

TOWN OF OLIVE PLANNING BOARD
APPLICATION FOR SUBDIVISION

No. 21-Sub-6

P.O. BOX 180
WEST SHOKAN, NY 12481

Date 9-14-21

APPLICANT:

Name of Owner JAMES SENECA

Name of Representative JAMES SENECA

Address P.O. BOX 173

Address P.O. BOX 173

SHOKAN, NEW YORK 12481

SHOKAN, N.Y. 12481

Phone 845-750-3670

Phone _____

Name of Surveyor Ken Keefe

Address: ZENA Rd WOODSTOCK N.Y. 12498

Phone: 845-679-7192

PROPERTY:

Subdivision Name WAY BACK ACRES

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

Location (Road) MOUNTAIN Rd SHOKAN

Any part in flood hazard area? No Yes _____

Olive Tax Map # 37.018 Block 02 Lot 04

Total Area of Property in Acres (3.603)(1.857) = 5.46 Total Lots 2

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) [Signature]
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.

Part 1 – Project and Sponsor Information			
James Senecal			
Name of Action or Project: Way back acres			
Project Location (describe, and attach a location map): 87 Mountain Road Shokan			
Brief Description of Proposed Action: Flag lot. Take 5+ acre lot and cut it into two lots. One lot 3.338 acres and second lot 2.122 acres.			
Name of Applicant or Sponsor: James Senecal		Telephone: 8457503670	
		E-Mail: jsenecal60@gmail.com	
Address: 87 Mountain Road			
City/PO: Shokan		State: NY	Zip Code: 12481
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	YES
		<input checked="" type="checkbox"/>	<input 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	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		5.464 acres	
b. Total acreage to be physically disturbed?		0.214 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		3.33 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 type="checkbox"/> Commercial <input checked="" 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			

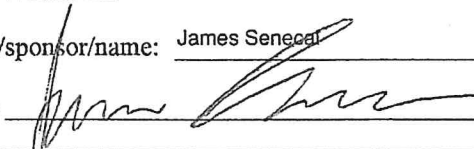
5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<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	YES	
	<input checked="" type="checkbox"/>	<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	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" 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	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ private well _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ shallow trench absorption, shallow trench field, septic field _____	NO	YES	
	<input checked="" type="checkbox"/>	<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	YES	
	<input checked="" 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	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

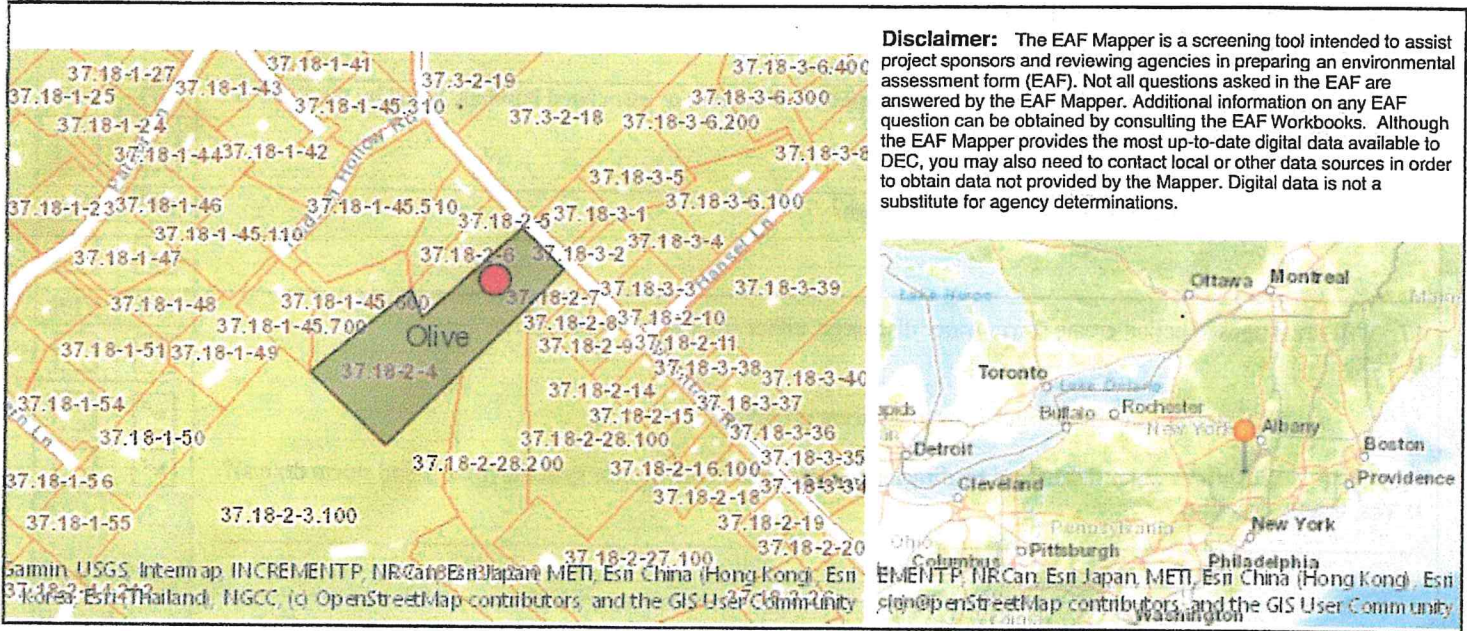
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input checked="" type="checkbox"/> Wetland <input type="checkbox"/> Urban <input 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? If Yes,	NO	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)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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)? If Yes, explain the purpose and size of the impoundment:	NO	YES
_____	<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? If Yes, describe:	NO	YES
_____	<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? If Yes, describe:	NO	YES
_____	<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>James Senecal</u>	Date: <u>10/21/2021</u>	
Signature: 	Title: <u>Owner</u>	



