

**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 that 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 following sub-questions. If the answer to the initial question is “No,” proceed to the next question. Section F allows the project sponsor to identify and attach additional information. Section G requires the name and signature of the applicant or project sponsor to verify the information in Part 1 is accurate and complete.

**A. Project and Applicant/Sponsor Information.**

|                                                                                                                                                                                                |           |                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------|
| Name of Action or Project:<br>Renaissance A BESS LLC, Renaissance B BESS LLC, Renaissance C BESS LCC, and Renaissance D BESS LLC                                                               |           |                                         |
| Project Location (describe and attach a general location map):<br>370 Youngs Rd, Amherst, NY 14221                                                                                             |           |                                         |
| Brief Description of Proposed Action (include purpose or need):<br>Proposed construction of (4) 5 MW ac, 4-hour duration battery energy storage systems (BESS Projects) on a ~3.9 acre parcel. |           |                                         |
| Name of Applicant/Sponsor:<br>Renaissance BESS, LLC                                                                                                                                            |           | Telephone: 585-645-9739                 |
|                                                                                                                                                                                                |           | E-Mail: jkirisits@carson-power.com      |
| Address: 39 Broadway, 32nd Floor                                                                                                                                                               |           |                                         |
| City/PO: New York                                                                                                                                                                              | State: NY | Zip Code: 10006                         |
| Project Contact (if not same as sponsor; give name and title/role):<br>Joseph Kirisits / Development Operations Manager                                                                        |           | Telephone: 585-645-9739                 |
|                                                                                                                                                                                                |           | E-Mail: jkirisits@carson-power.com      |
| Address: 39 Broadway, 32nd Floor                                                                                                                                                               |           |                                         |
| City/PO: New York                                                                                                                                                                              | State: NY | Zip Code: 10006                         |
| Property Owner (if not same as sponsor):<br>RQC, Ltd.                                                                                                                                          |           | Telephone: 800-828-7840                 |
|                                                                                                                                                                                                |           | E-Mail: christopher@rembrandtcharms.com |
| Address: 370 Youngs Rd                                                                                                                                                                         |           |                                         |
| City/PO: Williamsville                                                                                                                                                                         | State: NY | Zip Code: 14221                         |

## 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<br>or Village Board of Trustees |                                                  |                                                                     |
| b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Planning Board or Commission     | Amherst Planning Board                           | 08/06/2026                                                          |
| c. City, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Village Zoning Board of Appeals          |                                                  |                                                                     |
| d. Other local agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                      | Amherst IDA                                      |                                                                     |
| e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                           | ECDPW (Curb cut) and ECDEP (239-m referral)      |                                                                     |
| f. Regional agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                         | BNIA/NFTA                                        |                                                                     |
| 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) that must be granted to enable the proposed action to proceed? ☐ Yes ☒ 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? ☒ Yes ☐ No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? ☒ Yes ☐ 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)? ☒ Yes ☐ No

If Yes, identify the plan(s):

NYS Heritage Areas: West Erie Canal Corridor

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? ☐ Yes ☒ No

If Yes, identify the plan(s):

d. Is the proposed action in a municipality with an adopted comprehensive or individual plan that addresses climate change? ☐ Yes ☒ No

If Yes, identify the elements of the plan that are relevant to the action:

### C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance? ☒ Yes ☐ No  
If Yes, what is the zoning classification(s) including any applicable overlay district?

Research and Development

b. Is the use permitted or allowed by a special or conditional use permit? ☒ Yes ☐ No

c. Is a zoning change requested as part of the proposed action? ☐ Yes ☒ No  
If Yes, what is the proposed new zoning for the site?

