

TOWN OF OLIVE PLANNING BOARD  
APPLICATION FOR SUBDIVISION

No. \_\_\_\_\_

P.O. BOX 180  
WEST SHOKAN, NY 12481

Date \_\_\_\_\_

APPLICANT:

Name of Owner Peter + Diane Rinaudo

Name of Representative Self

Address 1380 County Road 2

Address Same

Olivebridge, NY 12461

Phone 845-303-6670

Phone \_\_\_\_\_

Name of Surveyor C.T. Male Associates Address: 50 Century Hill Drive Latham, NY 12110

Phone: 518-786-7400

PROPERTY:

Subdivision Name Krumville Subdivision

Property lies in RC10 RR3 RE1. BV1/2. BH1/2

Location (Road) 1380 + 1886 County Rd 2

Any part in flood hazard area? No X Yes \_\_\_\_\_

Olive Tax Map # 53.4 Block 3 Lot 37  
53.4 Block 3 Lot 38

Total Area of Property in Acres 3.45 + 16.30

Total Lots 2 Lots → 3 Lots

A list of names and addresses of abutting land owners is required with the maps.

Sketch Plan 3 Maps Required
Preliminary Plan 4 Maps Required
Final Plan 7 Maps Required & Linen

OWNER(S) Peter C. Rinaudo  
Signature(s)

PLANNING BOARD USE ONLY

DATE APPROVED	DATE	Approved by	DATE
Sketch Plan _____	Public Hearing Notice in Paper _____	County Health _____	
Preliminary Plan _____	Public Hearing _____	NYC EPA _____	
Final Plan _____	Other Approved _____	Town Highway Dept. _____	
No. of Lots	Amount per Lot		
_____ X	Application Fee _____	=	_____
_____ X	Recreation Trust Fund _____	=	_____
Date Fees Sent to Town Supervisor: _____	Application Fee _____	Trust Fund _____	

# Short Environmental Assessment Form

## Part 1 - Project Information

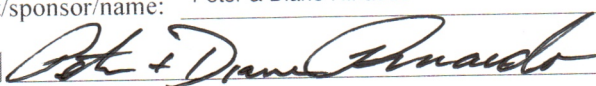
### Instructions for Completing

**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.

<b>Part 1 – Project and Sponsor Information</b>			
Peter & Diane Rinaudo Owners of Property SBL #53.4-3-37 & #53.4-3-38			
Name of Action or Project: Krumville Subdivision / Lot Line Adjustment			
Project Location (describe, and attach a location map): The Property is located on County Road 2 and Grassy Ridge Road in the Town of Olive			
Brief Description of Proposed Action: Proposed to take 2 Properties that are divided by the County Road and make 3 lots that make sense. Property will no longer be divided by the County Road, Each lot will have in at least 600' road frontage. There are already driveways and existing access to both County and Town Roads from all 3 proposed lots. Lot #1 4.611+ or - acres. Lot #2 (The Country Inn) 5.370+ or - acres. Lot #3 10.865+ or - acres.			
Name of Applicant or Sponsor:  Peter & Diane Rinaudo		Telephone: 845-303-6670 cell  E-Mail: peter@krumville.com	
Address: 1380 County Road 2			
City/PO: Olivebridge		State: New York	Zip Code: 12461
1. <u>Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?</u>		NO	YES
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.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. <u>Does the proposed action require a permit, approval or funding from any other government Agency?</u>		NO	YES
If Yes, list agency(s) name and permit or approval:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. <u>Total acreage of the site of the proposed action?</u>		20.846 + or - acres	
b. <u>Total acreage to be physically disturbed?</u>		0 acres	
c. <u>Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?</u>		20.846 + or - acres	
4. <u>Check all land uses that occur on, are adjoining or near the proposed action:</u>			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input checked="" type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input checked="" type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