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No

... To This Plot And Consent To The Filing Of It In The Office Of The

... Date

... Date

... And Approved By The Planning
... Of The Town Of Olive.

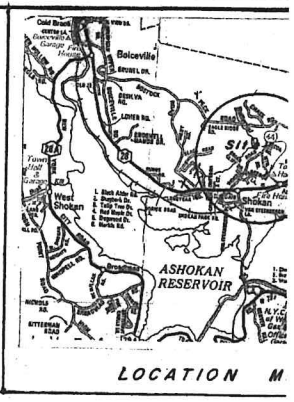
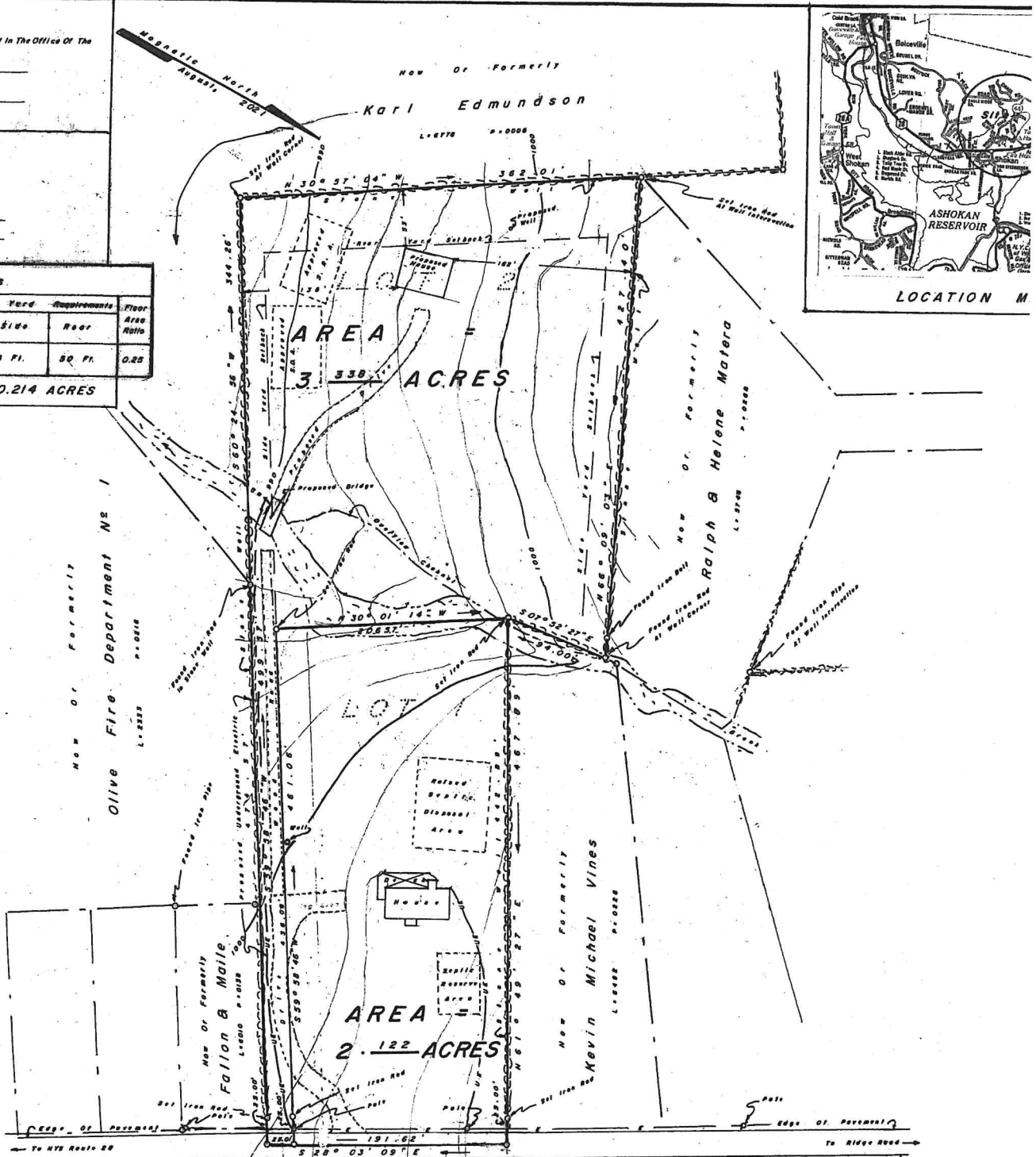
... Date

