

Town of Queensbury Building & Codes

**SEPTIC VARIANCE APPLICATION**

Submittal: 1 original & 8 copies of the completed application package

<u>Office Use Only</u>	
Received:	_____
Tax Map ID:	_____
Permit No.:	_____
Permit Fee:	\$ _____
Approvals:	_____

Owner _____	Owner's Agent _____
Address _____	Address _____
Phone _____	Phone _____

Directions to Site: \_\_\_\_\_

Distance from well on property to septic system (if applicable) \_\_\_\_\_ feet

Is it possible to install a conforming septic system on this property?  Yes  No

If YES, please explain and attach diagram: \_\_\_\_\_  
\_\_\_\_\_

Does proposed system meet setback requirements for distance from wells & septic systems on neighboring properties?  
 Yes  No If NO, please explain: \_\_\_\_\_  
\_\_\_\_\_

Is proposed system to be installed over a parking area?  Yes  No

Section of the Sanitary Sewage Ordinance from which you are seeking the variance: (example: leaching system will be 89 ft. from well in lieu of required 100 ft. separate distance):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List the names, parcel addresses, and tax map numbers of all adjoining property owners. You may obtain tax map numbers from the Assessor's Office as well as the names and addresses:

**North**      Name      \_\_\_\_\_  
                 Address      \_\_\_\_\_  
                 Tax Map ID      \_\_\_\_\_

**South**      Name:      \_\_\_\_\_  
                 Address      \_\_\_\_\_  
                 Tax Map ID      \_\_\_\_\_

**East**      Name:      \_\_\_\_\_  
                 Address      \_\_\_\_\_  
                 Tax Map ID      \_\_\_\_\_

**West**      Name:      \_\_\_\_\_  
                 Address      \_\_\_\_\_  
                 Tax Map ID      \_\_\_\_\_

**OWNER STATEMENT**

I, we do hereby relieve the Town of Queensbury from any liabilities on the plumbing and septic system located at:  
\_\_\_\_\_

I, we realize that putting the well, septic tank, or leaching system less than the required \_\_\_\_\_ feet from the \_\_\_\_\_ may increase risk of pollution.

Owner-Print Name: \_\_\_\_\_

Owner-Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NEIGHBOR OR TENANT RELEASE STATEMENT** (if applicable)

I, we do hereby relieve the Town of Queensbury from any liabilities on the plumbing and septic system located at:  
\_\_\_\_\_

I, we realize that putting the septic tank or leaching system less than the required \_\_\_\_\_ feet from the \_\_\_\_\_ may increase risk of pollution.

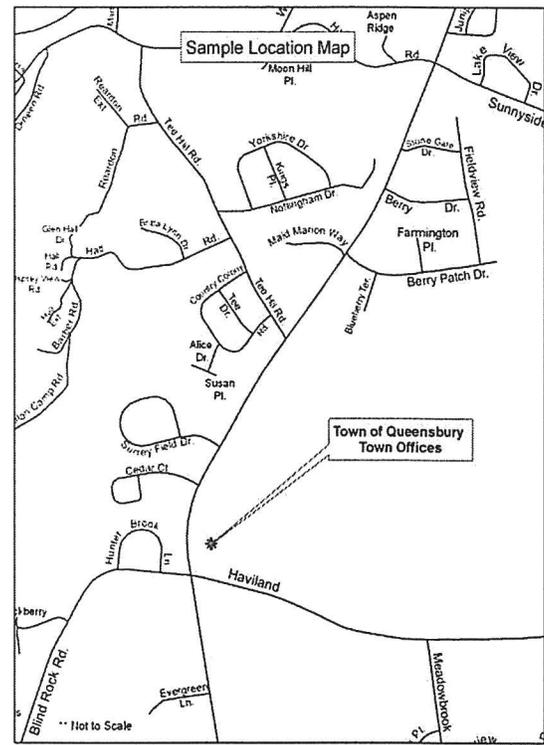
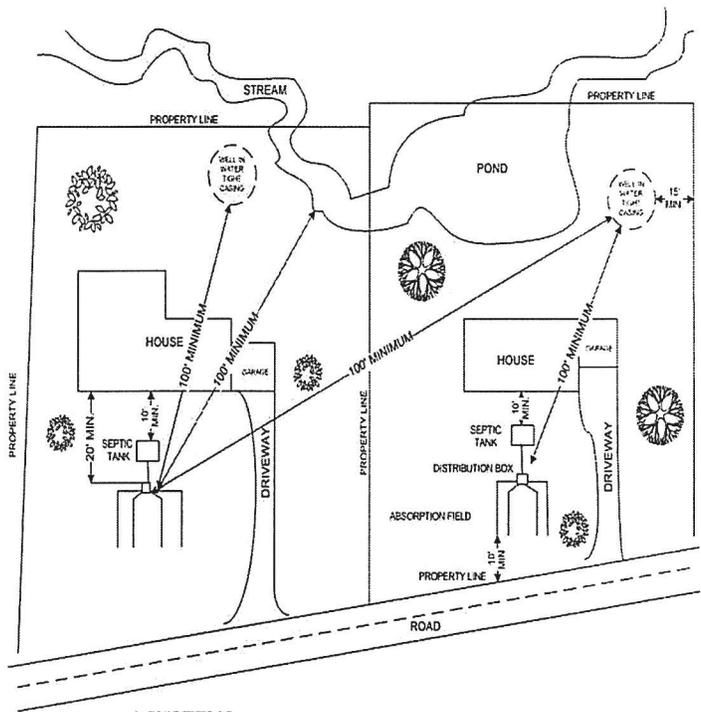
Neighbor or Tenant-Print Name: \_\_\_\_\_