5. - Is the proposed action,	NO	YES	N/A
a. <u>A permitted use under the zoning regulations?</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. <u>Consistent with the adopted comprehensive plan?</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. <u>Is the proposed action consistent with the predominant character of the existing built or natural landscape?</u>	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
7. <u>Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?</u> If Yes, identify: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
8. a. <u>Will the proposed action result in a substantial increase in traffic above present levels?</u> 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 checked="" type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
9. <u>Does the proposed action meet or exceed the state energy code requirements?</u> If the proposed action will exceed requirements, describe design features and technologies: The proposed action will meet the state energy code requirements.	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
10. <u>Will the proposed action connect to an existing public/private water supply?</u> If No, describe method for providing potable water: _____ Lot #1 has a drilled fresh water well. Lot # 2 (The Country Inn) has 2 drilled fresh water wells. Lot #3 will need to have a fresh water well drilled.	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
11. <u>Will the proposed action connect to existing wastewater utilities?</u> If No, describe method for providing wastewater treatment: _____ Private engineered waste water septic systems. Lot #1 and Lot #3 has engineered and approved UCBOH Septics. Lot #2 has existing waste water septic systems.	NO <input checked="" type="checkbox"/>	YES <input 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. <u>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?</u> 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: We have applied and been granted a permit from NYS Dept. of Environmental Conservation. Permit No. 3-5140-00215/00001 & 00002 Expiration Date: 12/31/2028. The Permit allows us to go within the 100' adjacent area of the NYS wetlands to construct a single family dwelling.	NO <input type="checkbox"/> <input type="checkbox"/>	YES <input checked="" type="checkbox"/> <input checked="" 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 checked="" type="checkbox"/> Forest	<input type="checkbox"/> Agricultural/grasslands
<input checked="" 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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe:		
The Properties already have storm water discharges onto them from both the County and Town Roads. They will continue to flow as they have in the past, without obstruction.		
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"/>
19. 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"/>
<p><b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor/name: Peter &amp; Diane Rlnaudo Date: 2/1/23</p> <p>Signature:  Title: Owners</p>		

( ) RENEWAL

ULSTER COUNTY DEPARTMENT OF HEALTH  
ENVIRONMENTAL HEALTH SERVICES  
239 GOLDEN HILL LANE  
KINGSTON, NY 12401

( ) FORMERLY:

PERMIT TO CONSTRUCT A WASTE DISPOSAL SYSTEM

THIS PERMIT IS ISSUED UNDER THE PROVISIONS OF ARTICLE VI, SECTION 6.4.0 OF THE ULSTER COUNTY SANITARY CODE. **PERMITS ARE NON-TRANSFERABLE.**

This Permit is Valid for a *Two Year* Period – Date of Issuance: 06/02/2021

1. APPLICANT

Peter & Diane Rinaudo

2. ADDRESS OF APPLICANT

1380 County Road 2  
Olivebridge, NY 12461

3. LOCATION OF PROJECT

1380 County Road 2

4. TOWNSHIP

Olive

5. TYPE OF OWNERSHIP

Single Family - 4 bedroom

6. TAX IDENTIFICATION NUMBER

53.4-3-37, Lot #1

DESCRIPTION OF WORKS

INSTALLATION OF: System Type: Raised System

Minimum separation of the absorption field 100 feet from well, (150 feet if seepage pit), 100 feet from a stream or water course, and 10 feet from the property line.

All systems shall be designed / constructed in conformance with all applicable rules and regulations. (Appendix 75-A “Wastewater Treatment Standards – Individual Household Systems”, latest revision and / or DEC Design Standards for Wastewater Treatment Works, latest revision.)

Well log to be submitted prior to final approval.

Well construction to be in accordance with Appendix 5-B, Standards for Water Wells, November 23, 2005.

The sewage system must be installed in accordance with the plans submitted by Louis S. Dubois, P.E. and approved / accepted by this department on 06/02/2021.

A New York State Licensed P.E., Architect, or Exempt Land Surveyor must certify that the sewage system has been installed in accordance with the approved / accepted plan.

20-531

JR

2014

*Teresa Rinaudo, P.E.*

cc: NYC WATERSHED - ( ) Ashokan, ( ) Delaware, ( ) Rondout/Neversink

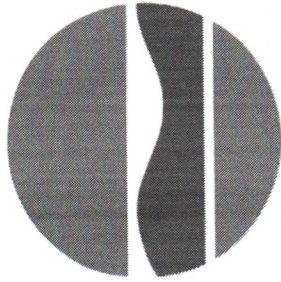
FULLY DELEGATED ( )

Carol M. Smith, MD, MPH  
Commissioner of Health

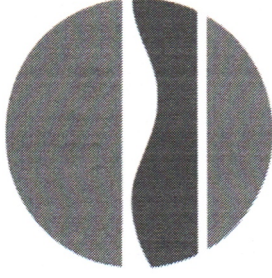
*Carol M. Smith, MD, MPH 6/2/21*  
JOINT REVIEW AND APPROVAL ( )

New York State

Department of Environmental Conservation



# NOTICE



The Department of Environmental Conservation (DEC) has issued permit(s) pursuant to the Environmental Conservation Law for work being conducted at this site. For further information regarding the nature and extent of work approved and any Department condition on it, contact the DEC at 845-256-3054 or [dep.r3@dec.ny.gov](mailto:dep.r3@dec.ny.gov). Please refer to the permit number shown when contacting the DEC.

