

TOWN OF LYSANDER
PLANNING BOARD MEETING
8220 Loop Road
Thursday, October 12, 2023 @ 7:00 p.m.

I. PUBLIC HEARING -- None Scheduled

II. APPROVAL OF MINUTES

Review and approval of the minutes of the August 14, 2023 and September 11, 2023 regular Planning Board meetings.

III. OLD BUSINESS

- | | |
|---|---|
| 1. Site Plan—Radisson
Case No. 2023--009 | Shanahan, Robert/Greentree Capital
Longview @ Radisson
River Road |
|---|---|

IV. NEW BUSINESS

- | | |
|---|--|
| 1. Minor Subdivision
Case No. 2023-010 | Pandori, Peter and Andrea
NYS Route 370/West Genesee Road |
| 2. Minor Subdivision
Case No. 2023—008 | Ravas, Richard & Christine
8719 Smokey Hollow Road |

V. ADJOURN

The next regular Town of Lysander Planning Board meeting is scheduled for Thursday, November 9, 2023 at 7:00 p.m.

[illegible]

SHEET NO.:
 PROJECT NO.: 20230116
 FILE NAME: C201
 SCALE: 1" = 40'
 DATE: Sept. 2023
 ENG'D BY: JFC
 DRAWN BY: JAL
 CHECKED BY: JFC

LONGVIEW APARTMENTS
GREENTREE REALTY GROUP
TOWN OF LYSANDER, ONONDAGA COUNTY, NEW YORK

PLUMLEY ENGINEERING
822 LOOP ROAD
BALDWINVILLE, NY 13027
TELEPHONE: (515) 458-8567
FAX: (515) 458-9740
WWW.PLUMLEYENG.COM

Civil and Environmental Engineering

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

Name of Action or Project: Town of Lysander Planning Board - Longview Apartments Site Plan Approval		
Project Location (describe, and attach a general location map): 8850 River Road, Baldwinsville NY, in Radisson Community at southeast corner of River Road and Longview Terrace; Tax Map # 082-04-10.0		
Brief Description of Proposed Action (include purpose or need): Construction of 17 3-story apartment buildings with associated parking lots & drive lanes. Each building to contain 10 2 bedroom apartments. Each building to be served with public utilities. Site grading to be completed and a stormwater management system constructed. A public road with right-of-way will be constructed to serve the apartment complex.		
Name of Applicant/Sponsor: Greentree Realty Capital, LLC; Attn: Robert Shanahan		Telephone: (315) 569-0739
		E-Mail: rshanahan@gmail.com
Address: 8321 Decoy Run		
City/PO: Manlius	State: New York	Zip Code: 3104
Project Contact (if not same as sponsor; give name and title/role):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)		
Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	Site Plan Approval	Oct. 2023
c. City, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	County DOT - R.O.W. Work Permit County DOT - Public Sewer & Water System	Nov. 2023 Nov. 2023
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources. i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No iii. Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

C. Planning and Zoning

C.1. Planning and zoning actions.	
Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No • If Yes, complete sections C, F and G. • If No, proceed to question C.2 and complete all remaining sections and questions in Part 1	
C.2. Adopted land use plans.	
a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, identify the plan(s): _____ _____ _____	
c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, identify the plan(s): _____ _____ _____	

C.3. Zoning	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? <u>Radisson PUD</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the use permitted or allowed by a special or conditional use permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. Is a zoning change requested as part of the proposed action? If Yes, i. What is the proposed new zoning for the site? _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C.4. Existing community services.	
a. In what school district is the project site located? <u>Baldwinsville Central School District</u>	
b. What police or other public protection forces serve the project site? <u>Onondaga County Sheriff and NYS State Troopers</u>	
c. Which fire protection and emergency medical services serve the project site? <u>Belgium Cold Springs Fire Department</u>	
d. What parks serve the project site? <u>Public parks within Radisson Community</u>	

