

**NORTH GREENBUSH PLANNING BOARD
DOCUMENTATION OF APPLICATION PACKET DISTRIBUTION**

Applicants for new or revised Site Plan applications, Minor or for Major Subdivision, must submit this completed checklist with application. Information needs to be sent to the agencies below: Mark the method it was sent to each agency.

PROJECT NAME: 27 W Sand Lake Rd. Conversion to Restaurant CONTACT PERSON: Ariel Saati
PHONE: 518-588-9279 E-MAIL: ari-saati@gmail.com

ELECTRONIC DOCUMENTS ARE PREFERRED

CHECK ONE FOR EACH	<u>Hand Delivery</u>	<u>Electronic Delivery</u>	<u>Mail</u>	<u>Date</u>
1. Laberge Group (only at the direction of the Building Department)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>3/11/24</u>
4 Computer Drive West, Albany, NY 12205 <u>Rflaberge@labergegroup.com</u>				
2. North Greenbush Police:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>3/11/24</u>
133 Bloomingrove Drive, Troy, NY 12180 <u>Info@NorthGreenbushPolice.org</u>				
3. North Greenbush Fire Dist # 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>3/11/24</u>
350 North Greenbush Road, Troy, NY 12180 Must hand deliver and also send electronic copy to: <u>adminassistant@ngfd.org</u>				
4. North Greenbush Ambulance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>3/11/24</u>
409 Main Avenue, Wynantskill, NY 12198 <u>president@northgreenbushambulance.com</u>				

WHEN NECESSARY – If permits or approvals from these departments will be needed as part of the project, please send to:

5. North Greenbush Highway Dept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>mmartinez@northgreenbush.org</u>				
6. Renss. County Highway Dept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>klangley@rensco.com</u>				
7. NYS DOT (Region 1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
50 Wolf Road, Albany, NY 12232, Attn: Guy Tedesco PE <u>Gaetano.Tedesco@dot.ny.us</u>				
8. NYSDOT (Renss. County Residency)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
288 Troy Road, Rensselaer, NY 12144, Attn: Mark Saunders PE Resident Engineer <u>Mark.Saunders@dot.ny.us</u>				
9. Renss. County Health Dept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>Relder@rensco.com</u>				
10. Renss. County Sewer Dept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>dgardner@rensco.com</u> Water Street, Troy, NY 12180, Attn: Derrick Gardner				

The North Greenbush Building Department needs an ELECTRONIC COPY, a PAPER original and 9 PAPER copies of all applications and folded maps. **HAND IN THIS COMPLETED cover sheet with your documents.**

BY: Ariel Saati [Signature] 3/11/24
PRINT NAME SIGNATURE DATE


TOWN OF NORTH GREENBUSH
BUILDING DEPARTMENT
2 DOUGLAS STREET, WYNANTSKILL, NY 12198-7561
TELEPHONE (518) 283-2714
FAX (518) 286-2261

APPLICATION FOR SITE PLAN REVIEW

The North Greenbush Planning Board Cover Page must be attached & submitted with this application.
The Application documentation packet distribution list cover sheet is on the website with the applications.

- Modification to existing plan
 New Site Plan

Name of proposed development: 27 West Sand Lake Rd. Conversion to Restaurant

Applicant:
Name: Arieli Saati
Address: 28 Buchhe Rd.
Troy, NY
Telephone: 518-588-9279
E-Mail: Ari.Saati@gmail.com
Fax#: _____
SIGNATURE: 

Plans Prepared by:
Name: _____
Address: _____
Telephone: _____
E-Mail: _____
Fax#: _____

Owner (if different)
Name: _____
Address: _____
Telephone: _____
E-Mail: _____
Fax#: _____
SIGNATURE: _____

Person Authorized to Represent:
Name: _____
Address: _____
Telephone: _____
E-Mail: _____
Fax#: _____

Ownership intentions (i.e., purchase options): To purchase 27 West Sand Lake Road
and convert it to a full service restaurant.

