officer who shall establish a line item for this purpose. Expenditures from this line item may be made at the direction of the Code Enforcement Officer without further appropriation. Expenditures from this line item shall be made only for services rendered in connection with a specific project or projects for which a project review fee has been or will be collected from the property owner. Additionally, the failure of a property owner to pay any fee shall be grounds for denial of an application. Lastly, any outstanding fees incurred by the Town of Oakfield, New York shall be charged against the property and shall constitute a lien thereon in favor of the municipality, and the amount of such costs shall be entered on the tax rolls as being due and payable. Such fees may also be recovered in any other lawful manner.
3. At the completion of the Town's review of a project, any excess amount in the line item attributable to a specific project shall be repaid to the property owner. A final report of said line item shall be made available to the property owner if requested.
4. Any property owner may take an administrative appeal from the selection of the outside consultant to the Town Board. Such appeal must be made in writing and may be taken only within twenty (20) days after the Town has mailed or hand-delivered notice to the property owner of the selection. The grounds for such an appeal shall be limited to claims that the consultant selected has a conflict of interest or does not possess the minimum required qualification. The required time limit for action upon an application by the Town Board shall be extended by the duration of the administrative appeal. In the event that no decision is made by the Town Board within one month following the filing of the appeal, the selection made by the Town of Oakfield, New York, shall stand.

I have examined this application and declare that is true, correct and complete upon submission. I understand that my application and all supporting documentation will be examined by the Town of Oakfield as an integral component of deliberations.



Signature of Property Owner

10/16/25

Date

Signature of Applicant

Date

TOWN OF OAKFIELD

3219 DRAKE STREET ROAD
OAKFIELD, NY 14125

585-948-5835
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DISCLOSURE AFFIDAVIT (GML § 809)

The Applicant has read and is familiar with the provisions of the General Municipal Law, Section 809, which states:

- A. Every application, petition or request submitted for a variance, amendment, change of zoning approval of plat, exemption of plat or official map, license or permit, pursuant to the provisions of any ordinance, local law, rule or regulation constituting the zoning and planning regulations of a municipality shall state the name, residence and the nature and extent of the interest of any state officer or any officer or employee of such municipality or of a municipality or a part, in the person, partnership or association making such application, petition or request (hereinafter called the applicant) to the extent known to such applicant.
- B. For the purpose of this section of State law, an officer or employee shall be deemed to have an interest in the applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:
1. Is the applicant;
 2. Is an officer, director, partner or employee of the applicant;
 3. Legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant; or
 4. Is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application, petition or request.
- C. Ownership of less than five per cent of the Stock of a corporation whose stock is listed on the New York or American Stock Exchanges shall not constitute an interest for the purposes of this section.
- D. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

If a Town of Oakfield officer, employee or relative of either as defined in the General Municipal Law, Section 809, has any interest in this application, the full particulars are provided on an attached sheet.

OWNER'S AGREEMENT TO CONTENTS OF APPLICATION

It is hereby understood that the contents of this entire application is hereby subscribed by the property owner, all matters understood and agreed to, and is hereby affirmed by the owner as true under the penalties for perjury.

Michael Dilchen
Print Name of Property Owner

Michael Dilchen
Signature of Property Owner

10/16/25
Date

TOWN OF OAKFIELD

3219 DRAKE STREET ROAD
OAKFIELD, NY 14125

585-948-5835
townofOakfieldny.gov

AUTHORIZED REPRESENTATIVE FORM

WHEN TO USE THIS FORM: This Authorized Representative form is enclosed if the owner would like someone to represent him/her/they at the public meeting and hearing. Please complete this form and submit it to the Code Enforcement Officer. The owner is responsible to notify his/her/their representative of the time and place of the public meeting and hearing.

