

## Town of Dover Planning Board

Town of Dover  
126 East Duncan Hill Road  
Dover Plains, NY 12522



(845) 832-6111 ext 100

### **CHAPTER 65, EROSION AND SEDIMENT CONTROL**

To preserve the quality of the natural environment from such adverse effects of site preparation and construction as the pollution of lakes, ponds and watercourses, unnecessary destruction of trees and other vegetation, excessive exposure of soil to erosion and unnecessary modification of natural topography or unique geological features, you must file an Erosion and Sediment Control application if any of the following activities are proposed:

- |     |   |
|-----|---|
| (1) | Altering wetlands, which includes draining or filling.  |
| (2) | Site preparation on slopes which exceed one foot of vertical rise to four feet of horizontal distance (or site preparation in areas known to be subject to severe erosion). |
| (3) | Site preparation within the hundred-year floodplain of any watercourse.   |
| (4) | Excavation which affects more than 200 cubic yards of material within any parcel or any one subdivision.  |
| (5) | Stripping which affects more than 1/2 acre of ground surface within any parcel or any one subdivision.  |
| (6) | Grading which affects more than 1/2 acre of ground surface within any parcel or any one subdivision.  |
| (7) | Filling which exceeds a total of 200 cubic yards of material within any parcel or any one subdivision.  |
| (8) | A development or subdivision of two or more units or any development or subdivisions requiring any new street or the extension of municipal facilities.                     |

For an explanation of any of the above terms, please see §65-6, Definitions.

**IF ANY OF THE ABOVE ACTIVITIES ARE PROPOSED, PLEASE SEE THE COMPLETE REGULATIONS UNDER CHAPTER 65.**

**YOU MUST ALSO COMPLETE THE LAND USE APPLICATION FORM AND THE EROSION AND SEDIMENT CONTROL CHECKLIST.**

The application is reviewed by the Town Planning Board, acting with recommendations from the Town Engineer, Building Inspector, Superintendent of Highways and the Conservation Advisory Commission. The Planning Board, at its discretion, may conduct public hearings on permit applications.

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### FEE SCHEDULE

The following fee schedule is for the Town of Dover Planning Board. Please make checks payable to the Town of Dover. Application and discussion fees are due at the time of the **application submission**. **Applications with unpaid fees will not be heard.** There may be additional fees for consultants during the review process.

Discussion Fee	\$100.00
Subdivision	\$200.00
Lot fee for each new lot created	\$ 50.00
Initial Escrow Deposit	\$500.00
Special Permit	\$200.00
Site Plan	\$200.00
Consultant Fees	To be set at meeting
Erosion Control	\$ 75.00
GIS EAF Fact Check	\$ 75.00
Recreation Fee 3or more lots	\$ 2,500.00/per lot or unit
Recreation Fee less than 3 lots (Due at Final approval signing)	\$ 2,000.00 per lot or unit