### C.4. Existing community services.

a. In what school district is the project site located? Williamsville Central School District

b. What police or other public protection forces serve the project site?  
Amherst Police Department

c. Which fire protection and emergency medical services serve the project site?  
Main-Transit Fire Protection District

d. What parks serve the project site?  
N/A

## 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)? Commercial and Industrial

b. a. Total acreage of the site of the proposed action? 3.9 acres  
b. Total acreage to be physically disturbed? 2.0 acres  
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 3.9 acres

c. Is the proposed action an expansion of an existing project or use? ☐ Yes ☒ No  
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? ☐ Yes ☒ 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? ☐ Yes ☐ No

iii. Number of lots proposed?

iv. Minimum and maximum proposed lot sizes? Minimum Maximum

| <p>e. Will the proposed action be constructed in multiple phases? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>i. If No, anticipated period of construction: <span style="float: right;">12 months</span></p> <p>ii. If Yes:</p> <ul style="list-style-type: none"> <li>• Total number of phases anticipated <span style="float: right;">_____</span></li> <li>• Anticipated commencement date of phase 1 (including demolition) <span style="float: right;">_____ month _____ year</span></li> <li>• Anticipated completion date of final phase <span style="float: right;">_____ month _____ year</span></li> <li>• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                   |                   |                     |                                       |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------|---------------------|---------------------------------------|--|-------------------|-------------------|---------------------|---------------------------------------|---------------|-------|-------|-------|-------|-----------------------------|-------|-------|-------|-------|
| <p>f. Does the project include new residential uses? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes, show numbers of units proposed.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%; text-align: center;"><u>One Family</u></th> <th style="width: 15%; text-align: center;"><u>Two Family</u></th> <th style="width: 15%; text-align: center;"><u>Three Family</u></th> <th style="width: 15%; text-align: center;"><u>Multiple Family (four or more)</u></th> </tr> </thead> <tbody> <tr> <td>Initial Phase</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>At completion of all phases</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                   |                   |                     |                                       |  | <u>One Family</u> | <u>Two Family</u> | <u>Three Family</u> | <u>Multiple Family (four or more)</u> | Initial Phase | _____ | _____ | _____ | _____ | At completion of all phases | _____ | _____ | _____ | _____ |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <u>One Family</u> | <u>Two Family</u> | <u>Three Family</u> | <u>Multiple Family (four or more)</u> |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| Initial Phase                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | _____             | _____             | _____               | _____                                 |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| At completion of all phases                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | _____             | _____             | _____               | _____                                 |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| <p>g. Does the proposed action include new non-residential construction (including expansions)? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes,</p> <p>i. Total number of structures 12 _____</p> <p>ii. Dimensions (in feet) of largest proposed structure: 9.167' height; 5.417' width; and 28.875' length</p> <p>iii. Approximate extent of building space to be heated or cooled: 0 _____ square feet</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                   |                   |                     |                                       |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| <p>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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes,</p> <p>i. Purpose of the impoundment: _____</p> <p>ii. If a water impoundment, the principal source of the water: <span style="float: right;"><input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> Other specify: _____</span></p> <p>iii. If other than water, identify the type of impounded/contained liquids and their source. _____</p> <p>iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres</p> <p>v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length</p> <p>vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                           |                   |                   |                     |                                       |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| <p><b>D.2. Project Operations</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   |                   |                     |                                       |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |
| <p>a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>(Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)</p> <p>If Yes:</p> <p>i. What is the purpose of the excavation or dredging? _____</p> <p>ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?</p> <ul style="list-style-type: none"> <li>• Volume (specify tons or cubic yards): _____</li> <li>• Over what duration of time? _____</li> </ul> <p>iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____</p> <p>iv. Will there be onsite dewatering or processing of excavated materials? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If yes, describe. _____</p> <p>v. What is the total area to be dredged or excavated? _____ acres</p> <p>vi. What is the maximum area to be worked at any one time? _____ acres</p> <p>vii. What would be the maximum depth of excavation or dredging? _____ feet</p> <p>viii. Will the excavation require blasting? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>ix. Summarize site reclamation goals and plan: _____</p> |                   |                   |                     |                                       |  |                   |                   |                     |                                       |               |       |       |       |       |                             |       |       |       |       |