OWNER INFORMATION

Property Owner Name: Michael Dilcher

Address: 6948 Fox Rd

Telephone: 585 993-7012

Email: md.oakgill@yahoo.com

REPRESENTATIVE INFORMATION

Representative's Name: Same

Address: _____

Telephone: _____

Email: _____

The Owner hereby permits the Authorized Representative to act on his/her/their behalf regarding an application submitted to the Town of Oakfield, New York. Such Owner authorizes this Town to release any or all information relating to this application to this Authorized Representative.

Michael Dilcher
Signature of Property Owner

10/16/25
Date

STATE OF NEW YORK

SS:

COUNTY OF: Genesee

On this 16th day of October 2025, before me personally came Michael Dilcher

to me known and known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

Melissa M. Haacke
Notary Public

NOTARY PUBLIC
STATE OF NEW YORK
MELISSA M. HAACKE
NO. 01HA5027321

MY COMMISSION EXPIRES 05/09/2026
QUALIFIED IN GENESEE COUNTY

TOWN OF OAKFIELD

3219 DRAKE STREET ROAD
OAKFIELD, NY 14125

585-948-5835
townofOakfieldny.gov

AGRICULTURAL DATA STATEMENT

Instructions: This form must be completed for any application for a Special Use Permit, Site Plan approval, Use Variance or a Subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

APPLICANT INFORMATION:

Applicant: Michael Dilcher Corporation Name: _____
Street Address: 6968 Fox Rd City: Oakfield Zip: 14125
Phone: 585-993-7012 Fax: _____ Email: md.oakgrill@yahoo.com

TYPE OF APPLICATION: ☐ Special Use Permit ☐ Site Plan Review ☒ Subdivision Review ☐ Use Variance ☐ Area Variance

DESCRIPTION OF PROPOSED PROJECT:

21 building lots between Fox Rd and Fisher Rd

PROJECT INFORMATION:

Project Name: Fox Hollow Run Date: 10/16/25
Project Address: Fox Rd
Tax Map ID: 6.-1-73 6.-1-80 Zoning District: RA

Is this parcel within an Agricultural District? ☒ Yes ☐ No (Check with your local Assessor if you do not know)

If YES, Agricultural District Number _____

Is this parcel actively farmed? ☐ Yes ☒ No

Type of farm operation: _____ Acreage: _____

List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary:

Name/Address (Please list if property is actively farmed):

- a. Lorraine Dilcher 3421 Drake St Oakfield 14125
b. Torrey Lands LLC Elba, NY 4319 Maltby Rd 14058
c. _____
d. _____

Michael Dilcher
Signature of Property Owner

10/16/25
Date

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: Fox Hollow Landing		
Project Location (describe, and attach a general location map): Between Fox Road and Fisher Road, 1/2 mile north of Drake St.		
Brief Description of Proposed Action (include purpose or need): The purposed development in the Town of Oakfield sits on 24 acres and will consist of 21 building lots and will be broken up into three phases. Phase one will incorporate lots 1-7, phase two 8-15 and phase three 16-21. Infrastructure including roadways, waterlines, gas lines, etc will be completed before the start of phases two and three.		
Name of Applicant/Sponsor: Michael Dilcher	Telephone: 585-993-7012	
	E-Mail: md.oakgrill@yahoo.com	
Address: 6968 Fox Road		
City/PO: Oakfield	State: NEW York	Zip Code: 14125
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. Government Approvals, Funding, or Sponsorship. (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village Planning Board or Commission <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Town of Oakfield Council, Oakfield Planning Board	
c. City Council, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
d. Other local agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Genesee County Planning Board	
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

C.1. Planning and zoning actions.

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? ☒Yes☐No

- If Yes, complete sections C, F and G.
- If No, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

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? ☐Yes☒No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? ☐Yes☐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?) ☐Yes☒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? ☐Yes☒No

If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. ☒ Yes ☐ No
If Yes, what is the zoning classification(s) including any applicable overlay district?