\*\*\*\* Fee schedule subject to change \*\*\*\*

# TOWN OF DOVER

## CHAPTER 65, EROSION AND SEDIMENT CONTROL CHECKLIST

**Applicant Name** \_\_\_\_\_

<b>PER CHAPTER 65, DOES THE EROSION AND SEDIMENT CONTROL APPLICATION CONTAIN:</b>	<b>Yes</b>	<b>Inc. *</b>	<b>NA/W **</b>
A completed Land Use Permit Application with Erosion and Sedimentation Control Permit checked off?			
12 sets of the application?			
The fee (If the permit is required due to §65-7A(4), (6), (7) or (8) the fee is \$35, otherwise it is \$25) ?			
<i><u>An existing features map, at a scale no smaller than 1" = 100', which includes:</u></i>			
The name, address, signature, and seal of the licensed engineer or architect?			
The boundaries of all parcels on which site preparation activities are proposed to be undertaken and boundaries of all parcels adjacent to the subject site?			
All structures and roads within a distance of 500 feet of the parcel on which site preparation activities are proposed to be undertaken? The structures shall be identified by their uses, and the roads shall be identified by their surface material and width of surface.			
All watercourses within a distance of 500 feet of the parcels on which site preparation activities are proposed to be undertaken?			
Existing topography at contour intervals of two feet within a distance of 500 feet of the parcels on which site preparation activities are proposed to be undertaken?			
All sewer, water, gas and electric lines and all other utilities within the parcels on which site preparation activities are proposed to be undertaken?			
Major wooded areas and tree clusters within a distance of 500 feet of the parcels on which site preparation activities are proposed to be undertaken?			
All vegetation areas on the site proposed for site preparation activities, including areas of grass, areas of brush and wooded areas and tree clusters?			
The depth to bedrock on the site proposed for site preparation activities, including areas of grass, areas of brush and wooded areas and tree clusters?			
The depth to permanent groundwater aquifers on the site proposed for site preparation activities, if such depth is determined during site evaluation?			
The boundary of the one-hundred-year floodplain, together with the designated wetland boundaries, where applicable?			
Drainage computations prior to site preparation and after site preparation may be required.			

*\*Incomplete \*\*NA - Not Applicable, W - Waiver Requested in Writing.*

Do you have an operations map which includes:			
All excavation, filling and grading proposed to be undertaken, identified as to the depth, volume and nature of the materials involved?			
All stripping, identified as to the nature of vegetation affected?			
All areas where topsoil is removed and stockpiled and where topsoil is ultimately placed, identified as to the depth of topsoil in each such area?			
All temporary and permanent vegetation to be placed on the site, identified as to planting type, size and extent?			
All temporary and permanent drainage, erosion and sediment control facilities, including such facilities as ponds and sediment basins, identified as to the type of facility, the materials from which it is constructed, its dimensions and its capacity in gallons?			
The anticipated pattern of surface drainage during periods of peak runoff upon completion of site preparation and construction activities, identified as to rate and direction of flow at all major points within the drainage system?			
The location of all roads, driveways, sidewalks, structures, utilities and other improvements?			
The final contours of the site in intervals of no greater than two feet?			
<i><u>A time schedule which is keyed to the operation map(s), indicating:</u></i>			
When major phases of the proposed project are to be initiated and completed?			
When major site preparation activities are to be initiated and completed.			
When the installation of temporary and permanent vegetation and drainage, erosion and sediment control facilities is to be completed?			
The anticipated duration, in days, of exposure of all major areas of site preparation before the installation of erosion and sediment control measures?			
An estimate of the costs of providing temporary and permanent vegetation and drainage, erosion and sediment control facilities which was prepared by applicant's engineer and confirmed by the Town Engineer?			

*\*Incomplete \*\*NA - Not Applicable, W - Waiver Requested in Writing.*

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## LAND USE APPLICATION

Type of Application: Check all that apply

*Erosion Control*

*Erosion Control with Site Plan*

**Grid Number(s):**

\_\_\_\_\_

**Name of Project:** \_\_\_\_\_

Property Address:

\_\_\_\_\_

\_\_\_\_\_

**Primary Contact Person:**

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Name of Property Owner:**

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number:

\_\_\_\_\_

**Name of Applicant (if *different*):**

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship of Applicant to Owner (e.g. *contract vendee, option holder, lessee*): \_\_\_\_\_

\_\_\_\_\_

**Plans Prepared By:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Zoning District(s):** RU\_\_, RC\_\_, HM\_\_, HR\_\_, SR\_\_, HC\_\_,  
CO\_\_, M\_\_

**Overlay District(s) (if *any*):** Floodplain\_\_, Stream Corridor\_\_,  
Aquifer\_\_, Mixed-Use Institutional\_\_, Soil Mining\_\_

Current Use(s): \_\_\_\_\_

Proposed Use(s): \_\_\_\_\_

Parcel Size: \_\_\_\_\_ Acres

Type of Activity: New structure \_\_\_\_\_, Alteration of existing  
structure\_\_\_\_\_, Expansion of use or structure\_\_\_\_\_,