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? ☐ Yes ☒ No

If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): \_\_\_\_\_

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: \_\_\_\_\_

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: \_\_\_\_\_

c. Will the proposed action use, or create a new demand for water? ☐ Yes ☒ No

If Yes:

i. Total anticipated water usage/demand per day: \_\_\_\_\_ 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: \_\_\_\_\_
- 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: \_\_\_\_\_
- Source(s) of supply for the district: \_\_\_\_\_

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: \_\_\_\_\_ 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): \_\_\_\_\_

iii. Will the proposed action use any existing public wastewater treatment facilities?

☐ Yes ☐ No

If Yes:

• Name of wastewater treatment plant to be used: \_\_\_\_\_

• Name of 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

• Do existing sewer lines serve the project site?

☐ Yes ☐ No

• Will a line extension within an existing district be necessary to serve the project?

☐ Yes ☐ No

If Yes:

• Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?

☐ Yes ☐ No

If Yes:

• Applicant/sponsor for new district: \_\_\_\_\_

• Date application submitted or anticipated: \_\_\_\_\_

• What is the receiving water for the wastewater discharge? \_\_\_\_\_

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: \_\_\_\_\_

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e., sheet flow) during construction or post construction?

☒ Yes ☐ No

If Yes:

i. How much impervious surface will the project create in relation to total size of project parcel?

\_\_\_\_\_ Square feet or .54 acres (impervious surface)

\_\_\_\_\_ Square feet or 3.9 acres (parcel size)

ii. Describe types of new point sources. Drainage will sheet flow into newly constructed dry swales and into an existing closed storm system.

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water, or off-site surface waters)?

Stormwater runoff will be directed into dryswales and into an existing closed stormwater system.

• If to surface waters, identify receiving water bodies or wetlands: \_\_\_\_\_

• Will stormwater runoff flow to adjacent properties?

☐ Yes ☒ No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? ☒ Yes ☐ No



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                             |                                                                                                                                                                                                     |                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>k. Will the proposed action (for commercial or industrial projects only) generate new or additional energy demand? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes:</p> <p>i. Estimate annual electricity demand during operation of the proposed action: _____</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): _____</p> <p>iii. Will the proposed action require a new, or an upgrade, to an existing substation? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></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"> <li>• Monday - Friday: <u>7am - 7pm</u></li> <li>• Saturday: _____</li> <li>• Sunday: _____</li> <li>• Holidays: _____</li> </ul> </td> <td style="width: 50%; vertical-align: top;"> <p>ii. During Operations:</p> <ul style="list-style-type: none"> <li>• Monday - Friday: <u>24hrs / day</u></li> <li>• Saturday: <u>24hrs / day</u></li> <li>• Sunday: <u>24hrs / day</u></li> <li>• Holidays: <u>24hrs / day</u></li> </ul> </td> </tr> </table>                                 |                                                                                                                                                                                                                                             | <p>i. During Construction:</p> <ul style="list-style-type: none"> <li>• Monday - Friday: <u>7am - 7pm</u></li> <li>• Saturday: _____</li> <li>• Sunday: _____</li> <li>• Holidays: _____</li> </ul> | <p>ii. During Operations:</p> <ul style="list-style-type: none"> <li>• Monday - Friday: <u>24hrs / day</u></li> <li>• Saturday: <u>24hrs / day</u></li> <li>• Sunday: <u>24hrs / day</u></li> <li>• Holidays: <u>24hrs / day</u></li> </ul> |
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| <p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:<br/>Construction Noise M-F 7am to 7pm, Operational Noise S-S, 12am to 12am (24 hrs)</p> <p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span><br/>Describe: _____</p>                               |                                                                                                                                                                                                                                             |                                                                                                                                                                                                     |                                                                                                                                                                                                                                             |
| <p>n. Will the proposed action have outdoor lighting? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br/>Describe: _____</p>                                                                                                                                                    |                                                                                                                                                                                                                                             |                                                                                                                                                                                                     |                                                                                                                                                                                                                                             |
| <p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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, insecticide) during construction or operation? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes:</p> <p>i. Describe proposed treatment(s): _____</p> <p>ii. Will the proposed action use Integrated Pest Management Practices? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>                                                                                                                                                                          |                                                                                                                                                                                                                                             |                                                                                                                                                                                                     |                                                                                                                                                                                                                                             |

