### VILLAGE OF WAPPINGERS FALLS Offices of Planning/Zoning 2582 South Avenue Wappingers Falls, NY 12590 (845) 297-5277 Fax: (845) 296-0379

## AGENDA OF THE PLANNING BOARD

November 4, 2021

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### \*\*THIS MEETING WILL BE HELD ONLINE AND TELEPHONICALLY ONLY\*\*

#### THERE WILL BE NO IN-PERSON PARTICIPATION BY THE BOARD OR THE PUBLIC.

Until further notice, in accordance with Chapter 417 of the Laws of 2021, all Planning Board meetings will be held via videoconference utilizing the Webex platform. Each Board member will be participating remotely. There will not be an opportunity for the public to participate from the same location as a Board member. However, the public is welcome to view the videoconference contemporaneously by logging in to the Webex platform using the information below. There is also an option to participate by telephone for audio participation only. The meeting will be recorded and the recording will be posted on the Village website. A written transcript of the meeting also will be made available at a later date.

**PLEASE TAKE NOTICE** that the Planning Board of the Village of Wappingers Falls will hold a public meeting on November 4, 2021, beginning at 7 p.m. via Webex. No public hearings are scheduled for this meeting.

The Webex participation information is as follows:

Meeting number (access code): 2633 078 2349 Meeting password: HpP27D3r83X

You may also use this link: Join meeting

To join by phone please call: 1-408-418-9388

The agenda is as follows:

#### ROLL CALL

#### STATEMENT OF COMPLIANCE BY THE CHAIR

#### APPROVAL OF OCTOBER 7, 2021 MINUTES

#### **NEW APPLICATIONS**

#### SUNSHINE HOMECARE

**2622 South Avenue (Grid #6158-18-361189) – Sunshine Realty Holdings LLC (Owner), Francis Clement (Applicant) – New Use.** The property is located in the Village Mixed (VM) zoning district. The applicant is proposing allowing mental health counseling services to the general community by nonprofit ABBA Human Services.

#### **HIPPO HYDROPONICS & ORGANICS**

**1582 Route 9 (Grid #6158-19-559223) – Davis Fowler Group, LLC (Owner), Michael Perrini (Applicant) – New Business and New Signs.** The property is located in the Commercial Mixed Use (CMU) zoning district. The applicant is proposing operating a retail business. The applicant is also proposing one wall sign and one multitenant sign.

#### HUDSON VALLEY OFFICE FURNITURE

**1701 Route 9 (Grid #6158-10-497508) – 93 NYRPT LLC (Owner), John Chickery (Applicant) – New Business.** This property is located in the Commercial Mixed Use (CMU) zoning district. The applicant is proposing operating a retail business.



BUILDING DEPARTMENT 2582 SOUTH AVENUE WAPPINGERS FALLS, NY 12590 PHONE: (845) 297-5277 FAX: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

## **APPLICATION FOR PLANNING BOARD REVIEW**

All information must be completely filled out and returned no later than the stated submittion date.

Date Submitted:	Date of Meetin	ng :
<b>Property Identification:</b>		
Address: 2622 South Ave, Wappingers Falls, NY	12590	
Zoning District: VM & Historic Overlay	Existing site area: C	).28 acres
<b>Owner Information:</b>		
Name : Sunshine Realty Holdings LLC		
Address : 10 Schriever Ln		
City: New City	State: NY	
Contact Numbers: (H)	(C) 845-641-858	3
(E-mail) francis@sunshinecares.com		
Applicant Information:		
(Please provide if someone other than the property owner is the a	applicant)	
Name : Francis Clement		
Address: 10 Schriever Lane		
City: New City	State: NY	
Contact Numbers: (H)	045 044	
E-mail Address: francis@sunshinecares.com		
Lead Design Professional: (If applicable)		anne e na mata di DZ - 194 il Addine e na mana e na casa da sa
(Indicate the primary design professional associated with this ap	plication)	
Name: NA		
Title:	,	and a second
Company:		
Address:		***************************************
Telephone # :		
E-mail Address:		



## **APPLICATION FOR PLANNING BOARD REVIEW**

(Continued)

### **Proposed Site:**

(Property where improvements are proposed)

Existing Use(s): Office Building, program services

Proposed square footage: 6000 SQ Ft

**Project Description :**(*Please print or type*)

(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.)

Space is presently allocated to provide administrative and counseling services for TBI and NHTD waiver clients

ABBA Human Services- non profit proposes to provide mental health counseling services to the general community

Items to be submitted for review: (Only items pertaining to project)

- $\Box$  Ten (10) sets of plans.
- □ Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form
- $\square$  Application for proposed sign
- □ Application Fee
- □ Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.

en

Signature of Applicant Signed

Date

9-16-21

Office use only:				
[ ] FEE :	Receipt No. :	Cash / Check #	Date:	
Revised by :		Revision date :		
	Zoning Administrator/Code Enforcement Officer			



Office of Building, Planning & Zoning 2582 South Avenue Wappingers Falls, NY 12590 Phone: (845) 297-5277 Fax: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

