

TOWN OF LINCOLN

COUNTY OF MADISON

NEW YORK

6886 Tuttle Road

Canastota, NY 13032

315-697-8837

**APPLICATION TO PLANNING BOARD
FOR
SUBDIVISION APPROVAL**

Application Purpose

Minor Subdivision Plat _____
Required submissions in SECT. 410

Major Subdivision Plat _____
(Preliminary) _____

Major Subdivision Plat _____
(Final)
Required submissions in SECT. 510

OFFICIAL USE ONLY

Application No. _____

Initial Contact Date: _____

Application Fee Rec'd _____

SEQR NegDec date _____
(Or)

DEIS Accepted for
Public Review Date _____

Public Hearing Date _____

FEIS Accepted Date _____

Action Accepted Date _____

PROPERTY DEED of RECORD:

Deed Book ___ Page ___ Date _____

Tax Map Number _____

Acreage _____

Name of Subdivision: _____ Number of Lots: _____

Applicant: _____ Phone: _____
Name

Mailing Address: _____

Signature: _____

Owner: (If different from applicant)

Name: _____ Phone: _____

Mailing Address: _____

Surveyor/Engineer: _____ License No. _____
Name

Mailing Address: _____ Phone: _____

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Please include a tax map or similar map showing site of the proposed project as well as agricultural properties identified on this data statement.

LIST ALL PROPERTY OWNERS WITHIN 500 FEET OF THE PROPERTY LINES

- 1. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 2. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 3. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 4. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 5. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 6. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 7. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 8. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 9. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 10. Name: _____
Mailing Address: _____
Parcel Numbers: _____
- 11. Name: _____
Mailing Address: _____
Parcel Numbers: _____

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AGRICULTURAL DATA STATEMENT

Applicant's Name: _____

Mailing Address: _____

Proposed Project's Location: _____

Description: _____

.....
List all property owners for all agricultural properties within 500 feet of the project's property lines & who are located in an agricultural district. Continue on the back if more space is needed. (See tax maps or Agricultural District maps at the Town Clerk's Office)

1. Name: _____

Mailing Address: _____

Parcel Numbers: _____

2. Name: _____

Mailing Address: _____

Parcel Numbers: _____

3. Name: _____

Mailing Address: _____

Parcel Numbers: _____

4. Name: _____

Mailing Address: _____

Parcel Numbers: _____

5. Name: _____

Mailing Address: _____

Parcel Numbers: _____

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Town of Lincoln: Land Management Program

I. Application Process

Step 1: Application & Environmental Assessment Forms

A. Available at the Lincoln Town Clerk's Office

1. Phone: 315-697-8837

2. Office Hours: Tues 8am-3pm, Wed 11am-6pm, Sat 8am-noon

B. You will be required to FILL out COMPLETELY the following:

1. THREE (3) Copies of the Town of Lincoln Application Package

2. THREE (3) Copies of the Environmental Assessment Form

(One copy - Town, One copy - County, One Copy - Applicant)

Step 2: FULL BLOWN SURVEY MAP OF PROPERTY TO BE SUBDIVIDED

A. From your Surveyor:

1. One (1) Full Blown MYLAR copy of Survey Map

2. Two (2) Full Blown Copies of Survey Map

Step 3: One Madison County Tax Map (showing your property),

Contact Madison county Planning Department (Maps Division)

315-366-2371

Step 4: Names & Addresses of Adjacent Property Owners

Property owners adjacent to proposed subdivision (within 500 feet of ALL property lines) must be notified in writing within five (5) days prior to Public Hearing Date. Based on the list provided by the applicant (referenced through the tax map) the Town Clerk's Office will contact property owners.

*****THE ABOVE PAPERWORK CONSITITUTES "APPLICATION PACKAGE"*****

II Presentation of Application before Town of Lincoln Planning Board

Step 1: Applicant must appear before the Lincoln Planning Board a minimum of two (2) times.

A. First Visit: Applicant must have the FULLY COMPLETED "APPLICATION PACKAGE"

Discussion and review of "Application Package" by the Board

B. Second Visit: PUBLIC HEARING

1. Applicant and adjacent landowners appear before the Town of Lincoln Planning Board.

2. Vote by Lincoln Planning Board to approve or disapprove Subdivision.

Step 2: Applicant delivers for recording: One (1) copy each of the Application, the Environmental Assessment, and MYLAR Map to Madison County Clerk's Department.

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Article 4 MINOR SUBDIVISION

Section 410 Information Required For Minor Subdivisions

The following shall be submitted with applications for approval

- 410.1. Name and address of subdivider and professional advisers, including license numbers and seals.
- 410.2. One copy of the minor subdivision plat (which is to be submitted to the County Clerk by the subdivider once the Planning Board Chairman places his signature on same signifying that the subdivision is approved, drawn with ink on appropriate material, plus two (2) paper copies. The plat map (drawn by a licensed surveyor at a scale of one (1) inch to one hundred (100) feet, unless otherwise specified by the Planning Board) shall contain the following information:
 - a. Subdivision name, scale, north arrow, and date;
 - b. Subdivision boundaries;
 - c. Contiguous properties and names of owners;
 - d. Existing roads, utilities, and structures;
 - e. Water courses (including all FEMA Federal Flood Insurance Hazard Areas), marshes (including DEC designated wetlands), wooded areas, and other significant physical features on or near the site;
 - f. Proposed pattern of lots, including lot widths and depths, road layout, open space, drainage, sewerage, and water supply;
 - g. Land contours at ten-foot (10') intervals, or other suitable indicators of slope.
- 410.3. Copy of tax map(s).
- 410.4. Existing and/or intended restrictions on the use of land including easements, covenants, and zoning.

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- 410.5. Total acreage of subdivision and number of lots proposed.
- 410.6. Building types and approximate size and cost.
- 410.7. Environmental Assessment Form (EAF); long or short form, as required by the Planning Board.
- 410.8. On-site sanitation and water supply facilities shall be designed to meet the specifications of the State Department of Health, and a statement to this effect shall be made on the application. If this subdivision, in combination with previous subdivision of the same parent parcel accomplished over the preceding three years, would meet the New York State criteria for such review as is stated in Section 350 of these regulations, Madison County Health Department certification of adequacy of water supply and sewage disposal systems proposed shall be included.
- 410.9. Additional information as deemed necessary by the Planning Board.
- 410.10. Any required fees.

3/20/96

Section 411 - LOT DIMENSIONS

No lot created on or after the effective date of this local law shall have a lot depth which is more than three (3) times its lot width as measured at the street line.

Adopted April 14, 1999

Short Environmental Assessment Form

Part 1 - Project Information

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:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:		Telephone:		
		E-Mail:		
Address:				
City/PO:		State:	Zip Code:	
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 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 type="checkbox"/>	<input type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		_____ acres		
b. Total acreage to be physically disturbed?		_____ acres		
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ 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 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				

<p>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)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____</p>		

Project:

Date:

**Short Environmental Assessment Form
Part 2 - Impact Assessment**

Part 2 is to be completed by the Lead Agency.

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"/>
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"/>

Project:

Date:

**Short Environmental Assessment Form
Part 3 Determination of Significance**

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.

- 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.
- 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 FORM