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? ☐ Yes ☒ No

If Yes:

i. Describe any solid waste(s) to be generated during construction or operation of the facility:

- Construction: \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)
- Operation : \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:

- Construction: \_\_\_\_\_
- Operation: \_\_\_\_\_

iii. Proposed disposal methods/facilities for solid waste generated on-site:

- Construction: \_\_\_\_\_
- Operation: \_\_\_\_\_

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

| <b>E.1. Land uses on and surrounding the project site</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                                     |                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------|-----------------------|
| <p>a. Existing land uses.</p> <p style="margin-left: 20px;">i. Check all uses that occur on, adjoining and near the project site.</p> <div style="display: flex; justify-content: space-between; margin-left: 20px;"> <span><input type="checkbox"/> Urban</span> <span><input type="checkbox"/> Industrial</span> <span><input checked="" type="checkbox"/> Commercial</span> <span><input type="checkbox"/> Residential (suburban)</span> <span><input type="checkbox"/> Rural (non-farm)</span> </div> <div style="display: flex; justify-content: space-between; margin-left: 20px;"> <span><input type="checkbox"/> Forest</span> <span><input type="checkbox"/> Agriculture</span> <span><input type="checkbox"/> Aquatic</span> <span><input checked="" type="checkbox"/> Other (specify): Educational Campus (ECC)</span> </div> <p style="margin-left: 20px;">ii. If mix of uses, generally describe:</p> |                    |                                     |                       |
| b. Land uses and cover types on the project site.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |                                     |                       |
| Land use or<br>Cover type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Current<br>Acreage | Acreage After<br>Project Completion | Change<br>(Acres +/-) |
| <ul style="list-style-type: none"> <li>• Roads, buildings, and other paved or impervious surfaces (total)                             <div style="margin-left: 20px;"> <ul style="list-style-type: none"> <li>• Industrial or manufacturing</li> <li>• Commercial</li> <li>• Residential</li> </ul> </div> </li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1.11               | 1.62                                | +0.51                 |
| • Forested                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                    |                                     |                       |
| <ul style="list-style-type: none"> <li>• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2.69               | 1.94                                | -0.75                 |
| <ul style="list-style-type: none"> <li>• Agricultural (includes active orchards, field, greenhouse, etc.)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |                                     |                       |
| <ul style="list-style-type: none"> <li>• Surface water features (lakes, ponds, streams, rivers, etc.)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                                     |                       |
| <ul style="list-style-type: none"> <li>• Wetlands (freshwater or tidal)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                     |                       |
| <ul style="list-style-type: none"> <li>• Non-vegetated (bare rock, earth, or fill)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                                     |                       |
| <ul style="list-style-type: none"> <li>• Other, Describe: <u>Porous Gravel</u></li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0                  | 0.24                                | +0.24                 |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| c. Is the project site presently used by members of the community for public recreation?<br>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?<br>If Yes,<br>i. Identify facilities:<br>Camp Good Days & Special Times, YMCA, ECC, and Russell J. Salvatore Baseball Park                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                 |
| e. Does the project site contain an existing dam?<br>If Yes:<br>i. Dimensions of the dam and impoundment: <ul style="list-style-type: none"> <li>• Dam height: _____ feet</li> <li>• Dam length: _____ feet</li> <li>• Surface area: _____ acres</li> <li>• Volume impounded: _____ gallons OR acre-feet</li> </ul> ii. Dam's existing hazard classification: _____<br>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 that is now, or was at one time, used as a solid waste management facility?<br>If Yes:<br>i. Has the facility been formally closed?<br><ul style="list-style-type: none"> <li>• If Yes, cite sources/documentation: _____</li> </ul> ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____<br>iii. Describe any development constraints due to the prior solid waste activities: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><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?<br>If Yes:<br>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?<br>If Yes:<br>i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input type="checkbox"/> Yes – Spills Incidents database<br/> <input type="checkbox"/> Yes – Environmental Site Remediation database<br/> <input type="checkbox"/> Neither database </div> <div style="width: 50%;"> Provide DEC ID number(s): _____<br/> Provide DEC ID number(s): _____ </div> </div> ii. If site has been subject of RCRA corrective activities, describe control measures: _____<br>iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?<br>If Yes, provide DEC ID number(s): _____<br>iv. If Yes to (i), (ii) or (iii) above, describe current status of site(s): _____ | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><input type="checkbox"/> Yes <input type="checkbox"/> No |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| v. Is the project site subject to an institutional control limiting property uses? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                                               |                        |
| <ul style="list-style-type: none"> <li>• If Yes, DEC site ID number: _____</li> <li>• Describe the type of institutional control (e.g., deed restriction or easement): _____</li> <li>• Describe any use limitations: _____</li> <li>• Describe any engineering controls: _____</li> <li>• Will the project affect the institutional or engineering controls in place? <span style="float: right;"><input type="checkbox"/>Yes <input type="checkbox"/>No</span></li> <li>• Explain: _____</li> </ul> |                        |
| <b>E.2. Natural Resources On or Near Project Site</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |
| a. What is the average depth to bedrock on the project site? <u>6.5+</u> feet                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |
| b. Are there bedrock outcroppings on the project site? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span><br>If Yes, what proportion of the site is comprised of bedrock outcroppings? _____%                                                                                                                                                                                                                                                       |                        |
| c. Predominant soil type(s) present on project site:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |
| BhB - Benson-Rock outcrop complex                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u>81.8</u> %          |
| WaA - Wassaic silt loam                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>18.2</u> %          |
