**CHECKLIST FOR SHAWANGUNK PLANNING BOARD APPLICATIONS**

**Proposed Action:**

**Zoning Classification:**

**I. Proposed Planning Board Actions:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Action** | **Check, if Applicable** | **First Submission Date** | **Application Deemed Complete (date)** |
| Site Plan |  |  |  |
| Special Use Permit |  |  |  |
| Subdivision (Type) |  | |  |
| Cluster Subdivision |  |  |  |
| Conservation Density |  |  |  |
| Preliminary |  |  |  |
| Final |  |  |  |
| **Approval Date** |  | | |

**II. Public Hearing:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Public Hearing** | **Is it Required?** | **Hold Public Hearing**  **(yes, no)** | **Hearing Date – Open** | **Hearing Date - Close** |
| Site Plan | *Optional* |  |  |  |
| Special Use Permit | *Required* | |  |  |
| Subdivision |  | | | |
| Preliminary | *Required* | |  |  |
| Final | *Optional* |  |  |  |

**III. State Environmental Quality Review Act:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SEQRA Steps** | **Circle Applicable Items** | | | | **Date:** |
| **Classify Action** | Exempt (Type II) | | Unlisted | Type I |  |
|  | | | | | |
| Declare Intent to be Lead Agency | | | *Coordinated Review* | *Coordinated Review Required* |  |
| EAF to be Reviewed | | | *Short Form, Part 1* | *Long Form, Part 1* |  |
| PB Analysis | | | *Short Form, Part 2* | *Short Form, Part 2* |  |
| Part 3 Required | | | *Optional* | *Optional* |  |
| Issue Negative Declaration (including conditional) | | | *Yes or No* | *Yes or No* |  |
| Circulate to ENB; Involved Agencies | | | *Not Required* | *Required* |  |
|  | | | | | |
| Positive Declaration | |  | | |  |
| Scoping Session | | *Optional* | | |  |
| DEIS Submitted | |  | | |  |
| DEIS Deemed Complete | |  | | |  |
| DEIS Hearing | | *Optional* | | |  |
| FEIS Submitted | |  | | |  |
| FEIS Deemed Complete | |  | | |  |
| Findings Statement Complete | |  | | |  |

**V. Other Approvals:**

|  |  |  |
| --- | --- | --- |
| **Other Referrals or Approvals** | **Required (check)** | **Received Response (Date)** |
| Shawangunk ZBA |  |  |
| Shawangunk Town Board |  |  |
| Shawangunk Highway Department |  |  |
| Shawangunk EMC |  |  |
| Fire District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Shawangunk Building Inspector (Field Rpt) |  |  |
| School District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Ulster County DPW |  |  |
| Ulster County PB GML Review |  |  |
| Ulster County Health Department |  |  |
| NYSDEC |  |  |
| NYSOPRHP |  |  |
| NYSDOT |  |  |
| Other: US ACOE |  |  |
| Other: |  |  |
| Other: |  |  |

**VI. Additional Substantive Information to be Submitted by Applicant:**

|  |  |  |
| --- | --- | --- |
| **Other** | **Required (check)** | **Received from Applicant (Date)** |
| Narrative for Proposed Action |  |  |
| Agricultural Data Statement |  |  |
| Recreational River (NYSDEC ) |  |  |
| Shawangunk Mtn. Scenic Byway  (visual assessment) |  |  |
| CEA |  |  |
| Wetland Delineation |  |  |
| Ecological Survey |  |  |
| Traffic Study |  |  |
| Sewer Evaluation |  |  |
| Water Evaluation |  |  |
| SWPPP |  |  |
| Noise Level Evaluation |  |  |
| Light Level Evaluation |  |  |
| Other: |  |  |
| Other: |  |  |
| Other: |  |  |