Location of site: 27 West Sand Lake Road, Wynantskill, NY 12198

Tax map description: Parcel # 3200-124.10-20-1
Section: _____ Block: _____ Lot: _____

Current zoning classification: H

Water District: _____ Sewer District: _____

State and federal permits needed (list type and appropriate department): _____

Current use(s) of site: Medical Office

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Proposed use(s) of site: Convert to restaurant

Total site area (square feet or acres): .69 Acre

Anticipated construction time: 3-6 months

Will development be staged? No

Current land use of site (agriculture, commercial, undeveloped, etc.): Commercial

Current condition of site (buildings, brush, etc.): Excellent Condition

Character of surrounding lands (suburban, agriculture, wetlands, etc.): Suburban

Estimated cost of proposed improvement: \$ 400,000

Anticipated increase in number of residents, shoppers, employees, etc. (as applicable): _____

Describe proposed use, including primary and secondary uses; ground floor area; height; and number of stories for each building:

___ for residential buildings include number of dwellings units by size (efficiency, one-bedroom, two-bedroom, three or more bedrooms) and number of parking spaces to be provided.

___ for non-residential buildings, include total floor area and total sales area; number of automobile and truck parking spaces.

___ other proposal structures

(Use separate sheet if needed)

We intend to purchase the property, gut the interior, and convert the space to a restaurant. The size and footprint of the building will remain the same. We plan to expand the parking lot onto a portion of the lot adjacent to Sharpe Ave. This will bring the current number of parking spaces, 20, to roughly 35.

Short Environmental Assessment Form

Instructions for Completing

Please refer to this link for step by step assistance: <http://www.dec.ny.gov/permits/90156.html>

Part 1- Project information. The applicant or project sponsor is reliable for the completion of part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attached additional pages as necessary to supplement any item.

Part 1- Project and Sponsor Information

Name of Action or Project: Conversion of Medical Office to Restaurant

Project Location (Describe, and attach a location map): 27 West Sand Lake Rd, Wyanntskill, NY, 12198

Brief Description of Proposed Action: We hope to purchase this property, and convert what is now a medical office to a restaurant.

Name of Applicant or Sponsor: Ariel Saati Telephone: 518-588-9279
E-Mail: ari.saati@gmail.com

Address: 28 Buchbee Rd., Troy, NY, 12181

City/PO: Troy State: NY Zip Code: 12180

1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to part 2. If no, continue to question 2.	YES	NO
		↓
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If yes, list agency(s) name and permit or approval:	YES	NO
		↓

3. a. Total acreage of the site of the proposed action? .69 Acres
 b. Total acreage to be physically disturbed? 3100 sq ft Acres
 c. Total acreage (Project site and any contiguous properties) owned or controlled by the applicant or project sponsor? .64 Acres

4. Check all land uses that occur on, adjoining and near the proposed action.

Urban Rural Industrial Commercial Residential (suburban)

Forest Agriculture Aquatic Other (Specify): _____

Parkland

5. Is the proposed action, a. A permitted use under the Zoning regulations? b. Consistent with the adopted comprehensive plan?	YES X	NO
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	YES X	NO
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If yes, identify:	YES	NO X
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	YES	NO X X X
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies:	YES X	NO
10. Will the proposed action connect to an existing public/private water supply? If no, describe method for providing wastewater treatment:	YES X	NO
11. Will the proposed action connect to existing wastewater utilities? If no, describe method for providing wastewater treatment:	YES X	NO
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic places? b. Is the proposed action located in an archeological sensitive area?	YES	NO X X
13. a. does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other water bodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or water body? If yes, identify the wetland or water body and extent of alterations in square feet or acres:	YES	NO X X
14. Identify the typical habit types that occur on, or are likely to be found on the project site. Check all that apply:	YES	NO X
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	YES	NO X
16. Is this project site located in the 100 year flood plan?	YES	NO X
17. Will the proposed action create storm weather discharge, either from point or non- point sources?	YES	NO X

If yes,
a. Will storm water discharge flow to adjacent properties?

b. Will storm water discharges be directed to establish conveyance systems (runoff and storm drains)?