| _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | _____ %                |
| d. What is the average depth to the water table on the project site? Average: <u>4+</u> feet                                                                                                                                                                                                                                                                                                                                                                                                          |                        |
| e. Drainage status of project site soils:                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |
| <input checked="" type="checkbox"/> Well Drained:                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u>18.2</u> % of site  |
| <input checked="" type="checkbox"/> Moderately Well Drained:                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>81.8</u> % of site  |
| <input type="checkbox"/> Poorly Drained                                                                                                                                                                                                                                                                                                                                                                                                                                                               | _____ % of site        |
| f. Approximate proportion of proposed action site with slopes:                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |
| <input checked="" type="checkbox"/> 0-10%:                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <u>100</u> % of site   |
| <input type="checkbox"/> 10-15%:                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | _____ % of site        |
| <input type="checkbox"/> 15% or greater:                                                                                                                                                                                                                                                                                                                                                                                                                                                              | _____ % of site        |
| g. Are there any unique geologic features on the project site? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span><br>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)? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                      |                        |
| ii. Do any wetlands or other waterbodies adjoin the project site? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                                                                |                        |
| If Yes to either <i>i</i> or <i>ii</i> , 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? <span style="float: right;"><input type="checkbox"/>Yes <input type="checkbox"/>No</span>                                                                                                                                                                                                                                                                           |                        |
| iv. For each identified regulated wetland and waterbody on the project site, provide the following information:                                                                                                                                                                                                                                                                                                                                                                                       |                        |
| • Streams: Name _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Classification _____   |
| • Lakes or Ponds: Name _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Classification _____   |
| • Wetlands: Name _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Approximate Size _____ |
| • 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? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                            |                        |
| If Yes, name of impaired water body/bodies and basis for listing as impaired: _____                                                                                                                                                                                                                                                                                                                                                                                                                   |                        |
| i. Is the project site in a designated Floodway? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                                                                                 |                        |
| j. Is the project site in the 100-year Floodplain? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                                                                               |                        |
| k. Is the project site in the 500-year Floodplain? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                                                                               |                        |
| l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? <span style="float: right;"><input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</span>                                                                                                                                                                                                                                                                                      |                        |
| If Yes:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        |
| i. Name of aquifer: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>m. Identify the predominant wildlife species that occupy or use the project site: _____</p> <p>_____</p> <p>_____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <p>n. Does the project site contain a designated significant natural community? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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"> <li>• Currently: _____ acres</li> <li>• Following completion of project as proposed: _____ acres</li> <li>• Gain or loss (indicate + or -): _____ acres</li> </ul> |  |
| <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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing (endangered or threatened): _____</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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes, give a brief description of how the proposed action may affect that use: _____</p>                                                                                                                                                                                                                                                                                                                                                                                  |  |
| <p><b>E.3. Designated Public Resources On or Near Project Site</b></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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If Yes, provide county plus district name/number: _____</p>                                                                                                                                                                                                                                                                                                                                       |  |