D. Project Details

D.1. Proposed and Potential Development	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? <u>Multifamily Residential</u>	
b. a. Total acreage of the site of the proposed action?	<u>±19.2</u> acres
b. Total acreage to be physically disturbed?	<u>±16</u> acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?	<u>±19.2</u> acres
c. Is the proposed action an expansion of an existing project or use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____	
d. Is the proposed action a subdivision, or does it include a subdivision? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) _____	
ii. Is a cluster/conservation layout proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
iii. Number of lots proposed? _____	
iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____	
e. Will the proposed action be constructed in multiple phases? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
i. If No, anticipated period of construction: <u>36</u> months	
ii. If Yes:	
• Total number of phases anticipated	_____
• Anticipated commencement date of phase 1 (including demolition)	_____ month _____ year
• Anticipated completion date of final phase	_____ month _____ year
• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____ _____ _____	

f. Does the project include new residential uses? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, show numbers of units proposed.				
	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	17
At completion of all phases	_____	_____	_____	17

g. Does the proposed action include new non-residential construction (including expansions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes,	
i. Total number of structures _____ ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length iii. Approximate extent of building space to be heated or cooled: _____ square feet	

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes,	
i. Purpose of the impoundment: <u>Stormwater Managment</u> ii. If a water impoundment, the principal source of the water: <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input checked="" type="checkbox"/> Other specify: <u>Stormwater Run-off</u> iii. If other than water, identify the type of impounded/contained liquids and their source. _____ iv. Approximate size of the proposed impoundment. Volume: <u>TBD</u> million gallons; surface area: <u>TBD</u> acres v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): <u>Excavation and fill placement</u>	

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite) If Yes:	
i. What is the purpose of the excavation or dredging? _____ ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site? • Volume (specify tons or cubic yards): _____ • Over what duration of time? _____ iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____ _____ iv. Will there be onsite dewatering or processing of excavated materials? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe. _____ _____ v. What is the total area to be dredged or excavated? _____ acres vi. What is the maximum area to be worked at any one time? _____ acres vii. What would be the maximum depth of excavation or dredging? _____ feet viii. Will the excavation require blasting? <input type="checkbox"/> Yes <input type="checkbox"/> No ix. Summarize site reclamation goals and plan: _____ _____ _____	

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes:	
i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): <u>Federal Wetland. Permit for disturbance has been obtained.</u> _____ _____	

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:
Placement of fill

iii. Will the proposed action cause or result in disturbance to bottom sediments? ☐ Yes ☒ No
 If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? ☐ Yes ☒ No
 If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____
 Per permit, reclamation not required based on limited disturbance area.

c. Will the proposed action use, or create a new demand for water? ☒ Yes ☐ No
 If Yes: 170 two bedroom apt. @ 110 gpd per bedroom

i. Total anticipated water usage/demand per day: ±37,400 gallons/day

ii. Will the proposed action obtain water from an existing public water supply? ☒ Yes ☐ No
 If Yes:

- Name of district or service area: Onondaga County Water Authority
- Does the existing public water supply have capacity to serve the proposal? ☒ Yes ☐ No
- Is the project site in the existing district? ☒ Yes ☐ No
- Is expansion of the district needed? ☐ Yes ☒ No
- Do existing lines serve the project site? ☒ Yes ☐ No

iii. Will line extension within an existing district be necessary to supply the project? ☒ Yes ☐ No
 If Yes:

- Describe extensions or capacity expansions proposed to serve this project: Extend 8" water main thru development to serve apartments.
- Source(s) of supply for the district: Onondaga Co. Water Authority

iv. Is a new water supply district or service area proposed to be formed to serve the project site? ☐ Yes ☒ No
 If, Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? ☒ Yes ☐ No
 If Yes:

i. Total anticipated liquid waste generation per day: ±37,400 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): Sanitary Wastewater

iii. Will the proposed action use any existing public wastewater treatment facilities? ☒ Yes ☐ No
 If Yes:

