# DEVELOPMENT OF REGIONAL SIGNIFICANCE COMPATIBLE GROWTH AREA APPLICATION PACKET

(REVISED 3/23/05)

#### Dear Applicant:

We are enclosing the necessary forms for requesting review of a proposed development within the Compatible Growth Area that is a **Development of Regional Significance**, pursuant to Volume 1, Chapter 4 of the <u>Central Pine Barrens Comprehensive Land Use Plan</u>. Enclosed please find the following items:

- 1. Transmittal Letter (2 pages)
- 2. Owners Affidavit (for individual or partnership)
- 3. Owners Affidavit (for corporation)
- 4. General Project Data Sheet (Table 2 pages, Applicant, Project, and Permit Information)
- 5. Standards and Guidelines for Land Use (Table 3 pages)

Please note that all forms must be completely filled out and all supporting documentation to show that your project meets the standards and guidelines must be attached. The completed application with the necessary supporting documentation will constitute your development application. Development projects proposed for the Compatible Growth Area of the Central Pine Barrens which are a Development of Regional Significance must meet all of the standards and guidelines as set forth in Volume 1, Chapter 5, of the Central Pine Barrens Comprehensive Land Use Plan (copy of section enclosed).

Additionally, the Transmittal Letter lists several specific items which must be submitted:

- A copy of any and all approvals that have been received to date
- Six copies of the final approved map or site plan including any required conditions or revisions.
- Copies of other maps or data that document and support the information presented in the attached forms.
- A final State Environmental Quality Review Act or finding statement and supporting documentation (Environmental Assessment Form, Draft and Final Environmental Impact Statements)
- A copy of the Suffolk County Planning Commission determination (if applicable) regarding this application.
- Completed and Notarized Owner's Affidavit (form attached) only required if the applicant does not own the property.

As soon as your application has been received by the Commission and found to be complete, a hearing will be scheduled for your project. If you require further assistance in filling out your application, please feel free to contact Commission staff at 631-288-1079.

# DEVELOPMENT OF REGIONAL SIGNIFICANCE APPLICATION TRANSMITTAL LETTER

Dear Commi	ssioners:			
Please accept this package as an application for development review of the project known as				
submitted on	Date	_ by	Applicant's Name	
	Date		Applicant's Name	
in Section 57 proposal is a l	7-0107 of the New York State Development of Regional Sign	e Enviro nificano ens Con	th Area of the Central Pine Barrens as described onmental Conservation Law. I realize that this te and must meet the <b>Standards and Guidelines</b> apprehensive Land Use Plan including the Final te 12, 1995.	
documentation references to guidelines. I it is importan	on is included in this application the accompanying support me have also enclosed the required that I read the enclosed standardered incomplete if an explanation.	on. Plea naterials d additio ards and	rds and guidelines, and appropriate supporting se find below an explanation, and specific page s, showing consistency with the standards and onal materials as noted below. I understand that d guidelines thoroughly and that my application is not provided for each of the items described	
	the information noted above, t: (please check those items that		owing requisite material has also been included acluded)	
	A copy of any an	d all ap	provals that have been received to date	
	Three copies of the required conditions or revision		approved map or site plan including any	
	Copies of other minformation presented in the		data that document and support the ed forms.	
		orting d	ate Environmental Quality Review Act or ocumentation (Environmental Assessment al Impact Statements)	
	A copy of the Sufapplicable) regarding this ap		ounty Planning Commission determination (if on.	
	Completed and N required if the applicant doe		d Owner's Affidavit (form attached) - only wn the property.	

I understand that public hearing will be scheduled for deemed complete.	or this project once my application has been
	(Applicant's Signature)
	(Applicant's Name Printed)
I authorize the following individual to act as my age application. Please contact them with all information	<del>-</del>
Agent's Name, Address and Phone Number:	
	(Agent's Signature)

### OWNER'S AFFIDAVIT

(Use this form if property is owned by an individual or a partnership)

STATE OF)	
)ss: COUNTY OF)	
	, being duly sworn, deposes
(Owner's Name(s))	
and says that I/we reside at	(Owner's Address)
	(Owner's Address), in the County of,
	, in the county of,
State of, a	and that I/we am/are the owner in fee of the
property located at	Address)
(Property A which is also designated as Suffolk County Tax 1	
	, and that I/we have been the
	, and that I we have been the
owner(s) of this property continuously since	, and that I/we
	(Date)
have authorized	
permit application to the Central Pine Barrens Jo	nt's Name) oint Planning and Policy Commission for this
property.  I/we make this Statement knowing th	hat the Central Pine Barrens Joint Planning and
Policy Commission will rely upon the truth of th	e information contained herein.
(Owner's Signature)	(2 <sup>nd</sup> Owner's Signature)
, ,	, , , , , , , , , , , , , , , , , , ,
(Owner's Name - Please Print)	(2 <sup>nd</sup> Owner's Name - Please Print)
(Date)	(Date)
Sworn to before me thisday of200	Sworn to before me this,200
(Notary Public)	(Notary Public)