# **CONSENT FORM**

Name of property owner:	nine Realty Holdings LLC	
Address of property owner: 2622	2 South Avenue	
	State: NY	Zip: 12590
Phone number of property owner	:: (Include home, work, mobile numb	er and e-mail address):
(H)	(C) <u>845-641-8583</u>	
(W)	(Email) francis@sunshine	cares.com
	ng conducted: 2622 South Ave, War	
Description of work: Appear	before the planning board for the us	e of the building
Name of person doing work:	ncis Clement	
Address of person doing work:		
		Zip: 10954
	ork (Include home, work, mobile nu	mbers and e-mail address):
(H)	(C) <u>845-641-8583</u>	
(W)	(Email) francis@sunshin	ecares.com

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

 $\mathcal{O}$ 

Signature of Property Owner

21 16

Date Signed

#### 617.20 AppendixB Short Environmental Assessment Form

#### **Instructions for Completing**

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

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

Part 1 - Project and Sponsor Information

Name of Action or Project:

ABBA Human Services Mental Health Counseling

Project Location (describe, and attach a location map):

2622 South Avenue, Wappingers Falls, NY 12590

Brief Description of Proposed Action:

ABBA Human Services Foundation will provide mental health counseling services as a Licensed article 31 mental health clinic.

Name of Applicant or Sponsor:		Teler	Telephone: 845-253-6828			
ABBA Human Services Foun	dation	E-Ma				
Address:						
10 Schriever Lane, Suite B				1		
City/PO:		ç	State:	Zip	Code:	
New City			١Y		956	
1. Does the proposed action only involve the legislativ	ve adoption of a p	lan, local la	w, ordinanc	ce,	NO	YES
administrative rule, or regulation? If Yes, attach a narrative description of the intent of the that may be affected in the municipality and proceed	he proposed action to Part 2. If no, co	n and the en ontinue to q	vironmenta	al resources		
2. Does the proposed action require a permit, approva If Yes, list agency(s) name and permit or approval:	l or funding from	any other g	overnmenta	al Agency?	NO	YES
Office of Mental Health. A	rticle 31 I	Licens	se			
3.a. Total acreage of the site of the proposed action?			acres			•
<ul> <li>b. Total acreage to be physically disturbed?</li> <li>c. Total acreage (project site and any contiguous pro-</li> </ul>	poties) owned	<u></u>	acres			
or controlled by the applicant or project sponsor?			acres			
4. Check all land uses that occur on, adjoining and ne	ear the proposed a	ction.				
Urban Rural (non-agriculture)	Industrial	Comn	nercial	Residenti	al (subur	ban)
Forest Agriculture Parkland	Aquatic	Other a	(specify):			

5. Is the proposed action,	NO	YES	NIA
a. A permitted use under the zoning regulations?			· · · ·
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	,	NO	YES
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental A If Yes, identify:	rea?	NO	YES
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES
b. Are public transportation service(s) available at or near the site of the proposed action?			
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed ac	tion?		
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies:		NO	YES
10. Will the proposed action connect to an existing public/private water supply?	<u> </u>	NO	YES
If No, describe method for providing potable water:			
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:	<u> </u>		
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic		NO	YES
Places? b. Is the proposed action located in an archeological sensitive area?			
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, conta		NO	YES
wetlands or other waterbodies regulated by a federal, state or local agency?			
		NO	YES
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:	?		
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Chec Shoreline Forest Agricultural/grassland Early mid-successional Wetland	k all the	at apply:	
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by State or Federal government as threatened or endangered?	the	NO	YES
16. Is the project site located in the 100 year flood plain?		NO	YES
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes.		NO	YES
a. Will storm water discharges flow to adjacent properties?			

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)?	NO	YES
If Yes, explain purpose and size:		
19. Has the sile of the proposed action or an adjoining property been the location of an active or closed solid waste management facilities?	NO	YES
solid waste management facility? If Yes, describe:	1.0	1 EO
20. Has the site of the proposed action or an adjoining property been the subject ofremediation (ongoing or completed) for hazardous waste?	NO	YES
If Yes, describe:		
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE I RNOWLEDGE	BEST O	f My
Applicant/sponsor name: Francis Clement Date: 9-16-21		
Signature: Jacob		

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

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<ol> <li>Will the proposed action create a material conflict with an adopted land use plan or zoning</li> </ol>	No,or small impact may occur	Moderate to large impact may occur
2. Will the proposed action result in a change in the use or intensity of use ofland?		· · · · · · · · · · · · · · · · · · ·
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
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?		······································
5. 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?		
<ol> <li>Will the proposed action impact existing: a. public / private water supplies?</li> </ol>		
b. public / private wastewater treatment utilities?		·····
I. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		~

	No,or smali impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

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

<ul> <li>Check this box if you have determined, based on the info documentation, that the proposed action may result in c impacts and an environmental impact statement is require</li> <li>Check this box if you have determined, based on the info documentation, that the proposed action will not result in</li> </ul>	one or more potentially large or significant adverse ed. rmation and analysis above, and any supporting	
ABBA Human Services Foundation 9-16-21		
Name of Lead Agency Date		
Sara Ambatt Executive Director		
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)		

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#### PART "A" OWNER AFFIDAVIT