- Name of wastewater treatment plant to be used: Baldwinsville Seneca Knolls Wastewater Treatment Plant
- Name of district: Radisson Sewer District
- Does the existing wastewater treatment plant have capacity to serve the project? ☒ Yes ☐ No
- Is the project site in the existing district? ☒ Yes ☐ No
- Is expansion of the district needed? ☐ Yes ☒ No

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<p>h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate methane generation in tons/year (metric): _____</p> <p>ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____</p>			
<p>i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____</p>			
<p>j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="text-align: right;">Refer to 'Traffic Study'</p> <p>If Yes:</p> <p>i. When is the peak traffic expected (Check all that apply): <input type="checkbox"/> Morning <input type="checkbox"/> Evening <input type="checkbox"/> Weekend <input type="checkbox"/> Randomly between hours of _____ to _____.</p> <p>ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____</p> <p>iii. Parking spaces: Existing <u>0</u> Proposed _____ Net increase/decrease _____</p> <p>iv. Does the proposed action include any shared use parking? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____</p> <p>vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate annual electricity demand during operation of the proposed action: _____ <u>204,000 kWh based on 1,200 kWh per month for a two bedroom apartment.</u></p> <p>ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): <u>National Grid Electric Company</u></p> <p>iii. Will the proposed action require a new, or an upgrade, to an existing substation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>l. Hours of operation. Answer all items which apply.</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>7 a.m. to 5 p.m.</u> • Saturday: <u>8 a.m. to 4 p.m.</u> • Sunday: <u>N/A</u> • Holidays: <u>N/A</u> </td> <td style="width: 50%; vertical-align: top;"> <p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>All Day - residential facility</u> • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> </tr> </table>		<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>7 a.m. to 5 p.m.</u> • Saturday: <u>8 a.m. to 4 p.m.</u> • Sunday: <u>N/A</u> • Holidays: <u>N/A</u> 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>All Day - residential facility</u> • Saturday: _____ • Sunday: _____ • Holidays: _____
<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>7 a.m. to 5 p.m.</u> • Saturday: <u>8 a.m. to 4 p.m.</u> • Sunday: <u>N/A</u> • Holidays: <u>N/A</u> 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>All Day - residential facility</u> • Saturday: _____ • Sunday: _____ • Holidays: _____ 		

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p>	
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p>	
<p>n. Will the proposed action have outdoor lighting? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>Street lighting and parking lot lighting. _____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe: _____</p>	
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p>	
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p>	
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ 3 tons per _____ Week (unit of time) • Operation : _____ 6 tons per _____ Week (unit of time) 10 lbs per day per unit <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: <u>General recycling utilized by contractors</u> • Operation: <u>Recycling recommended by Onondaga County Resource Recovery Agency</u> <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • Construction: <u>C&D Disposal Facility</u> • Operation: <u>As controlled by Onondaga County Resource Recovery Agency</u> 	

s. Does the proposed action include construction or modification of a solid waste management facility? ☐ Yes ☒ No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____

ii. Anticipated rate of disposal/processing:

- _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
- _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? ☐ Yes ☒ No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? ☐ Yes ☐ No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site			
a. Existing land uses.			
i. Check all uses that occur on, adjoining and near the project site.			
<input type="checkbox"/> Urban	<input type="checkbox"/> Industrial	<input type="checkbox"/> Commercial	<input checked="" type="checkbox"/> Residential (suburban)
<input type="checkbox"/> Forest	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Aquatic	<input type="checkbox"/> Rural (non-farm)
ii. If mix of uses, generally describe: _____			
b. Land uses and covertypes on the project site. Project Area: ±19.2 ac			
Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0	6.2	+6.2
• Forested	14.2	3.1	-11.1
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	1	1	-1
• Agricultural (includes active orchards, field, greenhouse etc.)	0	0	0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	4	3.9	-0.1
• Non-vegetated (bare rock, earth or fill)	0	0	0
• Other Describe: Lawn Areas	0	6	+6

