SOIL EROSION AND SEDIMENT CONTROL PERMIT APPLICATION

(Standards Approved by Town: NY Guidelines for Urban Erosion and Sedimentation Control)

ON-SITE INSPECTION REQUIRED PRIOR TO THE ISSUANCE OF A BUILDING PERMIT

Date		ning District		
Prop	perty Owner Name and Address: <u>Cautlin Schwartz</u>			
- · ·	6528 Fox Rd, Marcy	NY	13403	
Tele	phone / Fax # 585-500-1782 E-mail address:	1 1 Schwa	rtz: i:	55@ <u>a5q</u> n
Site	Location: 5287 Irish Settlement		0 0	
	of Site (Acres/ Sq.Ft.): 3.005 Ac Tax Map Number 15	í3.00 - I	1-88.5	13
	cription of proposed activity: <u>new single family p</u>			
•	Chapter 165 §165-10-B, at a minimum, the map, plan or sketch prepared shall include the following:	Shown on Plan Yes / No	Initial Review	Follow Up Review
	Boundaries of the subject parcel and other parcels adjacent to the site which may be materially affected by the action.	/		
	Existing features including structures, roads, water courses, utility lines, etc. on the subject parcel and on adjacent parcels where appropriate.	✓		
	Existing vegetative cover including wooded areas, grass, brush, or other on the subject parcel and on adjacent properties where appropriate.	/		
	Limits or extent of excavation, filling, and/or grading proposed to be undertaken.	/	,	
	The disposition of soil and top soil, whether on site or off site, and the locations of any stockpiles to be placed on site.	/		
1	Temporary and permanent drainage, erosion and sedimentation control facilities including ponds, sediment basins, swales, energy dissipation devices, silt fences and/or straw bale locations.	V		
	The location of proposed roads, driveways, sidewalks, structures, utilities and other improvements.	✓		
	Final contours of the site in intervals adequate to depict slopes and drainage			

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Per Chapter 165 §165-10-B, at a minimum, the map, plan or sketch prepared shall include the following:			Shown on Plan Yes / No	Initial Review		Follow Up Review
10	icating:				T	
b	ases of the proposed project are to be initiated and					
it	e preparation activities are to be initiated and completed;		✓	•		
	lation of temporary and permanent vegetation and n and sediment control facilities is to be completed; and		,			
	duration (in days) of exposure of all major areas of site are the installation of erosion and sediment control	\ \	•			
u	ired to be Provided:		hown on Plan Yes / No	Initial Review]	Follow Up Review
1	topography and slope of the subject property (in %):		, 			
	equare feet) and/or volume (in cubic yards) will be $\frac{23,900}{5}$		•			
·C	perty drain offsite? Yes (No)					
a	n to and how will it affect offsite properties?					
	controlled on site to protect catch basins from silt?					
	escribe: none proposed					
	rainage to subject property? Yes No					

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Other Information Required to be Provided:	Shown on Plan Yes / No	Initial Review	Follow Up Review
16. How will off site water courses be protected? Silt fencing			
	/		
17. How will any adjacent roadside ditches or culverts be protected during construction?			
18. Has the appropriate highway superintendent been contacted? Yes No Name of the person contacted and date contacted: James Fletcher			
20. Is existing vegetation proposed to be removed? Yes No (If yes, the vegetation to be removed must be identified on the plan.)			
21. Will any temporary seeding be used to cover disturbed areas? Yes No If yes, a note shall be added to the plans.			
22. What plans are there for permanent revegetation? Describe: Re-sudung of Lawn area			
23. How long will project take to complete? 6-8 mo			
24. What is the cost estimate to install and maintain erosion and sedimentation control facilities before, during, and after construction?			

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Form prepared by: Rocco Veneria 15 Date: 10	0/6/21
The undersigned represents and agrees as a condition to the issuance of these permits that be accomplished in accordance with the Town Soil Erosion and Sedimentation Control L State Uniform Fire Prevention and Building Code, and the plans and specifications annex	aw, the New York
PERMIT APPLICATION CANNOT BE ACCEPTED WITHOUT PROPERTY OWN	NER'S SIGNATURE.
Please <u>DO NOT</u> send payment with this application.	
Owner's Signature: *************** ********* ********	/2\ **** Yes No
Zoning Officer	Date
Flood Zone	
Floodplain Development Permit Required?	Yes No

Date

Permit #: _____

Code Enforcement Officer

Permit Fee: \$_____