R/A

b. Is the use permitted or allowed by a special or conditional use permit? ☐ Yes ☒ No

c. Is a zoning change requested as part of the proposed action? ☒ Yes ☐ No

If Yes,

i. What is the proposed new zoning for the site? Subdivision

C.4. Existing community services.

a. In what school district is the project site located? Elba

b. What police or other public protection forces serve the project site?

NY State Police, Genesee County Sheriff

c. Which fire protection and emergency medical services serve the project site?

Oakfield Fire Department

d. What parks serve the project site?

Oakfield Town Park

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Residential subdivision

b. a. Total acreage of the site of the proposed action? 24 acres

b. Total acreage to be physically disturbed? 12 acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 0 acres

c. Is the proposed action an expansion of an existing project or use? ☐ Yes ☒ No

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:

d. Is the proposed action a subdivision, or does it include a subdivision? ☒ Yes ☐ No

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? ☒ Yes ☐ No

iii. Number of lots proposed? 21

iv. Minimum and maximum proposed lot sizes? Minimum 35,000 sq ft Maximum same

e. Will proposed action be constructed in multiple phases? ☒ Yes ☐ No

i. If No, anticipated period of construction: months

ii. If Yes:

- Total number of phases anticipated 3
- Anticipated commencement date of phase 1 (including demolition) 6 month 26 year
- Anticipated completion date of final phase 10 month 30 year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases:

Possible infrastructure grants

f. Does the project include new residential uses? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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	7			
At completion of all phases	15	6		

g. Does the proposed action include new non-residential construction (including expansions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes,	
i. Total number of structures <u>21</u>	
ii. Dimensions (in feet) of largest proposed structure: <u>25</u> height; <u>30</u> width; and <u>110</u> length	
iii. Approximate extent of building space to be heated or cooled: <u>1600 to 2400</u> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes,	
i. Purpose of the impoundment: _____	
ii. If a water impoundment, the principal source of the water: <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	
<ul style="list-style-type: none"> • 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: _____ 300 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: Oakfield
- 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: _____
To serve the potential of 21 new homes, approx 2,000 new feet of water lines
- Source(s) of supply for the district: Monroe County Water

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: _____ 300/house 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: N/A
- 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

<ul style="list-style-type: none"> • Do existing sewer lines serve the project site? _____ • Will line extension within an existing district be necessary to serve the project? _____ <p>If Yes:</p> <ul style="list-style-type: none"> • Describe extensions or capacity expansions proposed to serve this project: _____ _____ _____ 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? _____</p> <p>If Yes:</p> <ul style="list-style-type: none"> • Applicant/sponsor for new district: _____ • Date application submitted or anticipated: _____ • What is the receiving water for the wastewater discharge? _____ 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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): _____ _____ _____</p>	
<p>vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____ _____ _____</p>	
<p>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? _____</p> <p>If Yes:</p> <p>i. How much impervious surface will the project create in relation to total size of project parcel?</p> <p style="padding-left: 20px;">_____ Square feet or _____ 1 acres (impervious surface)</p> <p style="padding-left: 20px;">_____ Square feet or _____ 24 acres (parcel size)</p> <p>ii. Describe types of new point sources. _____</p> <p>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)? _____</p> <p style="padding-left: 20px;">Roadway ditches, check dams, grassway swales, storm pond, overflow to town roadway drainage _____</p> <p style="padding-left: 20px;">• If to surface waters, identify receiving water bodies or wetlands: _____ _____</p> <p style="padding-left: 20px;">• Will stormwater runoff flow to adjacent properties? _____</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? _____</p> <p>If Yes, identify:</p> <p>i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) _____</p> <p>ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) _____</p> <p>iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? _____</p> <p>If Yes:</p> <p>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) _____</p> <p>ii. In addition to emissions as calculated in the application, the project will generate:</p> <ul style="list-style-type: none"> • _____ Tons/year (short tons) of Carbon Dioxide (CO₂) • _____ Tons/year (short tons) of Nitrous Oxide (N₂O) • _____ Tons/year (short tons) of Perfluorocarbons (PFCs) • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆) • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs) • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs) 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<p>h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate methane generation in tons/year (metric): _____</p> <p>ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____</p>			
<p>i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____</p>			
<p>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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. When is the peak traffic expected (Check all that apply): <input type="checkbox"/> Morning <input type="checkbox"/> Evening <input type="checkbox"/> Weekend <input type="checkbox"/> Randomly between hours of _____ to _____.</p> <p>ii. For commercial activities only, projected number of semi-trailer truck trips/day: _____</p> <p>iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____</p> <p>iv. Does the proposed action include any shared use parking? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: New road construction will meet Town of Oakfield and Genesee County road specifications _____</p>			
<p>vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate annual electricity demand during operation of the proposed action: _____</p> <p>ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____</p> <p>iii. Will the proposed action require a new, or an upgrade to, an existing substation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>l. Hours of operation. Answer all items which apply.</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7-6 • Saturday: _____ 7-6 • Sunday: _____ • Holidays: _____ </td> <td style="width: 50%; vertical-align: top;"> <p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> </tr> </table>		<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7-6 • Saturday: _____ 7-6 • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____
<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7-6 • Saturday: _____ 7-6 • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ 		