c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, i. Identify Facilities: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e. Does the project site contain an existing dam? If Yes: i. Dimensions of the dam and impoundment: • Dam height: _____ feet • Dam length: _____ feet • Surface area: _____ acres • Volume impounded: _____ gallons OR acre-feet ii. Dam's existing hazard classification: _____ iii. Provide date and summarize results of last inspection: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? If Yes: i. Has the facility been formally closed? • If yes, cite sources/documentation: _____ ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: <input type="checkbox"/> Yes – Spills Incidents database Provide DEC ID number(s): _____ <input type="checkbox"/> Yes – Environmental Site Remediation database Provide DEC ID number(s): _____ <input type="checkbox"/> Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? If yes, provide DEC ID number(s): _____ iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

v. Is the project site subject to an institutional control limiting property uses? <input type="checkbox"/> Yes <input type="checkbox"/> No							
<ul style="list-style-type: none"> • If yes, DEC site ID number: _____ • Describe the type of institutional control (e.g., deed restriction or easement): _____ • Describe any use limitations: _____ • Describe any engineering controls: _____ • Will the project affect the institutional or engineering controls in place? <input type="checkbox"/> Yes <input type="checkbox"/> No • Explain: _____ 							
E.2. Natural Resources On or Near Project Site							
a. What is the average depth to bedrock on the project site? _____ >10 feet							
b. Are there bedrock outcroppings on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %							
c. Predominant soil type(s) present on project site:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Williamson Silt Loam</td> <td style="width: 30%; text-align: right;">40.6 %</td> </tr> <tr> <td>Wayland Soils</td> <td style="text-align: right;">23.1 %</td> </tr> <tr> <td>Williams Silt Loam, rolling</td> <td style="text-align: right;">19.4 %</td> </tr> </table>	Williamson Silt Loam	40.6 %	Wayland Soils	23.1 %	Williams Silt Loam, rolling	19.4 %
Williamson Silt Loam	40.6 %						
Wayland Soils	23.1 %						
Williams Silt Loam, rolling	19.4 %						
d. What is the average depth to the water table on the project site? Average: _____ ±5 feet							
e. Drainage status of project site soils: <input type="checkbox"/> Well Drained: _____ % of site							
<input type="checkbox"/> Moderately Well Drained: _____ 40 % of site							
<input type="checkbox"/> Poorly Drained _____ 60 % of site							
f. Approximate proportion of proposed action site with slopes: <input checked="" type="checkbox"/> 0-10%: _____ 65 % of site							
<input checked="" type="checkbox"/> 10-15%: _____ 25 % of site							
<input checked="" type="checkbox"/> 15% or greater: _____ 10 % of site							
g. Are there any unique geologic features on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
If Yes, describe: _____							
h. Surface water features.							
i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
ii. Do any wetlands or other waterbodies adjoin the project site? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
If Yes to either i or ii, continue. If No, skip to E.2.i.							
iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? <input type="checkbox"/> Yes <input type="checkbox"/> No							
iv. For each identified regulated wetland and waterbody on the project site, provide the following information:							
• Streams:	Name <u>Seneca River</u> Classification _____						
• Lakes or Ponds:	Name _____ Classification _____						
• Wetlands:	Name <u>Federal Wetlands</u> Approximate Size <u>4 ac.</u>						
• Wetland No. (if regulated by DEC)	_____						
v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
If yes, name of impaired water body/bodies and basis for listing as impaired: _____							
i. Is the project site in a designated Floodway? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
j. Is the project site in the 100-year Floodplain? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
k. Is the project site in the 500-year Floodplain? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
If Yes:							
i. Name of aquifer: _____							