State of New 7		
County of AD L	land } ss:	
Francis	Clement	_being duly sworn, deposes and says:

- That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
- 2. That I/we hereby authorize <u>francis</u> <u>clement</u>, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
- 3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
- 4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
- 5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

Applicant/Owner

Applicant/Owner Sworn to before me this Notary Public

INNOCENT K. ULAHANNAN NOTARY PUBLIC, State of New York No. 01UL5053152 Qualified in Rockland County Commission Expires Dec. 11, 2047 A

#### PART "B" APPLICANT / AGENT AFFIDAVIT

Sta	unty of <u>Acicland</u> } ss:
	Francis Clement being duly sworn, deposes and says:
1.	That I/we are the
	Planning Board for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and
	that the statements contained therein are true to the best of my/our knowledge and belief.
2.	That he/she resides at or conducts business at 2622 South Ave, Wapp in the
	County of <u>Mappingers Falls</u> and the State of <u>NY</u> .
3.	I hat twe understand that by submitting this application for Planning Board approval that l/we expressly grant
	permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that
	this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board
	action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all
	application fees, review fees, and inspection fees incurred by the Village related to this application.

- 4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

Applicant/Agent

Applicant/Agent

Sworn to before me this Notary Public

INNOCENT K. ULAHANNAN NOTARY PUBLIC, State of New York No. 01UL5053152 Qualified in Rockland County Commission Expires Dec. 11, 2047 221



BUILDING DEPARTMENT OFFICE OF CODE ENFORCEMENT OFFICE OF THE FIRE INSPECTOR 2582 SOUTH AVENUE WAPPINGERS FALLS, NY 12590 PHONE: (845) 297-5277 FAX: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov



# **APPLICATION FOR PLANNING BOARD REVIEW**

Submission Date:\_\_\_\_\_

Date of Meeting: NOV. 4, 2021

Meetings are held at the American Legion Hall, 7 Spring Street on the first Thursday of the month at 7:00 p.m. All information must be completely filled out and returned no later than 15 business days before meeting date. For the complete list of Planning Meeting Dates and Deadlines go to the Building, Planning and Zoning page on the village website www.wappingersfallsny.gov.

A filing fee is required in connection with any application to the Planning Board for approval.

#### The Planning Board is responsible for the review and approval of all applications concerning:

- X Opening a new business in the Village
- □ Installing a new sign
- □ Building a new structure in a commercial zone
- □ Subdivision / Site Review/ Lot Line Adjustment

Items to be submitted for review: (Only items pertaining to project)

□ PDF Emailed to Building Dept. and Ten (10) hard copy sets of construction/site/elevation/plans - Engineer drawings showing all areas to be affected. Or a sketch of the proposed floor plan layout (*All sets of plans must be folded*)

□ Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)

Consent Form (The applicant must provide consent form, from homeowner authorizing him/her to file for Planning Review)

⋈ Application fee

□ Application for proposed sign - Including Renderings/sketch of proposed sign/ Elevation/size/ exact color samples.

(Separate Application)



BUILDING DEPARTMENT 2582 SOUTH AVENUE WAPPINGERS FALLS, NY 12590 PHONE: (845) 297-5277 FAX: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

## **APPLICATION FOR PLANNING BOARD REVIEW**

All information must be completely filled out and returned no later than the stated submition date.

Date Submitted:	Date of Meeting :
Property Identification:	
Address: 1582 Route 9, Wappingers Falls, NY 12590	
Zoning District:CMU-Commercial Mixed Use Exis	sting site area: <u>3.08 Ac.</u>
<b>Owner Information:</b>	
Name : Davis Fowler Group, LLC	
Address : 3 Nancy Court, Suite 4	
City: Wappingers Falls Sta	te: <u>NY</u> Zip: <u>12590</u>
Contact Numbers: (M) (Office) 845-897-2664 (C)	
(E-mail)peadmin@povallengineering.com	
Applicant Information:	
(Please provide if someone other than the property owner is the applicant)	
Name: <u>Hippo Hydroponics &amp; Organics</u> Min Address: 1582 Route 9 Unit R-2	chael Perrino
Address: 1582 Route 9 Unit R-2	
City: Wappingers Falls State	e: <u>NY</u> Zip: <u>12590</u>
Contact Numbers: (H)	(C) 845-656-3791
E-mail Address: mparrinie hippohydro.co	sm
Lead Design Professional: (If applicable)	
(Indicate the primary design professional associated with this application)	
Name:n/a	
Title:	
□ Architect Engineer	
Company:	
Address:	
Telephone # :	
E-mail Address:	



# APPLICATION FOR PLANNING BOARD REVIEW

(Continued)

### **Proposed Site:**

(Property where improvements are proposed)

Existing Use(s): vacant

Proposed square footage: \_\_\_\_\_\_existing square footage = 3.135 sq. ft.

**Project Description :**(Please print or type)

(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.)

A new tenant, Hippo Hydroponics & Organcis will occupy Unit R-2 in the rear of the Dutchess

shopping plaza as a retail use for the sale of agricultural and growing products including, but not limited to soils, lighting, nutrients, pest control and related products.