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p> <p>_____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>n.. Will the proposed action have outdoor lighting? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>Residential outdoor lighting</p> <p>_____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p> <p>_____</p> <p>_____</p>	
<p>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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally describe proposed storage facilities: _____</p> <p>_____</p>	
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ tons per _____ (unit of time) • Operation : _____ tons per _____ (unit of time) <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: _____ • Operation: _____ <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • 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 Covertypes	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0	1	-1
• Forested	0	0	0
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	.5	.5	.5
• Agricultural (includes active orchards, field, greenhouse etc.)	23	0	-23
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	0	0	0
• Non-vegetated (bare rock, earth or fill)	0	0	0
• Other Describe: Residential		24	

<p>c. Is the project site presently used by members of the community for public recreation? <i>i. If Yes: explain:</i> _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? If Yes, <i>i. Identify Facilities:</i> _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>e. Does the project site contain an existing dam? If Yes: <i>i. Dimensions of the dam and impoundment:</i></p> <ul style="list-style-type: none"> • Dam height: _____ feet • Dam length: _____ feet • Surface area: _____ acres • Volume impounded: _____ gallons OR acre-feet <p><i>ii. Dam's existing hazard classification:</i> _____</p> <p><i>iii. Provide date and summarize results of last inspection:</i> _____ _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? If Yes: <i>i. Has the facility been formally closed?</i> <ul style="list-style-type: none"> • If yes, cite sources/documentation: _____ <i>ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:</i> _____ _____ <i>iii. Describe any development constraints due to the prior solid waste activities:</i> _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? If Yes: <i>i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:</i> _____ _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>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? If Yes: <i>i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:</i></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Yes – Spills Incidents database <input type="checkbox"/> Yes – Environmental Site Remediation database <input type="checkbox"/> Neither database </div> <div style="width: 50%;"> Provide DEC ID number(s): _____ Provide DEC ID number(s): _____ </div> </div> <p><i>ii. If site has been subject of RCRA corrective activities, describe control measures:</i> _____ _____ _____</p> <p><i>iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?</i> If yes, provide DEC ID number(s): _____</p> <p><i>iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):</i> _____ _____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