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">White-tailed Deer</td> <td style="width: 33%; border-bottom: 1px solid black;">Various Birds</td> <td style="width: 33%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Squirrels, Chipmunks</td> <td style="border-bottom: 1px solid black;">Raccoon, Opossum</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>		White-tailed Deer	Various Birds		Squirrels, Chipmunks	Raccoon, Opossum	
White-tailed Deer	Various Birds						
Squirrels, Chipmunks	Raccoon, Opossum						
<p>n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe the habitat/community (composition, function, and basis for designation): _____</p> <p style="margin-left: 20px;">ii. Source(s) of description or evaluation: _____</p> <p style="margin-left: 20px;">iii. Extent of community/habitat:</p> <ul style="list-style-type: none"> • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres 							
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing (endangered or threatened): _____</p> <p style="margin-left: 20px;">Lake Sturgeon, Bald Eagle</p>							
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing: _____</p>							
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, give a brief description of how the proposed action may affect that use: _____</p>							
<p>E.3. Designated Public Resources On or Near Project Site</p>							
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, provide county plus district name/number: _____</p>							
<p>b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="margin-left: 20px;">i. If Yes: acreage(s) on project site? _____</p> <p style="margin-left: 20px;">ii. Source(s) of soil rating(s): _____</p>							
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature</p> <p style="margin-left: 20px;">ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____</p>							
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. CEA name: _____</p> <p style="margin-left: 20px;">ii. Basis for designation: _____</p> <p style="margin-left: 20px;">iii. Designating agency and date: _____</p>							

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? If Yes: i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District ii. Name: <u>NYS Barge Canal Historic District</u> iii. Brief description of attributes on which listing is based: _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site? If Yes: See attached letter from SHPO i. Describe possible resource(s): _____ ii. Basis for identification: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? If Yes: i. Identify resource: _____ ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____ iii. Distance between project and resource: _____ miles.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation: _____ ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

F. Additional Information

Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Robert Shanahan Date Oct. 1, 2023

Signature Robert Shanahan Title Managing Member

PRINT FORM

Pandori
Application to the Planning Board

For: ☒ Subdivision of Land
☐ Number of Lots 3
☐ Controlled Site Use
☐ Site Plan Approval

Date: 9/29/2023
☐ Information Only
☐ Preliminary
☐ Final

Name of proposed development: 2185 W. Genesee Rd. Minor Subdivision

Applicant:

Name Peter & Andrea Pandori
Address 2220 Connell Terrace
Baldwinsville, NY 13027
Telephone: (315) 374-7505

Owner of record:

Name Peter & Andrea Pandori
Address 2220 Connell Terrace
Baldwinsville, NY 13027
Telephone: (315) 374-7505

Proof of ownership attached: _____

Site Location:

2185 W. Genesee Rd.
Baldwinsville, NY 13027

Proposed use (s) of site:

Residential Building Lots

Current use & condition of site:

Vacant Land

Plans prepared by:

Name Stephen Sehnert
Address 8 Canton St.
Baldwinsville, NY 13027
Telephone: (315) 635-5197

Ownership intentions:

Name _____

Address _____

Telephone: _____

Farm Lot No. _____

Tax Map No. _____

Current Zoning _____

Is site in an Agricultural Tax District? No

Area of land 3.48 acres.

Plans for sewer and water connections

Connect to existing public sewer.
Well water per lot.

Character of surrounding:

Wooded

SEE REVERSE SIDE FOR ADDITIONAL SUBMITTAL REQUIREMENTS!

Peter Pandori
Name of Owner or Representative

Andrea Pandori
Signature

PROJECT I.D. NUMBER

617.21

Appendix C

State Environmental Quality Review

SHORT ENVIRONMENTAL ASSESSMENT FORM

For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project sponsor)

1. APPLICANT /SPONSOR <u>Peter Pandori</u>	2. PROJECT NAME <u>2185 W. Genesee Rd. Minor Subdivision</u>
3. PROJECT LOCATION: Municipality <u>Town of Lysander</u> County <u>Onondaga</u>	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <u>2185 W. Genesee Rd. (NY Route 370)</u> <u>Baldwinsville, NY 13027</u>	
5. IS PROPOSED ACTION: <input checked="" type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: <u>Minor subdivision of 3.48 acres into (3) lots, approximately 1.16 acres each.</u>	
7. AMOUNT OF LAND AFFECTED: Initially <u>3.48</u> acres Ultimately <u>3.48</u> acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open space <input type="checkbox"/> Other Describe:	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list agency(s) and permit/approvals <u>NYS DOT (driveway cut permits)</u>	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list agency name and permit/approval	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor Name: <u>Peter Pandori</u>	Date: <u>9/29/2023</u>
Signature: <u>Peter Pandori</u>	