If yes, briefly describe _____

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If yes, explain purpose and size: _____	YES	NO
		X

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If yes, describe: _____	YES	NO
		X

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If yes, describe: _____	YES	NO
		X

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/ Sponsor name: Arif Saati
Date: 3/3/24
Signature: _____

Part 2- Impact Assessment. The Leaf Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "have my responses been reasonable considering the scale and context of the proposed action?"

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

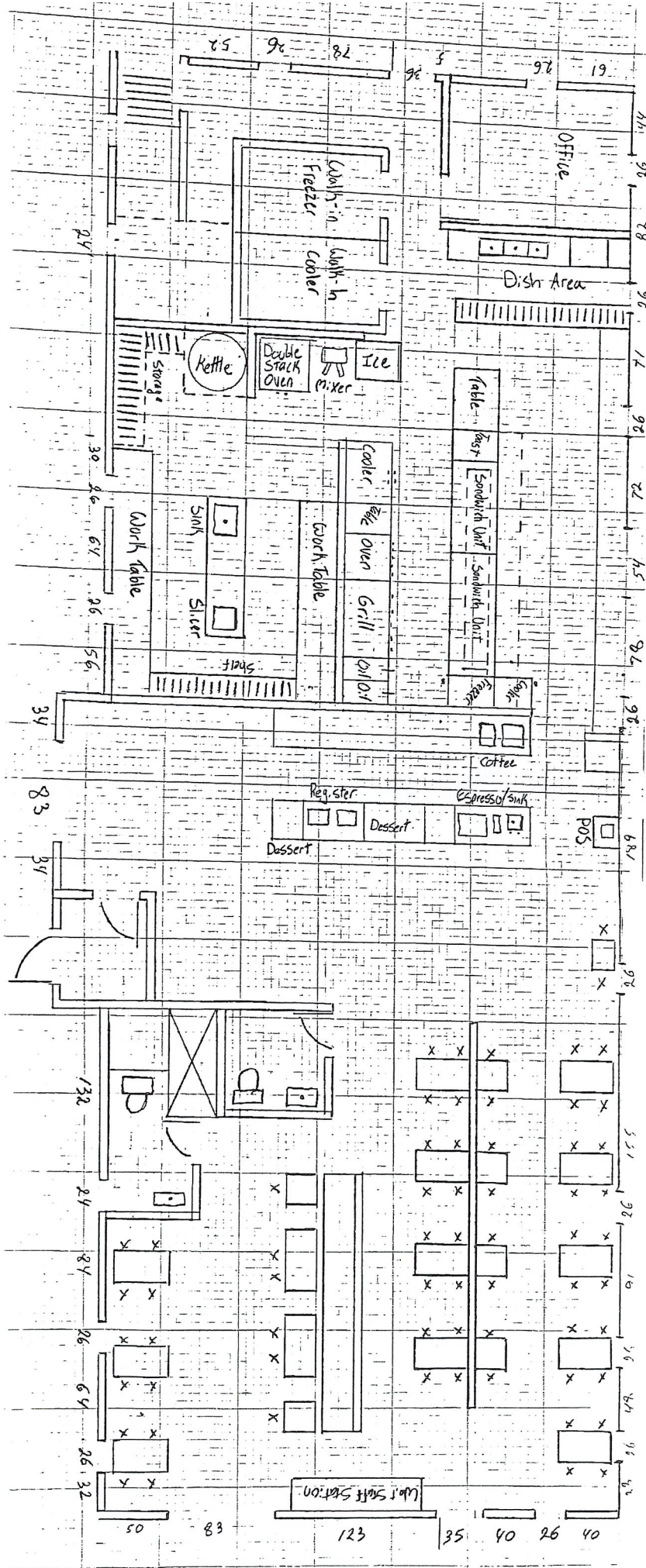
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problems?