Items to be submitted for review: (Only items pertaining to project)

- $\Box$  Ten (10) sets of plans.
- □ Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- □ Consent Form
- $\Box$  Application for proposed sign
- □ Application Fee
- $\Box$  Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.

Signature of Applicant Signed

10-4-2021

Date

Office use only:					
·[] FEE :	Receipt No. :	Cash / Check #	Date:	-	
Revised by :		Revision date :			
	Zoning Administrator/Code Enforcement Officer				



Office of Building, Planning & Zoning 2582 South Avenue Wappingers Falls, NY 12590 Phone: (845) 297-5277 Fax: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

## **CONSENT FORM**

Name of property owner: Davis Fowler Group, LLC					
Address of property owner:1582 Route 9, Wappingers Falls, NY 12590 (Unit R-2)					
City: Wappingers Falls	State:	NY	Zip:	12590	
Phone number of property own	ıer: (Include home, work,	mobile num	ber and e-mail a	ddress):	
(H)	(C)				
(W) <u>845-897-2664</u>	(Email)pea	admin@pov	allengineering.	com	
Address of site where work is <b>k</b>	eing conducted: <u>1582</u>	Route 9, Ur	nit R-2		
Description of work: The new tenant, Hippo Hydroponics will occupy Unit R-2 as is. No work is proposed.					
Name of person doing work:					
City:					
Phone number of person doing					
	H) (C)				
(W)					

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

Signature of Property Owner

10-04-2021

Date Signed

#### 617.20 AppendixB Short Environmental Assessment Form

#### **Instructions for Completing**

**Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1.** Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would beneeded 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:

#### Hippo Hydroponics & Organics, Unit R-2, Dutchess Shopping Plaza

Project Location (describe, and attach a location map):

1582 Route 9, Unit R-2

Brief Description of Proposed Action:

A new tenant, Hippo Hydroponics & Organics will occupy Unit R-2 in the rear of the Dutchess Shopping Plaza as a retail use for the sale of agricultural and growing products including, but not limited to soils, lighting, nutrients, pest control and related products.

Name of Applicant or Sponsor:		Tele	ephone: 8	15-6	56-37	91
HIPPO Hydraponics and Organ	ics				hippohydr	
Address: 1582 Route 9 R-2			1			
Hippo Hydroponics And Organi Address: 1582 Route 9 R-2 City/PO: Wappingers Falls			State: NY	1	Zip Code: /25	90
1. Does the proposed action only involve the legislativ		plan, local l	aw, ordinan	ce,	NO	YES
administrative rule, or regulation? If Yes, attach a narrative description of the intent of th that may be affected in the municipality and proceed to				al resource	s	
2. Does the proposed action require a permit, approval	or funding from	any other	government	al Agency?	NO	YES
If Yes, list agency(s) name and permit or approval:						
3.a. Total acreage of the site of the proposed action?		3.077	acres			
b. Total acreage to be physically disturbed?		'N/A	acres			
.c. Total acreage (project site and any contiguous proj or controlled by the applicant or project sponsor?	perties) owned	3.077	acres			
4. Check all land uses that occur on, adjoining and ne	ar the proposed			1		
Urban Rural (non-agriculture)	Industrial	Comi	mercial	Resid	lential (suburl	oan)
Forest Agriculture Parkland	Aquatic	Other	(specify):			

5. Is the proposed action,	NO	YES	NIA
a. A permitted use under the zoning regulations?			
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		NO	YE
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental A If Yes, identify:	Area?	NO	YE
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES
b. Are public transportation service(s) available at or near the site of the proposed action?		_	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed a	ction?		
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies:		NO	YES
10. Will the proposed action connect to an existing public/private water supply?		NO	YES
If No, describe method for providing potable water:			
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:			
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	•	NO	YES
b. Is the proposed action located in an archeological sensitive area?	, .		*
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, cont wetlands or other waterbodies regulated by a federal, state or local agency?	ain	NO	YES
		NO	YES
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody if Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:	?		
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Chec Shoreline Forest Agricultural/grassland Early mid-successional Wetland Urba		t apply:	۹
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by State or Federal government as threatened or endangered?	' the	NO	YES
16. Is the project site located in the 100 year flood plain?		NO	YES
7. Will the proposed action create storm water discharge, either from point or non-point sources?		NO	YES
f Yes, a. Will storm water discharges flow to adjacent properties?			
b. Will storm water discharges be directed to established conveyance systems off and storm drains)? If Yes, briefly describe:			

 $\omega_{\mathbf{p}}$ 

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)?	NO	YES
If Yes, explain purpose and size:		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe:		
<ul> <li>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</li> <li>If Yes, describe:</li> </ul>	NO	YES
AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE E KNOWLEDGE Applicant/sponsor name: Date: 10-6-2 Signature:		F MY

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

21	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?		
2. Will the proposed action result in a change in the use or intensity of use ofland?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
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?		
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?		
<ol> <li>Will the proposed action impact existing:</li> <li>a. public / private water supplies?</li> </ol>		
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

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

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

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.