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

PART II - ENVIRONMENTAL ASSESSMENT (To be completed by Agency)

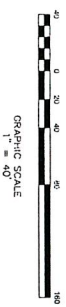
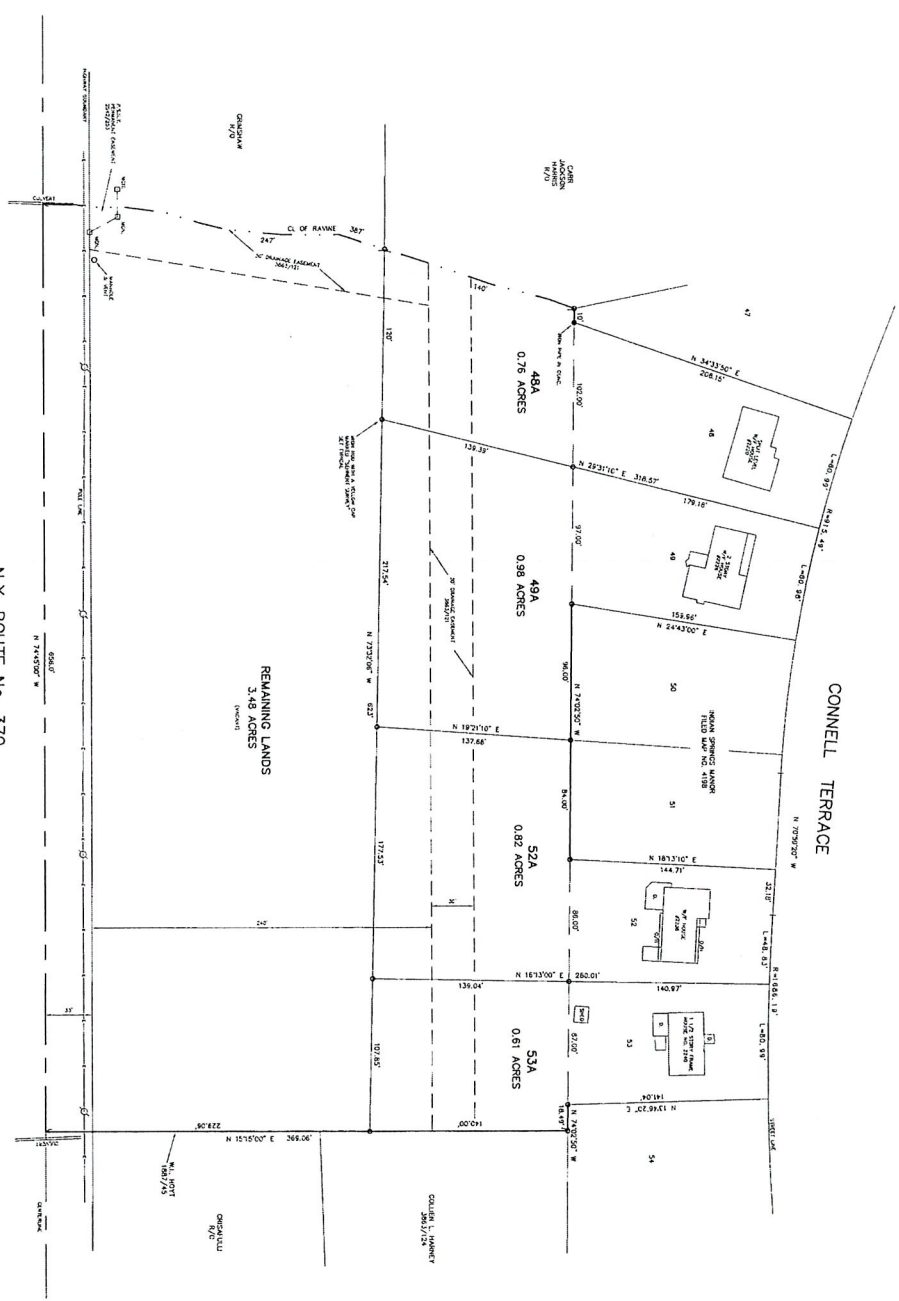
A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.12? If yes, coordinate the review process and use the FULL EAF. <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No	
C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible) C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic patterns, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly: C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly: C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly: C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly: C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly. C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly. C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly. 	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CEA? <input type="checkbox"/> Yes <input type="checkbox"/> No	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly	

PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed.

<input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.	
<input type="checkbox"/> 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 AND provide on attachments as necessary, the reasons supporting this determination:	
<div style="text-align: center; border-top: 1px solid black; margin-top: 20px;">Name of Lead Agency</div>	
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)
Date	

Panorami



THE UNDERSIGNED SURVEYOR HEREBY CERTIFIES THAT THIS MAP IS
MADE FROM AN ACTUAL SURVEY OF THE PROPERTY SHOWN HEREON
COMPLETED MARCH 21, 2023.
Q. STEPHEN SEHNERT
LAND SURVEYOR No. 40023
STATE OF NEW YORK
EXCEPT AS PROVIDED IN SECTION 7209, SUBDIVISION 2, OF THE
NEW YORK STATE EDUCATION LAW.



WHEN EXPERIENCE MATTERS		
APPLIED EARTH TECHNOLOGIES		
STEPHEN SEHNERT		
LAND SURVEYOR		
BALDWINVILLE, NEW YORK		
LOT LINE ADJUSTMENT	LOTS 48, 49, 52 & 53	
	AND OTHER LOTS	
	IN SECTION 7209, SUBDIVISION 2, OF THE	
	NEW YORK STATE EDUCATION LAW	
SCALE: 1" = 40'	DATE: MARCH 21, 2023	
REV: MAY 8, 2023	275	573.248

APPROVED BY TOWN OF LISANDER
PLANNING BOARD ONONDAGA CO.
DATE: 5/1/23
CHIEF: *[Signature]*

Ravas

Application to the Planning Board

For: _____ Subdivision of Land
_____ Number of Lots _____
_____ Controlled Site Use
_____ Site Plan Approval

Date: _____
_____ Information Only
_____ Preliminary
_____ Final

Name of proposed development: RAVAS Subdivision

Applicant:

Name Rick + Chris RAVAS
Address 109 Smokey Hollow Rd.
Baldwinsville, NY 13027
Telephone: 315-575-2672

Plans prepared by:

Name Steve Schnert
Address Canton St.
Telephone: 315-635-597

Owner of record:

Name Rick + Chris RAVAS
Address 109 Smokey Hollow Rd.
Baldwinsville, NY 13027
Telephone: 315-575-2672

Ownership intentions:

Name Same
Address _____
Telephone: 315-575-2672

Proof of ownership attached: _____

Site Location:

8719 Smokey Hollow Rd.
Baldwinsville, NY 13027

Farm Lot No. _____

Tax Map No. _____

Current Zoning Ag

Is site in an Agricultural
Tax District? NO

Area of land 5⁺ acres.