... Member

... Member

Zoning Requirements					
Minimum Open Space	Minimum Lot Width	Minimum Yard Requirements			Floor Area Ratio
		Front	Side	Rear	
1/4	125 Ft.	30 Ft.	25 Ft.	50 Ft.	0.25

Area Of Disturbance = 0.214 ACRES



RIGHTS OF THE PUBLIC IN AND TO ALL
... HIGHWAY KNOWN AS MOUNTAIN ROAD
... SHOWN PREMISES.

RIGHTS OF WAY, EASEMENTS
... RECORDED OR OTHERWISE.

L-4957 P-0309
18-02-04

AKA County Route 44
 Now Or Formerly Donna M. Winnie L-3887 P-0307
 Now Or Formerly Baiba Hulsizer L-4837 P-0291
 Lands Of Ashokan Cemetery Assoc. L-1152 P-1287
 Now Or Formerly Fallon & Maile L-4810 P-0128
 Now Or Formerly Kevin Michael Vines L-4888 P-0288
 Now Or Formerly Olive Fire Department No. 1 L-4833 P-0218
 Now Or Formerly Ralph & Helene Matara L-4878 P-0288
 Now Or Formerly Karl Edmondson L-4878 P-0008

NOTE:
 1. CONTOUR INTERVAL 5
 ... MAPPING BY GN SITE 5
 ... ELEVATIONS AS SHOWN
 2. GRANTING AND EXCEPTING
 ... RIGHT OF WAY OVER THE
 ... HEREON. A MAINTENANCE
 ... AND WILL BE SUPPLIED U

MAP

Showing Subdivision Of Lands For
James Senecal

Situate: Shokan
 Town Of Olive - Ulster Co., N. Y.

REVISED: OCTOBER 18, 2021
 DATE: SEPTEMBER 09, 2021

Scale: 1" = 60'

P.L.S. NY 049817

COPYES OF THIS MAP NOT BEARING THE
 ... SEAL SHALL NOT BE
 ... GUARANTEED OR CERTIFICATIONS BEING
 ... PERSONS FOR WHOM THE SURVEYING
 ... COMPANY, GOVERNMENTAL AGENCY OR
 ... TO THE AGENTS OF THE LICENSEE
 ... ARE NOT TRANSFERABLE TO ADDITIONAL
 ... UNAUTHORIZED ALTERATION OR ADVICE
 ... OF SECTION 7206, 62 OF THE NEW YORK

①. Kerstin Malie
Francis Fallon
81 Mountain Road
Shokan, New York 12481

②. OLIVE FIRE DEPT NO 1 INC
Route 28
SHOKAN, NEW YORK 12481

③. KARL EDMUNDSON
3084-3086 ROUTE 28
SHOKAN, NEW YORK 12481

④. RALPH MATERA
35 HUDSON HOLLOW ROAD
SHOKAN, NEW YORK 12481

⑤. KEVIN VINES
93 MOUNTAIN ROAD
SHOKAN, NEW YORK 12481

⑥. JAMES SENECA
P.O. BOX 173
SHOKAN, NEW YORK

⑩. Lisa Baker
41 Hudson Hollow Rd
PO Box 134
Shokan NY 12481

Different owner now
Donna Winnie
80 Mountain Rd
Shokan, NY 12481

⑨. FRED Not ~~Shokan~~ 12481
David Kautman
Lauren Hanson
6000 Catalpa Avenue
Shokan NY 12481

⑧. Baiba Hulsizer
88 Mountain Rd
Shokan, NY 12481

() RENEWAL

ULSTER COUNTY DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH SERVICES
239 GOLDEN HILL LANE
KINGSTON, NEW YORK 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 : 8/12/2016

1. APPLICANT

Kylene N. Thomas

2. ADDRESS OF APPLICANT

c/o Rex Sanford, P.E.
P.O. Box 92
Boiceville, NY 12412

3. LOCATION OF PROJECT

Mountain Road

4. TOWNSHIP

Olive

5. TYPE OF OWNERSHIP

Single family – 3 bedroom

6. TAX IDENTIFICATION NUMBER

37.018-2-4

DESCRIPTION OF WORKS

INSTALLATION OF:

- In-Ground Sub Surface Disposal System
- Shallow Absorption Trenches
- Absorption Beds
- Raised System
- Pump Station
- Dosing Chamber
- Other Technologies

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 Rex Sanford, P.E. and approved / accepted by this department on 8/12/2016.