v. Is the project site subject to an institutional control limiting property uses? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
<ul style="list-style-type: none"> • 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No • Explain: _____ 													
E.2. Natural Resources On or Near Project Site													
a. What is the average depth to bedrock on the project site? _____ N/A feet													
b. Are there bedrock outcroppings on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ N/A %													
c. Predominant soil type(s) present on project site: <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">NgA</td> <td style="width: 40%; text-align: right;">30 %</td> </tr> <tr> <td>OvA</td> <td style="text-align: right;">12 %</td> </tr> <tr> <td>GnA</td> <td style="text-align: right;">13 %</td> </tr> </table>		NgA	30 %	OvA	12 %	GnA	13 %						
NgA	30 %												
OvA	12 %												
GnA	13 %												
d. What is the average depth to the water table on the project site? Average: _____ 2 feet													
e. Drainage status of project site soils: <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;"><input type="checkbox"/> Well Drained:</td> <td style="width: 70%; text-align: right;">70 % of site</td> </tr> <tr> <td><input type="checkbox"/> Moderately Well Drained:</td> <td style="text-align: right;">15 % of site</td> </tr> <tr> <td><input type="checkbox"/> Poorly Drained</td> <td style="text-align: right;">15 % of site</td> </tr> </table>		<input type="checkbox"/> Well Drained:	70 % of site	<input type="checkbox"/> Moderately Well Drained:	15 % of site	<input type="checkbox"/> Poorly Drained	15 % of site						
<input type="checkbox"/> Well Drained:	70 % of site												
<input type="checkbox"/> Moderately Well Drained:	15 % of site												
<input type="checkbox"/> Poorly Drained	15 % of site												
f. Approximate proportion of proposed action site with slopes: <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;"><input type="checkbox"/> 0-10%:</td> <td style="width: 70%; text-align: right;">100 % of site</td> </tr> <tr> <td><input type="checkbox"/> 10-15%:</td> <td style="text-align: right;">_____ % of site</td> </tr> <tr> <td><input type="checkbox"/> 15% or greater:</td> <td style="text-align: right;">_____ % of site</td> </tr> </table>		<input type="checkbox"/> 0-10%:	100 % of site	<input type="checkbox"/> 10-15%:	_____ % of site	<input type="checkbox"/> 15% or greater:	_____ % of site						
<input type="checkbox"/> 0-10%:	100 % of site												
<input type="checkbox"/> 10-15%:	_____ % of site												
<input type="checkbox"/> 15% or greater:	_____ % of site												
g. Are there any unique geologic features on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
ii. Do any wetlands or other waterbodies adjoin the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
If Yes to either <i>i</i> or <i>ii</i> , 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
iv. For each identified regulated wetland and waterbody on the project site, provide the following information: <table style="width: 100%; border: none;"> <tr> <td style="width: 10%;">• Streams:</td> <td style="width: 40%;">Name _____</td> <td style="width: 50%;">Classification _____</td> </tr> <tr> <td>• Lakes or Ponds:</td> <td>Name _____</td> <td>Classification _____</td> </tr> <tr> <td>• Wetlands:</td> <td>Name _____</td> <td>Approximate Size _____</td> </tr> <tr> <td>• Wetland No. (if regulated by DEC)</td> <td colspan="2">_____</td> </tr> </table>		• Streams:	Name _____	Classification _____	• Lakes or Ponds:	Name _____	Classification _____	• Wetlands:	Name _____	Approximate Size _____	• Wetland No. (if regulated by DEC)	_____	
• Streams:	Name _____	Classification _____											
• Lakes or Ponds:	Name _____	Classification _____											
• Wetlands:	Name _____	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, name of impaired water body/bodies and basis for listing as impaired: _____													
i. Is the project site in a designated Floodway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
j. Is the project site in the 100 year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
k. Is the project site in the 500 year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													
l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:													
i. Name of aquifer: _____													

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____ Deer _____ _____</p>	
<p>n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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</p>	
<p>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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give a brief description of how the proposed action may affect that use: _____ _____</p>	
<p>E.3. Designated Public Resources On or Near Project Site</p>	
<p>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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No i. If Yes: acreage(s) on project site: _____ ii. Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes: i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____ _____ _____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes: i. CEA name: _____ ii. Basis for designation: _____ iii. Designating agency and date: _____</p>	

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 checked="" 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.