11. Will the proposed action create a hazard to environmental resources or human health? 2

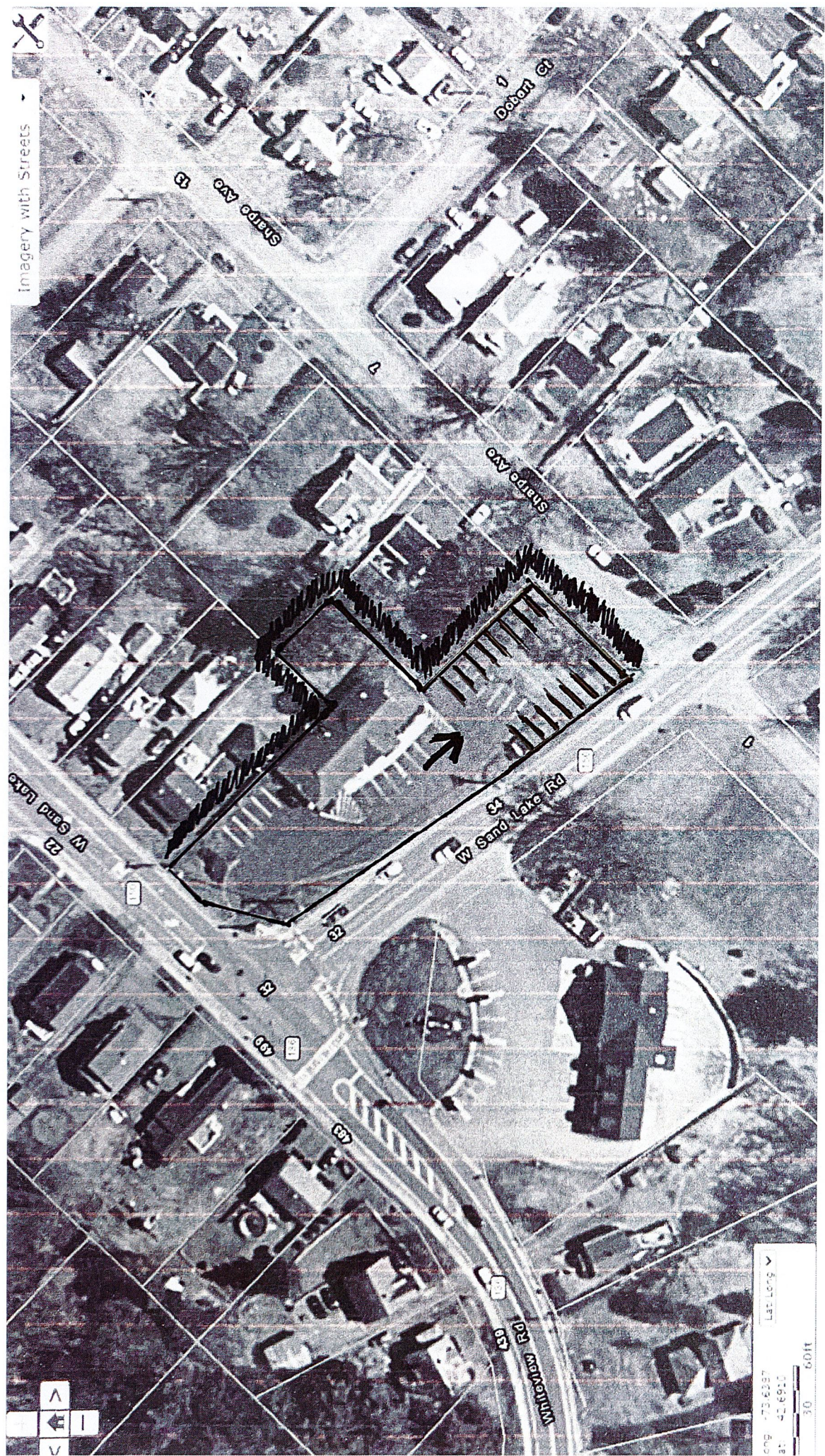
Part 3- Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significance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

<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.	
_____ Name of Lead Agency	_____ Date
_____ Print or Type Name of Responsible Officer in Lead Agency	_____ Title of Responsible Officer
_____ Signature of Responsible Officer in Lead Agency	_____ Signature of Preparer (if different from Responsible Officer)





Imagery with Streets



500 ft
0.5637 Lat Long
42.6920 Lat
30 60ft