

Town of Hammond

❖COUNTY AND TOWN FEES MUST BE PAID SEPARATELY WITH A CHECK OR MONEY ORDER

- **COUNTY FEES on the next page are in addition to the following Town applications/fees.**

Hammond Planning Board- Fees effective February 14, 2024

Site Plan Review- \$50.00

Lot Line Adjustment- \$50.00

Special Use- \$100.00 (site plan review included)

Subdivision Review- \$50.00

Subdivision of 3 plus lots- \$100.00

Special meeting called by applicant- \$100.00

Hammond Board of Appeals- Fees effective February 14, 2024

Variance Application- \$100.00 plus certified mail postage

County Planning Board Referral and Training Session
Fee Schedule Information – Effective January 1, 2023

As of January 1, 2023 the County Planning Office will begin charging applicants of 239m and 239n reviews as follows:

Residential:

\$25 for all area variances, site plan reviews and subdivisions of less than 5 lots.

\$75 for all special use permits, use variances and subdivisions of 5-9 lots.

\$150 for subdivisions of 10 lots or more.

Commercial (including institutional and industrial):

\$25 for all sign permits.

\$75 for all area variances, use variances, site plans and special use permits for projects less than 5,000 gross square feet; and subdivisions of less than 5 lots.

\$150 for all area variances, use variances, site plans, and special use permits for projects between 5,000 and 9,999 gross square feet; and subdivisions of 5 or more lots.

\$150 plus \$50 per each additional 5,000 square feet for all area variances, use variances, site plans, and special use permits for projects over 10,000 gross square feet. (Example: the cost of a permit for a 50,000 sq ft building would be $\$150 + (\$50 \times 8) = \$550$.)

\$150 plus \$50 per megawatt (AC) for all solar energy systems.

Local government applications (comprehensive plan reviews, subdivisions, map & text amendments, etc.) are exempt.

Procedure:

Before the County Planning Office/Board can review a project the review fee must be attached. The applicant must provide the municipality with the fee so that it may be included with the referral to the County Planning Board. **Checks should be made payable to the St. Lawrence County Planning Office.**

County Sponsored Training Sessions:

The County Planning Office has traditionally held four 2-hour training sessions each year. There is a fee of **\$25 per training session, per individual.**

Please feel free to contact the County Planning Office with any questions.

LETTER OF AUTHORIZATION

Let it be known that _____ has been retained to act as agent to perform all acts for development on my property identified below.

Please Check One of the Following:

_____ Minor Subdivision _____ Major Subdivision _____ Lot Line Adjustment
_____ Site Plan _____ Site Plan Modification _____ Special Use Permit _____ Variance Application

These acts include: (please initial the acts you are authorizing)

_____ Pre-application conferences with Town staff, filing applications and/or other required documents relative to all Planning Board / Board of Appeals applications

_____ Main point of contact for Town staff

_____ Agent will be contacted on all matter instead of the owner

_____ Attend all Planning Board / Board of Appeals meetings on my behalf

Tax Parcel: _____

Address: _____

PROPERTY OWNER(s):

Signature: _____ Date: _____

Signature: _____ Date: _____

Printed Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

AGENT:

Signature: _____ Date: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

APPLICATION FOR SUBDIVISION PLAT REVIEW

-- to be completed before Planning Board Meeting--

DATE:_____

PROPERTY OWNER NAME:_____

MAILING ADDRESS:_____

TELEPHONE: (____)_____

LOCATION OF PROPERTY (ROAD NAME AND ESTIMATED DISTANCE FROM NEAREST INTERSECTION):

_____ **PARCEL TAX MAP**

NUMBER - SECTION_____ BLOCK_____ LOT_____

TOTAL AREA OF PARENT PARCEL(ACRES):_____

DESCRIBE THE NUMBER OF LOTS, ACREAGE, AND PURPOSE OF THE PROPOSED SUBDIVISION:

_____ **LIST THE USES ON SURROUNDING**
PROPERTIES:

_____ **LIST ATTACHMENTS TO THIS**
APPLICATION (SEE §9 OF THE REGULATIONS)

SIGNATURE:_____

PRINT NAME:_____

Appendix B

Short Environmental Assessment Form

-- to be completed before Planning Board Meeting—

Instructions for CompletingFor completing online go to <https://gisservices.dec.ny.gov/eafmapper/>

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?			NO
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.			YES
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
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____			
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.			
<div style="display: flex; justify-content: space-between;"> 0 Urban 0 Rural (non-agriculture) 0 Industrial 0 Commercial 0 Residential (suburban) </div> <div style="display: flex; justify-content: space-between;"> 0 Forest 0 Agriculture 0 Aquatic 0 Other (specify): _____ </div>			

5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
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 Area? If Yes, identify:	NO	YES	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? 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 action?	NO	YES	
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? [If Yes, does the existing system have capacity to provide service? 0 NO 0 YES]	NO	YES	
11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? 0 NO 0 YES]	NO	YES	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	NO	YES	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? 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:	NO	YES	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline	<input type="checkbox"/> Forest	<input type="checkbox"/> Agricultural/grasslands
<input type="checkbox"/> Early mid-successional		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	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? <input type="checkbox"/> NO <input type="checkbox"/> YES		
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? <input type="checkbox"/> NO <input type="checkbox"/> YES		
If Yes, briefly describe:		

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:	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor name:	Date:
Signature:	Print Name:

Agricultural Data Statement

Circle: TOWN VILLAGE CITY OF : _____ Date _____

Instructions: To be completed when requesting a special use permit, site plan approval, use variance or a subdivision approval for a parcel within 500 feet of a farm operation located in a State-certified Agricultural District. Online property information is available at: _____
 . A copy of this Agricultural Data Statement must be included with the referral to the County Planning Board.

Applicant	Property Owner (if different from applicant)
Name: _____	Name: _____
Address: _____	Address: _____

1. Project Address: _____
 Tax Map Number (Parcel ID): _____

2. Type of Application: (check one or more)
☐ Special Use Permit; ☐ Site Plan Approval; ☐ Use Variance ☐ Subdivision Approval

3. Project Description: _____

4. Is this parcel in an Agricultural District? ☐ No ☐ Yes Agricultural District Number _____

5. Is this parcel farmland or part of a farm? ☐ No ☐ Yes

6. Are prime soils present? ☐ Prime ☐ Prime if Drained ☐ Soil of Statewide Importance

7. Does the parcel receive an agricultural exemption? ☐ No ☐ Yes

8. How many acres are tillable? _____

9. Is the parcel tile drained? ☐ No ☐ Yes

10. All farms within 500 feet of project location (attach additional sheets if necessary):

Name: _____	Name: _____
Address: _____	Address: _____
Farmed? <input type="checkbox"/> No <input type="checkbox"/> Yes	Farmed? <input type="checkbox"/> No <input type="checkbox"/> Yes

Name: _____	Name: _____
Address: _____	Address: _____
Farmed? <input type="checkbox"/> No <input type="checkbox"/> Yes	Farmed? <input type="checkbox"/> No <input type="checkbox"/> Yes

 Form Prepared By

 Applicant Signature

Reviewed by: _____
 Signature of Municipal Official

 Date