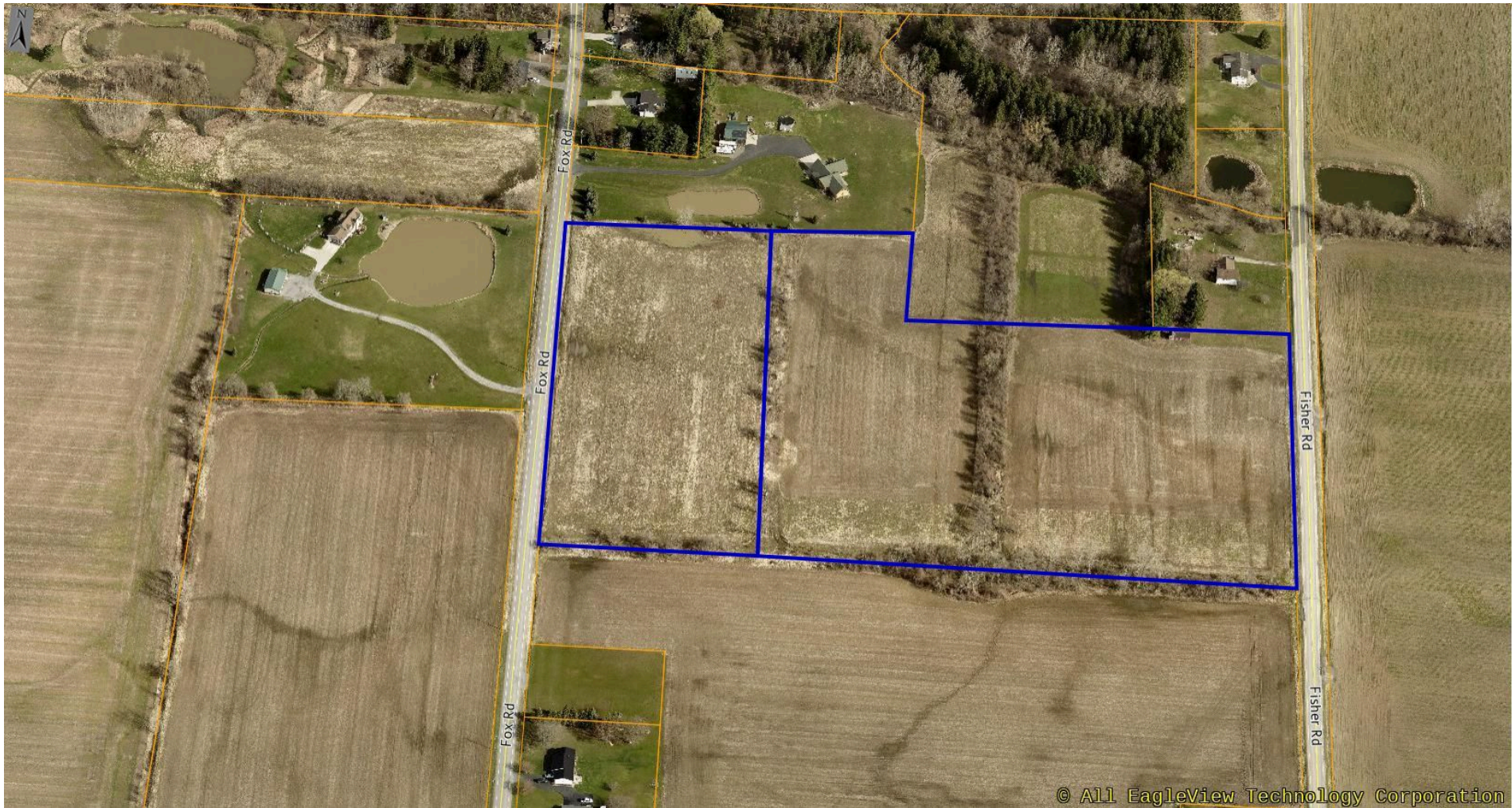
G. Verification

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

Applicant/Sponsor Name Michael Dilcher Date 10/24/2025

Signature _____ Title _____

T-02-OAK-11-25



04/04/2025

T-02-OAK-11-25



04/04/2025