### **OWNER'S AFFIDAVIT**

(Use this form if property is owned by a corporation)

STATE OF	)			
COUNTY OF	)	)ss:		
I,		,1	being duly sworn, deposes and sa	ays that I am the
		0.1		
(Official Titl	(e)	of the	(Landowner's Name)	corporation
(Official Fili	ic)		(Landowner 3 Name)	
located at				,
		`	vner's Address)	
in the County of	,	State of		, and that
this corneration is the ow	mer in fee c	of the pror	perty located at	
uns corporation is the ow		or the prop	(Propert	y Address)
			_, which is also designated as S	
Map Number(s)				, and that
this cornoration has been	the owner	of this pro	operty continuously since	
tins corporation has occin	the owner	or uns pre	perty continuously since	(Date)
and that I have authorize	ed			
			(Applicant's Name)	
to make a permit applicat	tion to the (	Central Pi	ne Barrens Joint Planning and Po	olicy Commission
for this property. I ma	ke this Stat	ement kno	owing that the Central Pine Barre	ens Joint Planning
and Policy Commission v	will rely upo	on the trut	h of the information contained h	erein.
		(.	Authorized Officer's Signature)	-
		-	(Officer's Name - Please Print)	-
		_	(Date)	-
Sworn to before me thisday of	200			
(Notary Public)		•		

# DEVELOPMENT OF REGIONAL SIGNIFICANCE APPLICATION PROJECT DATA SHEET

Applicant Information		
Name (print)		
Address		
Phone/Fax		
Agent's Name		
Address		
Phone/Fax		
	Project Information	
Project Name		
Tax Map Number(s)		
Street Location		
Hamlet & Town		
Total Project Site Acreage		
Existing Land Use (vacant, residence, etc)		
Present Zoning (if split please give areas within each zone)		
Project Description		

## **Permit Information** (please note which permits or plans are required and why, if they have been received and as of what date) State Environmental Quality Review Act (SEQRA) (please note if positive declaration, date of DEIS and FEIS, etc) Town Permits - subdivision, site plan, tree clearing, variance, special permit (please note from which board) Project Plans Enclosed (site plan, subdivision, etc.) Including drainage or landscape plans NYS DEC - wetlands, WSR, mining, SPDES, etc. Suffolk County Department of Health Services - Article 6, 7, 12 Suffolk County Planning Commission

### STANDARDS AND GUIDELINES FOR LAND USE

Standard (S)/Guideline (G)		<b>Explanation and Document Page Reference (attach additional sheets if necessary)</b>
S 5.3.3.1.1	Suffolk County Sanitary Code Article 6 compliance	
S 5.3.3.1.2	Sewage treatment plant discharge	
G 5.3.3.1.3	Nitrate-nitrogen goal	
S 5.3.3.2.1	Suffolk County Sanitary Code Articles 7 & 12 compliance	
S 5.3.3.3.1	Significant discharges and public supply well locations	
G 5.3.3.3.2	Private well protection	
S 5.3.3.4.1	Nondisturbance buffers	
S 5.3.3.4.2	Buffer delineations, covenants and conservation easements	
S 5.3.3.4.3	Wild, Scenic and Recreational Rivers Act compliance	
G 5.3.3.4.4	Additional nondisturbance buffers	
S 5.3.3.5.1	Stormwater recharge	

Standard (S)/Guideline (G)		Explanation and Document Page Reference (Attach additional sheets if necessary)
G 5.3.3.5.2	Natural recharge and drainage	
G 5.3.3.5.3	Ponds	
G 5.3.3.5.4	Natural topography in lieu of recharge basins	
G 5.3.3.5.5	Soil erosion and stormwater runoff control during construction	
\$ 5.3.3.6.1	Vegetation Clearance Limits	
S 5.3.3.6.2	Unfragmented open space	
S 5.3.3.6.3	Fertilizer-dependent vegetation limit	
8 5.3.3.6.4	Native Plantings	
S 5.3.3.7.1	Special species and ecological communitites	
G 5.3.3.8.1	Clearing envelopes	
G 5.3.3.8.2	Stabilization and erosion control	
G 5.3.3.8.3	Slope analysis	

Standard (S)/Guideline (G)		Explanation and Document Page Reference (Attach additional sheets if necessary)
G 5.3.3.8.4	Erosion and sediment control plans	
G 5.3.3.8.5	Placement of roadways	
G 5.3.3.8.6	Retaining walls and control structures	
S 5.3.3.9.1	Receiving entity for open space dedications	
G 5.3.3.9.2	Clustering	
G 5.3.3.9.3	Protection of dedicated open space	
G 5.3.3.10.1	Best management practices	
G 5.3.3.11.1	Cultural resource consideration	
G 5.3.3.11.2	Inclusion of cultural resources in applications	
G 5.3.3.11.3	Protection of scenic and recreational resources	
G 5.3.3.11.4	Roadside design and management	
S 5.3.3.12.1	Commercial and industrial compliance with Suffolk County Sanitary Code	