Change of use in existing structure \_\_\_\_\_

Total Square Footage of Structures:

Current \_\_\_\_\_ Proposed \_\_\_\_\_

Footprint of Structures:

Current \_\_\_\_\_ Proposed \_\_\_\_\_

Does the property contain a farm operation located within an  
agricultural district or is the property boundary within 500  
feet of a farm operation located in an agricultural district:

*O* yes *O* no

*If yes, submit an Agricultural Data Statement, available from the  
Planning Office.*

Will the development be phased? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there an existing Special Permit and/or Site Plan approval  
for the property? Yes \_\_\_\_\_ No \_\_\_\_\_

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*The undersigned hereby makes application in accordance with all applicable laws and other requirements of the Town of Dover, Dutchess County, New York. All owners of record must sign.*

\_\_\_\_\_  
*Signature of Record Owner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Record Owner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant (if different)*

Date: \_\_\_\_\_

Does the project parcel cover applicant's entire holding?

yes       no

Deed Reference: Liber \_\_\_\_\_

Page \_\_\_\_\_ Date \_\_\_\_\_

Filed Map Reference: Lot # \_\_\_\_\_ Map # \_\_\_\_\_

Date of discussion meeting: \_\_\_\_\_  
(To be filled in by Planning Board Secretary)

Date stamp of submission

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AGRICULTURAL DATA STATEMENT

If the property is in an agricultural district and contains a farm operation,  
Or if the property is within 500 feet of a farm operation in an agricultural district

Please list names and addresses of owners of land which contain farm operations and which is located within an Agricultural District and within five hundred feet of the boundary line of the property upon which the project is proposed (*use additional sheet if more space is needed*):

(1) _____ _____ _____	(5) _____ _____ _____
(2) _____ _____ _____	(6) _____ _____ _____
(3) _____ _____ _____	(7) _____ _____ _____
(4) _____ _____ _____	(8) _____ _____ _____

Applicant must attach a tax map or other map showing the site of the proposed project in relation to the farming operations described above.

\_\_\_\_\_  
Signature of Applicant                      DATE



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# DISCLOSURE OF INTEREST FORM

Section 809 of the General Municipal Law provides as follows:

1. Every application, petition, or request submitted for a variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license, or permit, pursuant to the provisions of any ordinance, local law, rule, or regulation constituting the zoning and planning regulations of a municipality shall state the name, address, and the nature and extent of the interest of any state officer and any officer or employee of such municipality or of a municipality of which such municipality is a part, in the person, partnership, or association making such application, petition, or request (hereinafter called the applicant) to the extent known to such applicant.
2. For the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant when he, his spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them.
  - (a) Is the applicant, or
  - (b) Is an officer, director, partner, or employee of the applicant, or
  - (c) Legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or
  - (d) Is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application, petition, or request.
3. Ownership of less than five percent of the stock of a corporation whose stock is listed on the New York or American Stock Exchanges shall not constitute an interest for the purposes of this section.
4. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

*In connection with said application, petition or request, the undersigned hereby states, pursuant to the provision of Section 809 of the General Municipal Law, the name, residence, and the nature and extent of the interest of any state officer or employee of the Town of Dover and/or the County of Dutchess, in the person, partnership, or association making the application, petition, or request (hereinafter called the "applicant"). If none, insert the word "none" \_\_\_\_\_.*

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Signature of Applicant

---

Date

**Appendix C**  
**State Environmental Quality Review**  
**SHORT ENVIRONMENTAL ASSESSMENT FORM**  
**For UNLISTED ACTIONS Only**

**PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)**

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION: Municipality _____ County _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres      Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No      If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____	

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment**

**PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)**

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF. <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No	
C. COULD ACTION RESULT IN <b>ANY</b> ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible) C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:  C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:  C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:  C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:  C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:  C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:  C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:	
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:	

**PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)**

**INSTRUCTIONS:** For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

<input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which <b>MAY</b> occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.	
<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 <b>WILL NOT</b> result in any significant adverse environmental impacts <b>AND</b> provide, on attachments as necessary, the reasons supporting this determination.	
_____	_____
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)

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The following is the tentative list of the Town of Dover Planning Board deadlines and meetings. This projected schedule was created by use of the guidelines the Planning Board has in place. This schedule can be changed only at a formal Planning Board meeting by way of a motion being made and a vote of the membership on record.

The standard formula is as follows:

The Planning Board Will Meet **THE 1<sup>ST</sup> & 3<sup>RD</sup> MONDAY OF THE MONTH** at 7:00pm at the Town Hall,  
The **DEADLINE** FOR ANY AND ALL APPLICATIONS IS **NOON THE 2<sup>ND</sup> WEDNESDAY OF THE MONTH.**

\*\*\*\* **APPLICANTS & CONSULTANTS-** If your application is reviewed at the 1<sup>st</sup> meeting of the month- there should be no expectation that you will be on the 2<sup>nd</sup> meeting of the month agenda

<b><u>DEADLINE for the next month</u></b>	<b><u>1<sup>st</sup> Meeting</u></b>	<b><u>2<sup>nd</sup> Meeting</u></b>
<input checked="" type="checkbox"/> December 9, 2009 for January	<input checked="" type="checkbox"/> <b>Wednesday January 6, 2010</b>	
<input checked="" type="checkbox"/> January 13, 2010 for Feb	<input checked="" type="checkbox"/> February 1, 2010	<input type="checkbox"/> February 15, 2010-TBA <b>(President's Day)</b>
<input checked="" type="checkbox"/> February 10, 2010 for March	<input checked="" type="checkbox"/> March 1, 2010	<input checked="" type="checkbox"/> March 15, 2010
<input checked="" type="checkbox"/> March 10, 2010 for April	<input checked="" type="checkbox"/> April 5, 2010	<input checked="" type="checkbox"/> April 19, 2010
<input checked="" type="checkbox"/> April 14, 2010* for May	<input checked="" type="checkbox"/> May 3, 2010	<input checked="" type="checkbox"/> May 17, 2010
<input checked="" type="checkbox"/> May 12, 2010 for JUNE	<input type="checkbox"/> June 7, 2010	<input type="checkbox"/> June 21, 2010
<input type="checkbox"/> June 9, 2010 for JULY	<input type="checkbox"/> July 5, 2010 cancelled	<input type="checkbox"/> July 19, 2010
<input type="checkbox"/> July 14, 2010* for AUGUST	<input type="checkbox"/> August 2, 2010	<input type="checkbox"/> August 16, 2010
<input type="checkbox"/> August 11, 2010 for SEPTEMBER	<input type="checkbox"/> <b>September 6, 2010-TBA</b> <b>(Labor Day)</b>	<input type="checkbox"/> September 20, 2010
<input type="checkbox"/> September 8, 2010*for OCTOBER	<input type="checkbox"/> October 4, 2010	<input type="checkbox"/> October 18, 2010
<input type="checkbox"/> October 13, 2010 for NOVEMBER	<input type="checkbox"/> November 1, 2010	<input type="checkbox"/> November 15, 2010
<input type="checkbox"/> November 10, 2010 for DECEMBER	<input type="checkbox"/> December 6, 2010	<input type="checkbox"/> December 20, 2010
<input type="checkbox"/> December 8, 2010* for Jan. 2011		

\* All meeting dates are subject to change Please call the Town of Dover Planning Board Office (845) 832-6111 ext 100 to confirm monthly dates or go to [www.TownofDoverNY.us](http://www.TownofDoverNY.us)

Respectfully submitted,

*Betty-Ann Sherer*

Betty-Ann Sherer, Secretary to the Board