#### 617.20

**SEQR** 

### 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 Town of New Paltz		2. PROJECT NAME Accessory Apartment Code Amendment	
PROJECT LOCATION:     Municipality	Town of New Paltz	County	ter
4. PRECISE LOCATION (Street address and road Intersections, prominent landmarks, etc., or provide map)			
All zoning districts within the Town that allow single family residential uses as a permitted use (i.e., R-1, A-1.5 and A-3 zoning districts, and including applicable portions of the Floodplain sub-districts)			
5. IS PROPOSED ACTION:  New Expansion Modification/alteration			
6. DESCRIBE PROJECT BRIEFLY:			
Amendment of Section 140-17 of the Code of the Town of New Paltz to regulate the process of requiring a special use permit approval for the creation of accessory apartments within owner-occupied residential structures that were lawfully constructed, established and maintained as a single-family residence for seven or more years.			
7. AMOUNT OF LAND AFFECTED: Approx. 18,950 acres Ultimately approx. 18,950 acres			
	IPLY WITH EXISTING ZONING OR -OTHER describe briefly	EXISTING LAND USE RESTRICTIONS?	
9. WHAT IS PRESENT LAND USE Residential Describe:		riculture Park/Forest/Open space	Other
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?			
* GML 239 referral to the Ulster County Planning Board is required			
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL?  Yes No If yes, list agency name and permit/approval			
* Accessory apartments are currently allowed in owner occupied residential structures constructed prior to 1986			
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION?  Yes No			
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE			
Applicant/sponsor name: Susan Zimet, Town Supervisor Date:		·	
Signature:			

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 617.4? If yes, coordinate the review process and use the FULL EAF.			
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.  Yes 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,			
Proposed action complies with the goals and objectives of the Town Comprehensive Plan			
C5. Growth, subsequent development, or related activities likely to be Induced by the proposed action? Explain briefly.			
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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 CALISED THE ESTABLISHMENT OF A CEA?  Yes X No			
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?  Yes 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 (9 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. If question D of Part II was checked yes, the determination and significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.			
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.			
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:			
Town of New Paltz Town Board			
Susan Zimet Town Supervisor			
Print or Type Name of Responsible Officer in Lead Agency  Title of Responsible Officer  Signature of Responsible Officer in Lead Agency  Signature of Responsible Officer in Lead Agency			
Date			