Peter Rinaudo

Permittee: \_\_\_\_\_

Permit No. 3-5140-00215/00001&00002

Effective Date: 6/14/2022

Expiration Date: 12/31/2028

Applicable if checked. No instream work allowed between October 1 & April 30

**NOTE:** This notice is **NOT** a permit.

( ) RENEWAL

ULSTER COUNTY DEPARTMENT OF HEALTH  
ENVIRONMENTAL HEALTH SERVICES  
239 GOLDEN HILL LANE  
KINGSTON, NY 12401

( ) FORMERLY:

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This Permit is Valid for a *Two Year* Period – Date of Issuance: 06/02/2021

1. APPLICANT

Peter & Diane Rinaudo

2. ADDRESS OF APPLICANT

1380 County Road 2  
Olivebridge, NY 12461

3. LOCATION OF PROJECT

1386 County Road 2

4. TOWNSHIP

Olive

5. TYPE OF OWNERSHIP

Single Family - 4 bedroom

6. TAX IDENTIFICATION NUMBER

53.4-3-38, Lot #3

DESCRIPTION OF WORKS

INSTALLATION OF: System Type: In-Ground Infiltrators

Minimum separation of the absorption field 100 feet from well, (150 feet if seepage pit), 100 feet from a stream or water course, and 10 feet from the property line.

All systems shall be designed / constructed in conformance with all applicable rules and regulations. (Appendix 75-A “Wastewater Treatment Standards – Individual Household Systems”, latest revision and / or DEC Design Standards for Wastewater Treatment Works, latest revision.)

Well log to be submitted prior to final approval.

Well construction to be in accordance with Appendix 5-B, Standards for Water Wells, November 23, 2005.

The sewage system must be installed in accordance with the plans submitted by Louis S. Dubois, P.E. and approved / accepted by this department on 06/02/2021.

A New York State Licensed P.E., Architect, or Exempt Land Surveyor must certify that the sewage system has been installed in accordance with the approved / accepted plan.

Carol M. Smith, MD, MPH  
Commissioner of Health

20-530

JR

*T. Rinaudo, P.E.*

*Carol M. Smith, MD, MPH 6/2/21*

2014

cc: NYC WATERSHED - ( ) Ashokan, ( ) Delaware, ( ) Rondout/Neversink

FULLY DELEGATED ( )

JOINT REVIEW AND APPROVAL ( )

List of adjacent property owners in the 500' buffer zone

Information provided by Dianna Carchidi Town of Olive

Kenneth Aldin SBL#53.4-3-200  
6 Beaver Lake Rd  
Olivebridge, NY 12461

Oscar the 1st LLC SBL#53.4-3-33.110  
C/O Andres Consuegra  
3045 Virginia St  
Miami, FL 33133

Lake House Inc SBL#60.2-2-15.110  
41 Tall Oakes  
Kingston, NY 12401

Marshall Borris SBL#53.4-1-27  
27 Old Camp Rd  
Olivebridge, NY 12461

Victor Winograd SBL#53.4-3-35.100  
1363 County Road 2  
Olivebridge, NY 12461

Walter Aleksandrowicz SBL#53.4-3-36.200  
1359 County Road 2  
Olivebridge, NY 12461

Pio Sabini SBL#53.4-2-36  
43-16 30th Ave  
Astoria, NY 11103

William Reilly SBL#53.4-2-35  
288 Grassy Ridge Rd  
Olivebridge, NY 12461

Lois Ferrari SBL#53.4-2-34  
5381 Rte212  
Mt. Tremper, NY 12457

Angel Herrera SBL#53.4-3-12.114  
360 7th St  
Brooklyn, NY 11215

Saveskie SBL#53.4-3-36.110  
10 Oak Rd  
Kerhonkson, NY12446