Neighbor or Tenant-Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE ATTACH THE FOLLOWING TO YOUR APPLICATION:**

1. Location map showing the site within the Town of Queensbury;
2. Plot plan showing existing and proposed features of the property including:
  - a) Lot dimensions
  - b) North arrow and scale: 1 inch = 40 feet
  - c) Location & dimensions of existing and proposed buildings, showing setback distances and uses
  - d) Parking layout to scale (if applicable)
  - e) Physical features (streets, steep slopes, lakes, wetlands, etc.)
  - f) Location of all wells and septic systems on neighboring properties
  - g) Adjacent ownership
  - h) All properties within 500 feet.

A sample plot plan and location are shown below



**617.20**  
**Appendix B**  
**Short Environmental Assessment Form**

**Instructions for Completing**

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

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

<b>Part 1 - Project and Sponsor Information</b>				
Name of Action or Project:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:		Telephone:		
		E-Mail:		
Address:				
City/PO:		State:	Zip Code:	
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.			<b>NO</b>	<b>YES</b>
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:			<b>NO</b>	<b>YES</b>
3.a. Total acreage of the site of the proposed action?		_____ acres		
b. Total acreage to be physically disturbed?		_____ acres		
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres		
4. Check all land uses that occur on, adjoining and near the proposed action.				
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)				
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____				
<input type="checkbox"/> Parkland				

5. Is the proposed action, a. A permitted use under the zoning regulations?	<b>NO</b>	<b>YES</b>	<b>N/A</b>
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<b>NO</b>	<b>YES</b>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<b>NO</b>	<b>YES</b>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	<b>NO</b>	<b>YES</b>	
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 site of the proposed action?			
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: _____	<b>NO</b>	<b>YES</b>	
10. Will the proposed action connect to an existing public/private water supply? If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES If No, describe method for providing potable water: _____	<b>NO</b>	<b>YES</b>	
11. Will the proposed action connect to existing wastewater utilities? If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES If No, describe method for providing wastewater treatment: _____	<b>NO</b>	<b>YES</b>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	<b>NO</b>	<b>YES</b>	
b. Is the proposed action located in an archeological sensitive area?			
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<b>NO</b>	<b>YES</b>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	<b>NO</b>	<b>YES</b>	
16. Is the project site located in the 100 year flood plain?	<b>NO</b>	<b>YES</b>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES  b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<b>NO</b>	<b>YES</b>	

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: _____ _____ _____	<b>NO</b>	<b>YES</b>
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: _____ _____ _____	<b>NO</b>	<b>YES</b>
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: _____ _____ _____	<b>NO</b>	<b>YES</b>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor name: _____		Date: _____
Signature: _____		

**Part 2 - Impact Assessment. The Lead 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?"

	<b>No, or small impact may occur</b>	<b>Moderate to large impact may occur</b>
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
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?		
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?		
7. Will the proposed action impact existing: a. public / private water supplies?  b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

**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 significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<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)

## Signature Page

This page includes the Authorization to Act as Agent Form, engineering Fee Disclosure, Authorization for Site Visits, Other permit responsibilities and agreement to provide documentation required.

Complete the following if the OWNER is using an Agent:

Owner's Name: \_\_\_\_\_

Designates: \_\_\_\_\_ as agent regarding Septic Variance for

Tax Map ID: \_\_\_\_\_

OWNER'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Engineering Fee Disclosure: Applications may be referred to the Town consulting engineer for review of septic design, storm drainage, etc. as determined by the Town Board of Health. Fees for engineering review services will be charged directly to the applicant.

Authorization for Site Visits: By signing this page and submitting the application materials attached, herein, the Owner, Applicant and his/her/their agent hereby authorize the Town Board of Health, building and code Enforcement Officers and Town Engineer to enter the subject properties for the purpose of reviewing the application submitted.

Please Note: Other permits may be required for construction or alteration activity subsequent to approval by the Town Board of Health. It is the applicant's responsibility to obtain any additional permits.

Official Meeting Minutes Disclosure: It is the practice of the Town Board of Health to have a designated stenographer tape record the proceedings of the meetings resulting from application, and that minutes transcribed from those tapes constitute the official record of all proceedings. If there is a discrepancy between such record and the handwritten minutes taken by the designated stenographer, the handwritten minutes shall be deemed the official record.

✓I, the undersigned, have thoroughly read and understand the instructions for submission; agree to the submission requirements and completed the checklist.

PRINT NAME OF OWNER: \_\_\_\_\_

SIGNATURE OF OWNER: \_\_\_\_\_

DATE: \_\_\_\_\_

PRINT NAME OF AGENT: \_\_\_\_\_

SIGNATURE OF AGENT: \_\_\_\_\_

DATE: \_\_\_\_\_