| <p>b. Are agricultural lands consisting of highly productive soils present? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></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>                                                                                                                                                                                                                                                                        |  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                             |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|---------------------------------|------------------------------|-----------------------------|-------------------------------------|------------------------------|-----------------------------|-------------------------------------------------------|------------------------------|-----------------------------|------------------------------------------------|------------------------------|-----------------------------|-------------------|------------------------------|-----------------------------|--|
| <p>e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYSO of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of historic/archaeological resource:      <input type="checkbox"/> Archaeological Site      <input type="checkbox"/> Historic Building or District</p> <p style="margin-left: 20px;">ii. Name: _____</p> <p style="margin-left: 20px;">iii. Brief description of attributes on which listing is based: _____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>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 New York State Historic Preservation Office (SHPO) archaeological site inventory?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>g. Have additional archaeological or historic site(s) or resources been identified on the project site?</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe possible resource(s): _____</p> <p style="margin-left: 20px;">ii. Basis for identification: _____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic, or aesthetic resource?</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify resource: <u>Amherst State Park</u></p> <p style="margin-left: 20px;">ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail, or scenic byway, etc.): <u>State Park</u></p> <p style="margin-left: 20px;">iii. Distance between project and resource: <u>1.7</u> miles.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666?</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify the name of the river and its designation: _____</p> <p style="margin-left: 20px;">ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><br><br><input type="checkbox"/> Yes <input type="checkbox"/> No |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <b>E.4. Disadvantaged Communities Designated Pursuant to ECL Article 75</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                             |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>a. Is the project located within, or within ½ mile of, a disadvantaged community?</p> <p>If No, could impacts(see examples below in E.4.b) from the project affect a disadvantaged community?</p> <p style="margin-left: 20px;">If Yes to either question in E.4.a, answer the remaining questions in this section.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><input type="checkbox"/> Yes <input type="checkbox"/> No         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>b. Will there be direct or indirect impacts that may affect a disadvantaged community, such as those listed below?</p> <p style="margin-left: 20px;">i. new noise sources or expansions/modification of existing noise sources;</p> <p style="margin-left: 40px;">- noise from operational sources</p> <p style="margin-left: 40px;">- noise from construction activities</p> <p style="margin-left: 20px;">ii. emissions of air pollutants including, mobile emissions;</p> <p style="margin-left: 20px;">iii. wastewater discharges;</p> <p style="margin-left: 20px;">iv. generation of odors;</p> <p style="margin-left: 20px;">v. light pollution;</p> <p style="margin-left: 20px;">vi. new or modified radiation sources;</p> <p style="margin-left: 20px;">vii. new or modified sources of solid waste generation, management, or disposal.</p> <p style="margin-left: 20px;">If Yes, describe the impacts:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                         |                              |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| <p>c. Do any of the State agency approvals identified in question B.g include any of the following DEC permits?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">State Pollutant Discharge Elimination System (SPDES)</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Yes</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> No</td> </tr> <tr> <td>Solid Waste Management Facility</td> <td style="text-align: center;"><input type="checkbox"/> Yes</td> <td style="text-align: center;"><input type="checkbox"/> No</td> </tr> <tr> <td>Hazardous Waste Management Facility</td> <td style="text-align: center;"><input type="checkbox"/> Yes</td> <td style="text-align: center;"><input type="checkbox"/> No</td> </tr> <tr> <td>Air Pollution Control (Title V or Air State Facility)</td> <td style="text-align: center;"><input type="checkbox"/> Yes</td> <td style="text-align: center;"><input type="checkbox"/> No</td> </tr> <tr> <td>Water Withdrawal over 20 MGD for Cooling Water</td> <td style="text-align: center;"><input type="checkbox"/> Yes</td> <td style="text-align: center;"><input type="checkbox"/> No</td> </tr> <tr> <td>Waste Transporter</td> <td style="text-align: center;"><input type="checkbox"/> Yes</td> <td style="text-align: center;"><input type="checkbox"/> No</td> </tr> </table> | State Pollutant Discharge Elimination System (SPDES)                                                                                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Solid Waste Management Facility | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Hazardous Waste Management Facility | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Air Pollution Control (Title V or Air State Facility) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Water Withdrawal over 20 MGD for Cooling Water | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Waste Transporter | <input type="checkbox"/> Yes | <input type="checkbox"/> No |  |
| State Pollutant Discharge Elimination System (SPDES)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| Solid Waste Management Facility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| Hazardous Waste Management Facility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| Air Pollution Control (Title V or Air State Facility)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| Water Withdrawal over 20 MGD for Cooling Water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |
| Waste Transporter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes                                                                                                                | <input type="checkbox"/> No  |                             |                                 |                              |                             |                                     |                              |                             |                                                       |                              |                             |                                                |                              |                             |                   |                              |                             |  |

