

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

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			
Dr. Mark Lane, President/Owner: All Pets Veterinary Service, PC; (845) 986-7387; allpets18@yahoo.com; 45 Ronald Reagan Blvd, Warwick, NY10990			
Name of Action or Project: All Pets Veterinary Hospital			
Project Location (describe, and attach a location map): 62 Wood Road, Sugar Loaf, NY 10981			
Brief Description of Proposed Action: This Hospital is the same: (1) Size (852 sq.ft. vs. 875 sq.ft.); & (2) Configuration; &, (3) ALSO in the same exact Zone; as my previously-Approved (by the Town of Chester) Veterinary Hospital (@ 1136 Kings Highway, Chester). There are NO -- ZERO -- Structural Changes necessary here -- OR Planned. Basic Layout consists of: Reception Area; Exam-Room; Surgery & X-Ray Areas; & Cage-Room (all of which ALREADY fit perfectly into the Pre-Existing Layout of Partitions, & therefore, require NO alterations or additions). We are a Full-Service Veterinary Hospital. We DO NOT Board Dogs for ANY Non-Medical reasons, NOR do we have ANY Outdoor Runs. We are an extremely small-scale operation, seeing only 1 Client at any given time (by Appointment Only) & our "Impact" upon the Parameters which this form typically addresses is beyond even being described as "negligible" -- in reality, is not even measurable, or detectable. Specifically: there will be NO -- ZERO -- increases to Sewer, Water, Lighting or Parking, based on the Scale & the Square-Footage of the Hospital.			
* Please Note: My exact same Identity Sign was also Approved @ the previous location. Details & Photos of that Installation are in my Application Package.		Telephone: (845) 986-7387	
Dr. Mark Lane		E-Mail: allpets18@yahoo.com	
Address: 62 Wood Road		* * Please Note Further: I also want to clarify, that this same exact Identity Sign is NOT a "new element" at all, but rather: (1) a Pre-Existing ; & (2) Already-Previously-Approved (by the Town of Chester) element of the Proposal; & as such, it should NOT properly be subject to the Architectural Review process which is mandatory for all NEW elements of a Proposal.	
City/PO: Sugar Loaf		State: NY	Zip Code: 10990-4105
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? 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.		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres b. Total acreage to be physically disturbed? _____ 0 acres 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, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): <input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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 <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
12. a. 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? b. 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?	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>	
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 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>	

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 <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
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
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES
If Yes,	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
49. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?	NO	YES
If Yes, describe: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Dr. Mark Lane</u> Date: <u>05/29/19</u> Signature: <u><i>Mark Lane DVM</i></u> Title: <u>President / Owner</u>		

Project:

Date:

Short Environmental Assessment Form

Part 2 - Impact Assessment

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:		
a. public / private water supplies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Project: _____
 Date: _____

Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

All Pets Veterinary Hospital is an extremely small-scale operation, seeing only 1 Client at any given time (by Appointment Only) & its "Impact" upon the Parameters which this Form typically addresses is beyond even being described as "negligible" -- in reality, is not even measurable, or detectable.

The "Impact" that All Pets Veterinary Hospital will have upon the Environment, when it is operating here, is exactly the same as the "Impact" would be, had it NOT been there.

The exact same Size (850 - 875 sq.ft.) & Configuration of All Pets Veterinary Hospital, as exists in this Proposal, had already been Approved by the Town of Chester previously, @ 1136 Kings Highway, & operated there, in that location, for 2 years, without having ANY Environmental Impact. Moreover, it should be noted that the previous location is also in the same Zone as this proposed location.

Specifically: there will be NO -- ZERO -- increases to Sewer, Water, Lighting or Parking, based on the Scale & the Square-Footage of the Hospital.

* It should also be noted that the Identity Sign which would be used at this proposed location is the exact SAME Identity Sign that was Approved by the Town of Chester at the previous location (1136 Kings Highway). The details and photographs of this Identity Sign, installed at the previous location, have already been submitted as part of the Applicant's Application Form Package for the Planning-Board Work Session.

* * **Please Note:** I also want to clarify, that this same, exact, Identity Sign is **NOT** a "new element" of this Proposal at all, but rather: (1) a **Pre-Existing**; & (2) **Already-Previously-Approved** (by the Town of Chester) element of this Proposal -- & as such, it should **NOT** properly be subject to the Architectural Review process that is mandatory for all **BRAND-NEW** elements of a Proposal.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