Plans for sewer and water
connections:

Private

Proposed use(s) of site:

Residence

Current use & condition of site:

Single family / open

Character of surrounding

3 Rivers Game Management
Wooded

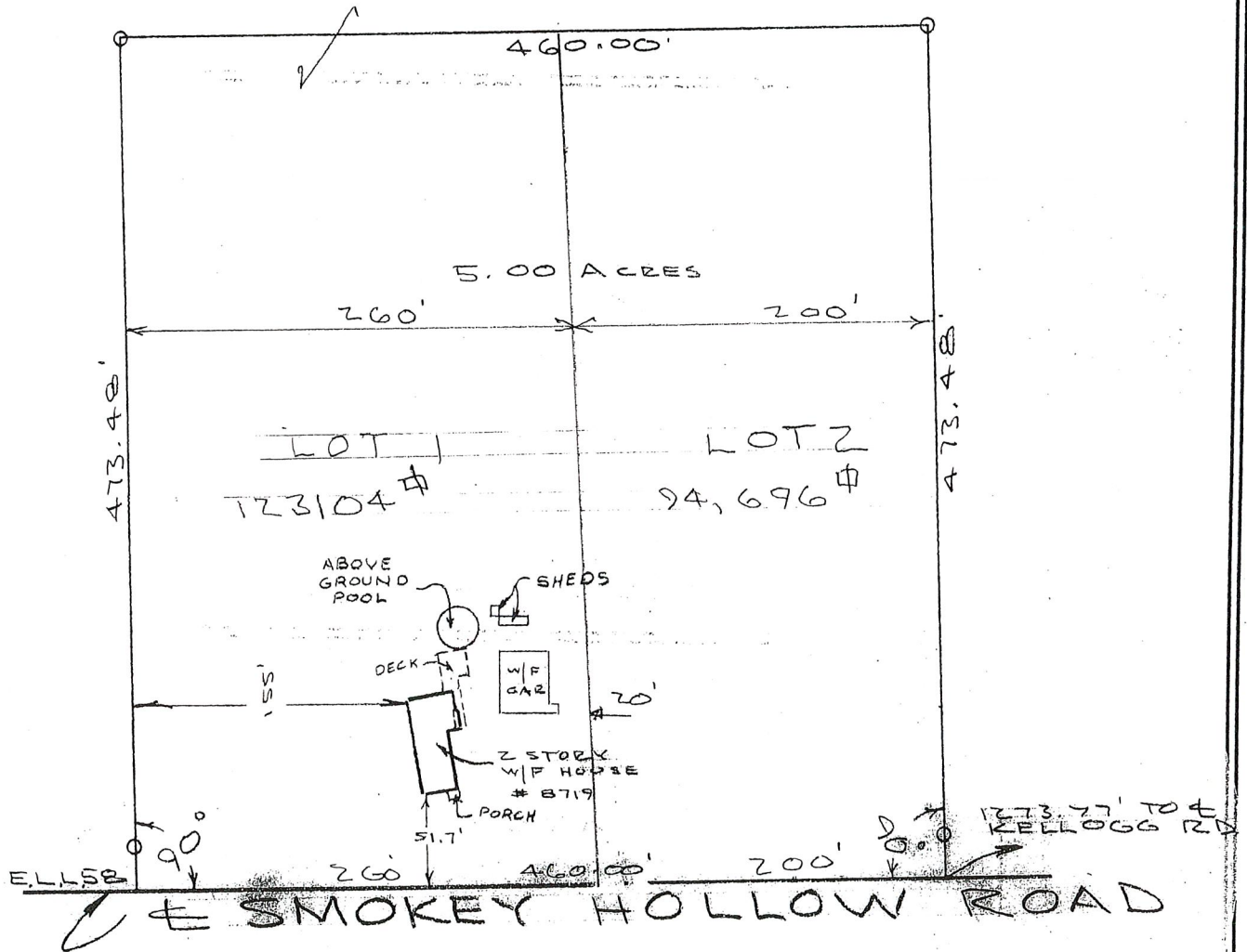
SEE REVERSE SIDE FOR ADDITIONAL SUBMITTAL REQUIREMENTS!

Rick RAVAS
Name of Owner or Representative

Rick RAVAS
Signature

Area Variance
Lot width of 50'
granted 10-2-2023

BIGLIARDI
941/366



0-IRON ROD WITH YELLOW CAP MARKED "SEHNERT SURVEY" 9/85