### E.5 Future Physical Climate Risks

Will the proposed action be vulnerable to the following future physical climate risks under current or projected future conditions:

- a. Is the proposed action vulnerable to damage from a projected 100-year flood? ☐ Yes ☒ No  
b. Is the proposed action vulnerable to damage from a projected 500-year flood? ☐ Yes ☒ No  
c. Is the proposed action in an area potentially affected by sea level rise? ☐ Yes ☒ No

d. Will the proposed action increase the vulnerability of human or ecological communities to the following:

- i. drought? ☐ Yes ☒ No  
ii. temperature extremes (hot or cold)? ☐ Yes ☒ No  
iii. extreme storms, including high winds? ☐ Yes ☒ No  
iv. landslides? ☐ Yes ☒ No  
v. coastal erosion? ☐ Yes ☒ No  
vi. stormwater flooding? ☐ Yes ☒ No  
vii. other climate or weather hazards? ☐ Yes ☒ No If Yes, describe: \_\_\_\_\_

### F. Additional Information

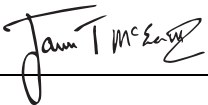
Attach any additional information which may be needed to clarify your project.

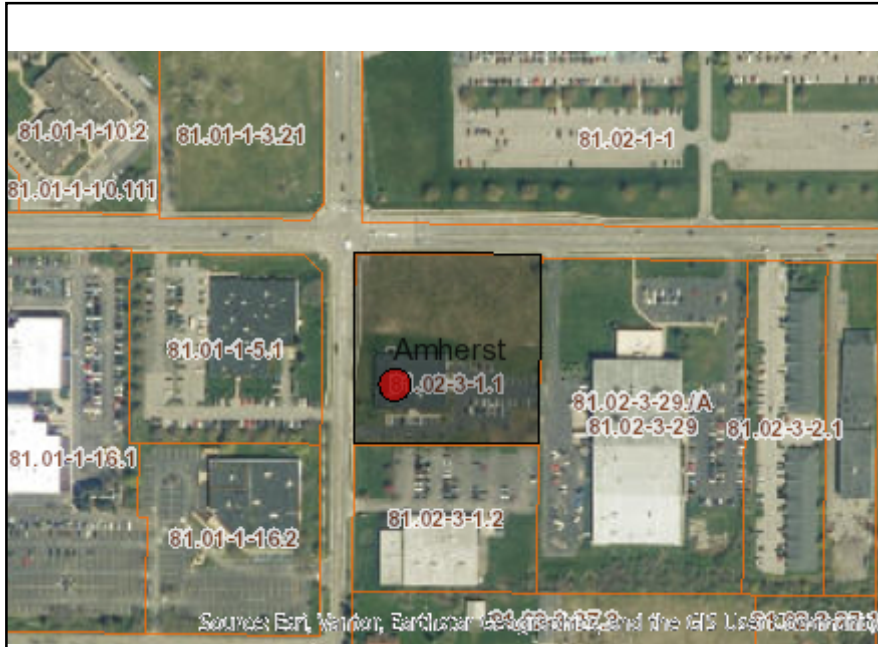
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

### G. Verification

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

Applicant/Sponsor Name James McEnaney, PE Date September 17, 2026

Signature  Title Principal Engineer



**Disclaimer:** The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources to confirm data provided by the Mapper or to obtain data not provided by the Mapper.



|                                                                                    |                                                                                                         |
|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| B.i.i [Coastal or Waterfront Area]                                                 | No                                                                                                      |
| B.i.ii [Local Waterfront Revitalization Area]                                      | No                                                                                                      |
| C.2.b. [Special Planning District]                                                 | Yes - Digital mapping data are not available for all Special Planning Districts. Refer to EAF Workbook. |
| C.2.b. [Special Planning District - Name]                                          | NYS Heritage Areas: West Erie Canal Corridor                                                            |
| E.1.h [DEC Spills or Remediation Site - Potential Contamination History]           | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.1.h.i [DEC Spills or Remediation Site - Listed]                                  | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.1.h.iii [Within 2,000' of DEC Remediation Site]                                  | No                                                                                                      |
| E.2.g [Unique Geologic Features]                                                   | No                                                                                                      |