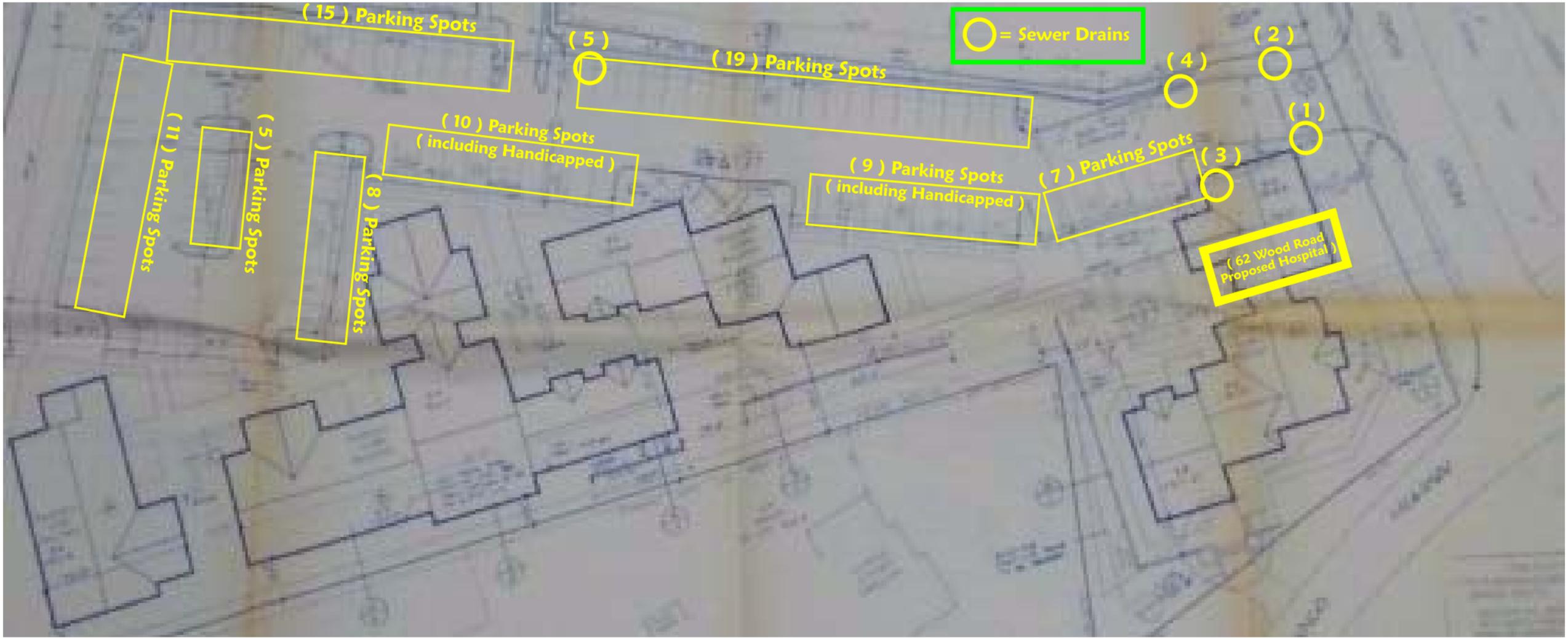
Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency
Date

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)

PLEASE NOTE: Following this Page, I have inserted an Annotated Copy of the Sugar Loaf Square Plot Plan, + a Series of Annotated Photographs, so as to demonstrate the (Over -) Abundance of Parking-Spots & Sewer-Drains, which already exists @ the Site. It should be noted that this Site has supported, previously, a Restaurant which, at times, accommodated up to 150 people (Employees + Patrons together) compared to which, my Proposal (an 850-sq.ft. Unit w/ 1 Bathroom) is minuscule. The existing Parking-Spots & Sewer Drains can easily accommodate my Proposal.



(15) Parking Spots

○ = Sewer Drains

(5)

(19) Parking Spots

(4)

(2)

(11) Parking Spots

(5) Parking Spots

(10) Parking Spots
(including Handicapped)

(8) Parking Spots

(9) Parking Spots
(including Handicapped)

(7) Parking Spots

(3)

(62 Wood Road
Proposed Hospital)

(1)

- Wood Road -

(ENTRANCE)

(This is the Unit
of the Proposal)