Carol M. Smith, MD, MPH
Commissioner of Health

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.

MB
2014

cc: NYC WATERSHED – (X) Ashokan, () Delaware, () Rondout/Neversink
FULLY DELEGATED () JOINT REVIEW AND APPROVAL (X)

Carol M. Smith MD MPH 8/12/16

ULSTER COUNTY DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH SERVICES DIVISION
239 GOLDEN HILL LANE
KINGSTON, NEW YORK 12401
845-340-3010

APPLICATION FOR AND REPORT OF SEWAGE DISPOSAL SYSTEM
THIS IS NOT A PERMIT TO CONSTRUCT

Please complete the following:

Date: 9-28-2021
Name of Property Owner/Buyer: JAMES SENECA
Present Mailing Address: 110 REX SANFORD, PE, P.O. Box 92, SHOKAN, NY 12481
Telephone: (845) 750-3670
Location of Property: 87 MOUNTAIN ROAD
SBL Number: 37.018-2-4 Township: _____
Lot Size (acres): 3.3 ± ACRES NYCDEP Watershed Area
 Renewal Re-Name (Formerly) KYLENE N. THOMAS
Engineer Name: REX SANFORD, PE
Address: P.O. Box 92, SHOKAN, NY 12481
Telephone: (845) 657-6426

Residential:

Existing Realty Subdivision Name/ Lot #: N/A
Total Number of Bedrooms: 3
Garbage Grinder: Yes _____ No

Commercial:

Type of Establishment: _____

OWNER'S SIGNATURE 

AN ORIGINAL APPLICATION AND SIGNATURE IS REQUIRED

<input type="checkbox"/> Residential: Fee.....\$400.00	<input type="checkbox"/> Commercial: Fee: -Daily flows less than 1,000 gallons.....\$400.00 -Daily flows 1,000 gallons – 10,000 gallons *.....\$500.00 - Daily flows more than 10,000 gallons.....\$600.00 <i>(Daily flows more than 10,000 gallons - plans to be submitted to the NYSDEC for review & approval)</i> *only applies to facilities permitted by DOH under Part 6, 7, 14, 15 or 17 of the NYS Sanitary Code.
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Payable by Check or Money Order to: Ulster County Commissioner of Finance

ALL PERMIT/APPLICATION FEES ARE NON-REFUNDABLE

Note: Applications will not be processed without payment.

A fee of \$20.00 will be charged by the Ulster County Department of Health for any checks that are returned to our Department from the Bank.

NOT TO BE COMPLETED BY APPLICANT

For Office Use Only

Log Number: _____

Mail body: Fwd: Pictures of stream and banks ribbons are sides of bridge and abutments of bridge

----- Forwarded message -----

From: **Drumm, Brian R (DEC)** <brian.drumm@dec.ny.gov>

Date: Fri, Jul 30, 2021, 1:54 PM

Subject: RE: Pictures of stream and banks ribbons are sides of bridge and abutments of bridge

To: James Senecal <jsenecal60@gmail.com>

Cc: olivebuildingzoning@gmail.com <olivebuildingzoning@gmail.com>, olivehighway@hvc.rr.com <olivehighway@hvc.rr.com>

To: James Senecal

Town of Olive Building Department

Town of Olive Highway Department

I apologize for the delay on following up.

I met with you on your property at the site of the proposed bridge on July 16, 2021. The proposed location and size of the bridge is shown in the attached photo you provided with the string and flagging. The proposed bridge length of 30' completely spans the stream so the abutments can be constructed beyond the top of bank. The Since you have access through your neighbor's property to build the abutments on the other side it will not be necessary to cross the stream with equipment during construction. Considering these factors the bridge can be constructed without disturbing the bed or banks of the stream. An Article 15 Stream Disturbance Permit is **not** required for the construction of the bridge as proposed and shown in the photo you provided.

Additionally, there are some downed trees and accumulated debris blocking a channel of the stream forcing water out into the floodplain just upstream from where you propose to construct the bridge. A permit is not required to remove these trees and debris either by hand or by using equipment staged above the top of bank while reaching into the stream. See the link below.

<https://www.dec.ny.gov/lands/92418.html>

If anyone has any questions feel free to contact me via email or phone.

Brian Drumm

Biologist II

Bureau of Ecosystem Health

NYSDEC Region 3

21 South Putt Corners Road

New Paltz, NY 12561

845-256-3091

brian.drumm@dec.ny.gov