| E.2.h.i [Surface Water Features]                                                   | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.2.h.ii [Surface Water Features]                                                  | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.2.h.iii [Surface Water Features]                                                 | Digital mapping data are not available or are incomplete. Refer to EAF Workbook.                        |
| E.2.h.v [Impaired Water Bodies]                                                    | No                                                                                                      |
| E.2.i. [Floodway]                                                                  | No                                                                                                      |
| E.2.j. [100 Year Floodplain]                                                       | No                                                                                                      |
| E.2.k. [500 Year Floodplain]                                                       | No                                                                                                      |
| E.2.l. [Aquifers]                                                                  | No                                                                                                      |
| E.2.n. [Natural Communities]                                                       | No                                                                                                      |

|                                                                                |                                                                                  |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| E.2.o. [Endangered or Threatened Species]                                      | No                                                                               |
| E.2.p. [Rare Plants or Animals]                                                | No                                                                               |
| E.3.a. [Agricultural District]                                                 | No                                                                               |
| E.3.c. [National Natural Landmark]                                             | No                                                                               |
| E.3.d [Critical Environmental Area]                                            | No                                                                               |
| E.3.e. [National or State Register of Historic Places or State Eligible Sites] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.3.f. [Archeological Sites]                                                   | Yes                                                                              |
| E.3.i. [Designated River Corridor]                                             | No                                                                               |
| E.4.a [Disadvantaged Community]                                                | No                                                                               |