Village of Wappingers Falls

Name of Lead Agency

#### Tom Morris

Print or Type Name of Responsible Officer in Lead Agency

Signature of Responsible Officer in Lead Agency

	Date
Plannin	g Board Chairman
1	Title of Herpfnsible Officer
Signature	of Preparent if different from Responsible Officer)

#### PART "A" OWNER AFFIDAVIT

State of NEW YOrk	}	
County of DUTCHESS	} ss: }	
Frank Buyakows	K1	_ being duly sworn, deposes and says:

New terant

- 1. That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
- 2. That I/we hereby authorize <u>MCMAEL PERION</u>, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
- 3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
- 4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
- 5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury we declare that I/we have examined this affidavit and that it is true and correct.

Applicant/Owner Sworn to before me this day of 202

Applicant/Owner

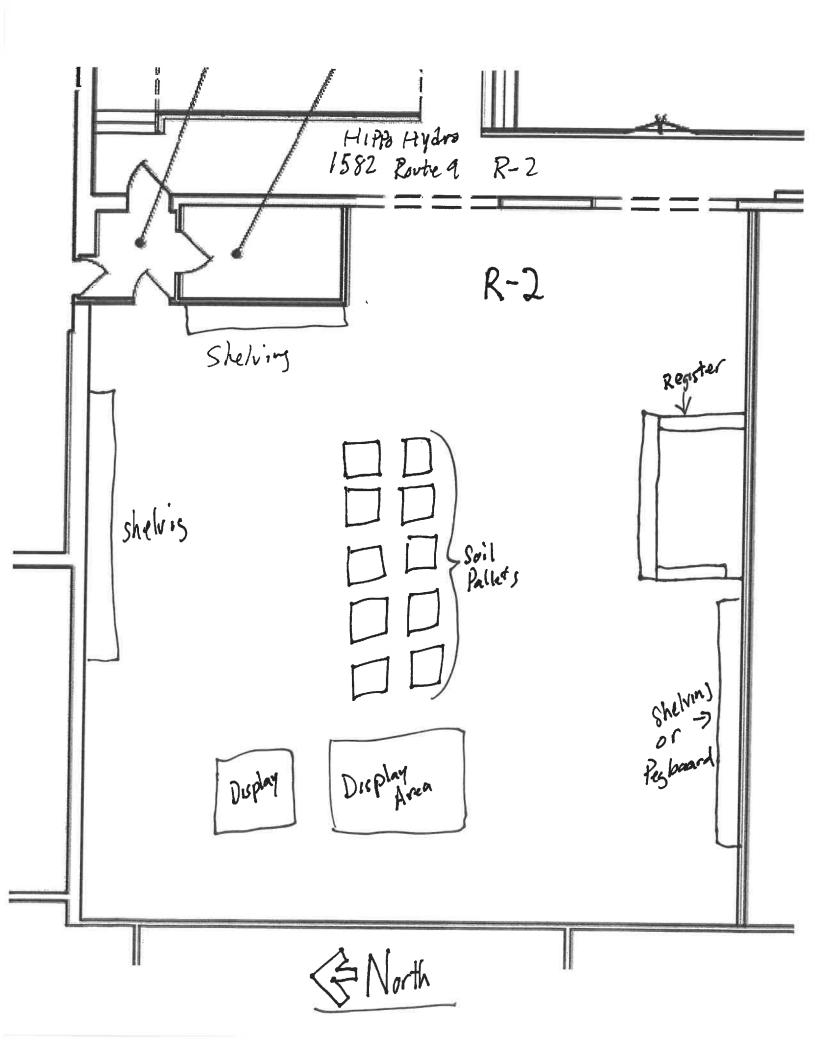
WENDY PRZETAKIEWICZ NOTARY PUBLIC-STATE OF NEW YORK No. 01PR6295033 Qualified in Dutchess County My Commission Expires December 23, 20 25

#### PART "B" APPLICANT / AGENT AFFIDAVIT

	te of <u>NAWYDYK</u> } ss: unty of <u>DLHCHESS</u> }		
	lichael Perrini	being duly sworn, dep	oses and savs:
-	That I/we are the		named in the foregoing application for
		-	and Contour / Aquatic Resource approval(s) and
_	that the statements contained therein are	-	_
2.	That he/she resides at or conducts County of <b>Dutchess</b>	business at <u>1582</u>	Route 9 WappingersFall NY R-2 in the New Yor K

- 3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
- 4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

Applicant/Agent Applicant/Agent Sworn to before me this \_,20<u>21</u>. WENDY PRZETAKIEWICZ NOTARY PUBLIC-STATE OF NEW YORK No. 01PR6295033 Qualified in Dutches's County My Commission Expires December 23, 20,25





Office of Building, Planning & Zoning 2582 South Avenue Wappingers Falls, NY 12590 Phone: (845) 297-5277 Fax: (845) 296-0379 www.wappingersfallsny.gov