**Handicapped
Parking Spot # 1**

Sewer Drain # 3





**FOR
RENT**

Space for Rent
Call for details
845.469.6381

**Handicapped
Parking Spot # 1**

Sewer Drain # 3

Sewer Drain # 3



Sewer Drain # 4



- Wood Road -

Sewer Drain # 2

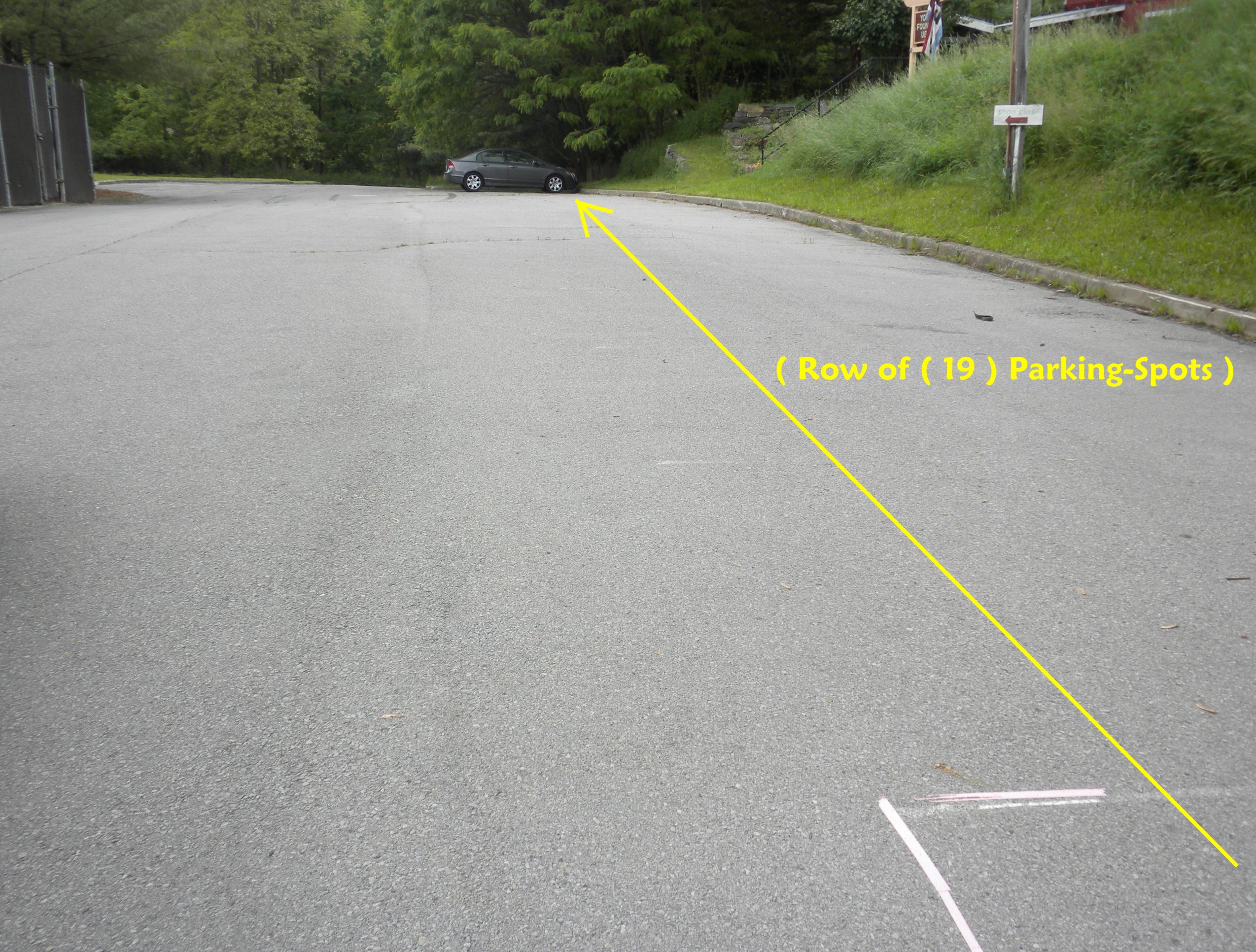
Sewer Drain # 1





Sewer Drain # 5

(N.B.: I did not get a Photo of Sewer Drain # 6 (because it started raining hard) but there are AT LEAST (6) Sewer Drains) (& almost certainly MORE than that)



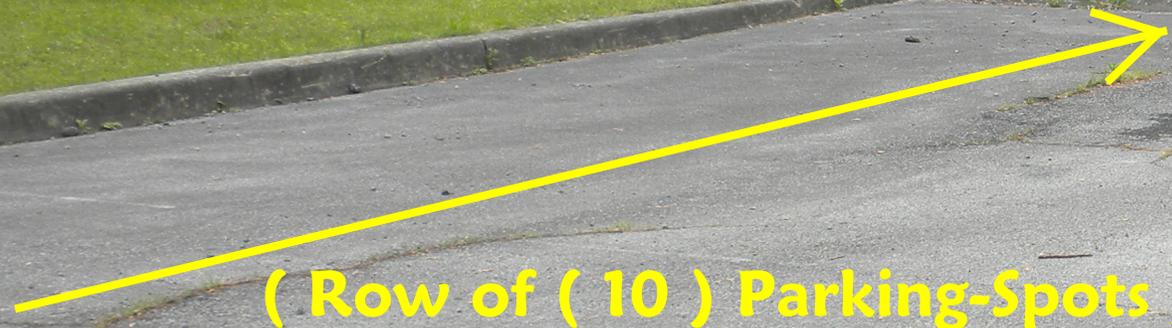
(Row of (19) Parking-Spots)



(Row of (11) Parking-Spots)

(Row of (5) Parking-Spots)

(Row of (8) Parking-Spots)



(Row of (10) Parking-Spots)

(Depicted: (34) Additional Parking-Spots)

(Please Note: this Row of (10) Parking-Spots contains an Additional (2nd) Handicapped Parking-Spot)



("Long View" from Spot of Previous Photo, looking in Opposite Direction, further demonstrating Quantity of Parking Spots)