# SIGN PERMIT APPLICATION

Name of Applie	cant Hippo Hydropowies & Organies
Add	ress 1582 Route 9 Unit R2
_	Wappingers Falls, NY 12590
E	mail <u>mperrini @ hippohydro.com</u>
Pl	none <u>845-656-3791</u>
<b>Owner of Prop</b>	erty Davis Fowler Group, LLC
Add	ress 3 Nancy Court, Suite 4
	Wappingers Falls, NY 12590
Ph	one 845-897-2664
T ( CD	582 Route 9 Unit R-2
Location of Property 1	
Linear Frontage of bu	
Types of Signs (	Post & Arm O Projecting O Seasonal O Multi-Tenant Wall O Window O Awning O Free Standing O Sidewalk
d (1	Il applications must be accompanied by a detailed scaled drawing showing all sign imensions, graphic design (including lettering and pictorial matter), visual message ext, copy or content of sign), sign colors with color swatches, lighting, and landscaping. Il applications must be accompanied by a plan, drawn to scale showing the following:
	Freestanding signs- the position of the sign in relation to adjacent buildings,
	structures, roads, driveways, property lines, other signs, lighting fixtures, walls
	and fences.
	Awning, Window, Wall or Projecting signs-the location on awning, window,
	wall or building, size of awning, total window area of principal façade, or linear
	frontage of building (as appropriate), projection from building, if relevant,
	proposed signs position in relation to adjacent signs and lighting fixtures. Wall: Over Unit R-2
Sign Specifications	Type Wall & Multi-tenant Placement Multi-tenant: Freestanding sign on Rte 9
	LandscapingYes No Size of SignHeightWidth
	X Single Faced Double Faced Lighted
	MaterialWoodMetalother Durable

The undersigned respectfully petitions the Village of Wappingers Falls Code Enforcement Officer for a Sign Permit.

Application is being made in accordance with the Village Zoning Code. The undersigned acknowledges that permanent signs require review and approval of the Planning Board. In order to be considered complete and ready for review by the Planning Board, the following needs to be submitted to the Zoning Clerk no less than 15 days prior to the scheduled Planning Board Meeting:

Application form (ten sets)	сне ж
Color swatch ( if any color other the state of the st	nan black/white) 🔿
Fee for sign permit of \$75.00 per s	ide (to be paid after Planning Board Approval) 🗸
-	
- <b>*</b>	
Applicant Name Michael Perrini HI	PPO hydroponics
Applicant Signature	Date: 10-04-2021

Owner of Property Signature Date: 10-04-2021

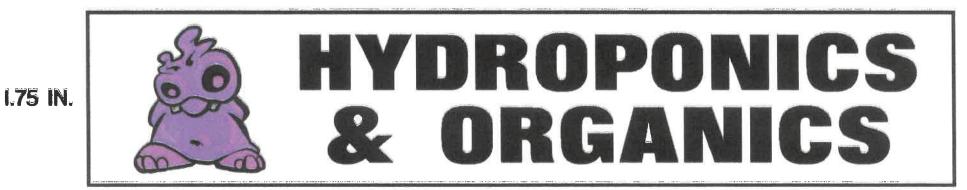
#### THIS SECTION TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER

Sign Permit Granted: Date Permit # issued			
Permit Fee \$	Receipt #	Receipt # Date	
Sign Permit Application	referred to Planning Board	Date	
Comments:			
<u> </u>			

MAIN BUILDING SIGN



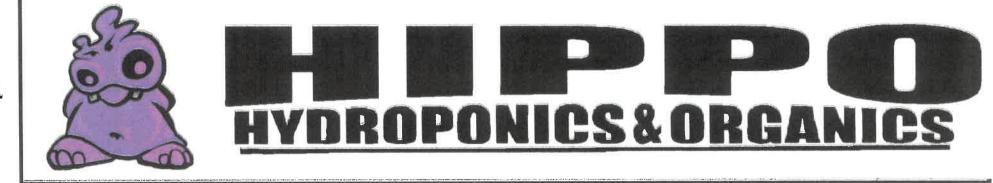
120 IN.



107.75 IN.

24 IN.





120 IN.

4 IN.



BUILDING DEPARTMENT OFFICE OF CODE ENFORCEMENT OFFICE OF THE FIRE INSPECTOR 2582 SOUTH AVENUE WAPPINGERS FALLS, NY 12590 PHONE: (845) 297-5277 FAX: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov



# **APPLICATION FOR PLANNING BOARD REVIEW**

Submission Date:

Date of Meeting:

Meetings are held at the American Legion Hall, 7 Spring Street on the first Thursday of the month at 7:00 p.m. All information must be completely filled out and returned no later than 15 business days before meeting date. For the complete list of Planning Meeting Dates and Deadlines go to the Building, Planning and Zoning page on the village website www.wappingersfallsny.gov.

A filing fee is required in connection with any application to the Planning Board for approval.

### The Planning Board is responsible for the review and approval of all applications concerning:

- Opening a new business in the Village
- □ Installing a new sign
- □ Building a new structure in a commercial zone
- D Subdivision / Site Review/ Lot Line Adjustment

### Items to be submitted for review: (Only items pertaining to project)

 $\square$  PDF Emailed to Building Dept. and Ten (10) hard copy sets of construction/site/elevation/plans - Engineer drawings showing all areas to be affected. Or a sketch of the proposed floor plan layout (All sets of plans must be folded)

□ Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)

□ Consent Form (*The applicant must provide consent form, from homeowner authorizing him/her to file for Planning Review*)

□ Application fee

□ Application for proposed sign - Including Renderings/sketch of proposed sign/ Elevation/size/ exact color samples.

(Separate Application)

VILLAGE OF WAPPINGERS FALLS
BUILDING DEPARTMENT         2582 SOUTH AVENUE         WAPPINGERS FALLS, NY 12590         PHONE: (845) 297-5277 FAX: (845) 296-0379         E-mail: bmurphy@wappingersfallsny.gov         www.wappingersfallsny.gov
<b>APPLICATION FOR PLANNING BOARD REVIEW</b>
All information must be completely filled out and returned no later than the stated submition date.
Date Submitted: $0(14/2)$ Date of Meeting: $114'$
Property Identification:
Address: 1701 RTE 9 (SKETCHETS PLAZA) NORTH END
Zoning District: VC VILLAGE COMMERCIAL Existing site area:
Owner Information:
Name: 93 NYRPT LLC AKA BENDERSON DEVEROPMENT
Address: 7978 COOPER CREAK BLUD SUITE 100
City: UNIVERSITY PARK State: TEA Zip: 34201
Contact Numbers: (H) MIKE MUNDY (C)
(E-mail) MICHAEL MUNDY @ BENDERSON. COM
Applicant Information:
(Please provide if someone other than the property owner is the applicant)
Name: JOHN CHICKERY
Address: 105 SLEIGHT PLASS AD
City: POUGHKeepsie State: N/ Zip: 12603
Contact Numbers: (H) W 845 471 7910 (C) 845. 222 1008
E-mail Address: JOHN @ THE WOWGUYS. COM
Lead Design Professional: (If applicable)
(Indicate the primary design professional associated with this application)
Name: MIKE MC COPMACK
Title: ARCHITECT
Company: LISCUN MCCOLMACK VAN VOOHRUS
Company: LISCUN MICLORMAC VAP WORKS Address: 181 CHURCH ST Pok 12601
Telephone #: 4522268
E-mail Address: MNCORMACK @ LMV ARCHITECTS. COM



### APPLICATION FOR PLANNING BOARD REVIEW (Continued)

## **Proposed Site:**

(Property where improvements are proposed)

Existing Use(s): VACANT
Proposed square footage:16,476
<b>Project Description :</b> (Please print or type)
(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.) NEW HVAC SYSTEM 3 BATHNOOMS (IHC) NEW Lighting (LED)
CONCLETE DECK REPART/RETNETORING PAINTING SHEETROCK I DIVIDING WALL/ICONFROM / I OFFICE VINYL FLOOFING IN SHOWROOM
ELECTPIC OUTIERS, DATA AS NOUDER
Items to be submitted for review: (Only items pertaining to project)         5       Ten (10) sets of plans.
□ Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)

Z Consent Form

□ Application for proposed sign

 $\Box$  Application Fee

 $\Box$  Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.

Signature of Applicant Signed		10/15/24 Date
Office us	se only:	
[ ] FEE : Receipt No. :	Cash / Check #	Date:
Revised by :	Revision date :	
Zoning Administrator/Code Enforcement Officer		



Office of Building, Planning & Zoning 2582 South Avenue Wappingers Falls, NY 12590 Phone: (845) 297-5277 Fax: (845) 296-0379 E-mail: bmurphy@wappingersfallsny.gov www.wappingersfallsny.gov

## **CONSENT FORM**

Name of property owner: <u>93 NYRPT AKA BENDERSCH DEU CORP</u>
Address of property owner: 7978 COCREF CREEK BLUD SUITE #100
City: UNIVERSITY PARK State: TZ Zip: 34201
Phone number of property owner: (Include home, work, mobile number and e-mail address):
(H) (C)
(W) 716 878 9626 (Email) JMB (BENDERSON COM
(H) (C) (W) 716 878 9626 (Email) JMB & BENDERSON COM Address of site where work is being conducted: 1701 RE9 WAPPINGET TRUC H
Description of work: DCCUPY WCATICA FOR THE PURPOSE OF CONDUCTING RETAIL OFFICE FURNICURE SAIGS.
Name of person doing work: JOHN CHKKONY / DRA HV. OHE FURNITURE IA Address of person doing work: 375 MAIN ST
City: POUGHKEEPSTE State: N/ Zip: 12601
Phone number of person doing work (Include home, work, mobile numbers and e-mail address):
(H) $4540512$ (C) $222 \text{ KOE}$
(W) 471 7910 (Email) JOHN @ THE WOWGUSS. COM

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

James A. Boglioli

Signature of Property Owner

#### 617.20 AppendixB Short Environmental Assessment Form

#### **Instructions for Completing**

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

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

Part 1 - Project and Sponsor Information				
Name of Action or Project: HUDSON VAILEY Office FURNITUR	E FIT UP			
Project Location (describe, and attach a location map):				
1701 RTE 9 WAPPINGET FALLS (NORTH END OF	SKETCHEVS PLAT	24)		
Brief Description of Proposed Action:	AL ALGIE TO	PNITURE	Stor	E.
FIT UP OF VACANT POLTION OF PLAZA FOIL N	ENTE OTTOE TO		0.	
Brief Description of Proposed Action: FIT UP OF VACANT POLTON OF PLAZA FOR RUNEW HUAC SYSTEM NEW LED LIGHTING	WAUS ELC	arric		
FLOUNNE				
Name of Applicant or Sponsor:	Telephone: 845	-471-7	1910	
JOHN CHICKERY FOR H.V. OFFICE FURNFURE	E-Mail: JOHN @ 7			Com
Address:				
City/PO: POUGAKEEPSIE NY	State:		Code:	
1. Does the proposed action only involve the legislative adoption of a plan, l	local law, ordinance,		NO	YES
administrative rule, or regulation?				
If Yes, attach a narrative description of the intent of the proposed action and that may be affected in the municipality and proceed to Part 2. If no, contin		sources	X	
2. Does the proposed action require a permit, approval or funding from any of	other governmental A	gency?	NO	YES
If Yes, list agency(s) name and permit or approval:			X	
3.a. Total acreage of the site of the proposed action?	acres			
b. Total acreage to be physically disturbed?	<u> </u>			
.c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?	6 acres			
	uores			
4. Check all land uses that occur on, adjoining and near the proposed action	I	$\frown$		
Urban Rural (non-agriculture) Industrial	Commercial	Residentia	(suburl	oan)
Forest Agriculture Parkland Aquatic	Other (specify):			-

5. Is the proposed action,	NO	YES	
a. A permitted use under the zoning regulations?		V	_
b. Consistent with the adopted comprehensive plan?		V	
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		NO	)
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environment If Yes, identify:	al Area?	NO	Ŋ
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	\ 
b. Are public transportation service(s) available at or near the site of the proposed action?			L
c. Are any pedestrian accommodations or bicycle routes available on or near site of the propose	daction?		
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies:		NO	Y
10. Will the proposed action connect to an existing public/private water supply?		NO	Y
If No, describe method for providing potable water:			ι
11. Will the proposed action connect to existing wastewater utilities?		NO	Y
If No, describe method for providing wastewater treatment:			Ì
12. a. Does the site contain a structure that is listed on either the State or National Register of Histo Places?	ric	NO	Y
b. Is the proposed action located in an archeological sensitive area?		V	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, c wetlands or other waterbodies regulated by a federal, state or local agency?	ontain	NO	Y
		NO	Y
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterb If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:	ody?	V	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. C Shoreline Forest Agricultural/grassland Early mid-successional Wetland	heck all tha	it apply:	2
15. Does the site of the proposed action contain any species of animal, or associated habitats, lister State or Federal government as threatened or endangered?	i by the	NO	Y
16. Is the project site located in the 100 year flood plain?		NO	Y
17. Will the proposed action create storm water discharge, either from point or non-point sources?		NO	X
If Yes, a. Will storm water discharges flow to adjacent properties?		V	
b. Will storm water discharges be directed to established conveyance systems off and storm drains)? If Yes, briefly describe:			

NO YES 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: 19. Has the site of the proposed action or an adjoining property been the location of an active or closed NO YES solid waste management facility? If Yes, describe: YES 20. Has the site of the proposed action or an adjoining property been the subject ofremediation (ongoing or NO completed) for hazardous waste? If Yes, describe: I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE JOHN M. CHICKERY 10/18/21 Date: Applicant/sponsorpame: Signature:

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

	No,or small impact may occur	Moderate to large impact may occur
1 Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	V	
2. Will the proposed action result in a change in the use or intensity of use ofland?	~	
3. Will the proposed action impair the character or quality of the existing community?	~	
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	1	
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?		
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?	1	
<ol> <li>Will the proposed action impact existing:         <ul> <li>a. public / private water supplies?</li> </ul> </li> </ol>	V	
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	1	-
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

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

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

□ 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.				
HV office FULL	014/2/			
Name of Lead Agency	Date			
JOHN CHICKERY	UP			
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)			

#### PART "A" OWNER AFFIDAVIT

State of Na_ Yuch	}	
County of Ence	} ss: }	•
James A. Ball		_ being duly sworn, deposes and says

- 1. That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
- 2. That I/we hereby authorize <u>JOHN CHICKER</u>, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
- 3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
- 4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
- 5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

*blicant/Owner* 

Applicant/Owner

Sworn to before me this \_\_\_\_\_\_ day of

COURTNEY L. ADAMO Notary Public-State of New York No. 01AD6413282 Qualified In Niagara County 2020 Commission Expires January 25, 2020

#### PART "B" APPLICANT / AGENT AFFIDAVIT

Sta Coi	te of NEW for P } ss:
	JOHN CHICKENY being duly sworn, deposes and says:
1.	That I/we are the
	Planning Board for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and
	that the statements contained therein are true to the best of my/our knowledge and belief.
2.	That he/she resides at or conducts business at <u>375 MATNST</u> POUGAKcencie in the
	County of Durchets and the State of New York.

- 3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
- 4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
- 5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

Applicant/Agen

Applicant/Agent

Sworn to before me this

Notary Public

ANIQUE MORRISON Notary Public, State of New York No. 01MO06171286 Qualified in Ulster County Commission Expires July 23, 20-23

