

TOWN OF HARRISON WETLAND PERMIT APPLICATION



SITE IDENTIFICATION INFORMATION							
Application Name:	,	Applica	ation #	Date Su	ıbmitted:		
Site Address: No. Street: Hamlet:							
Property Location: (Identify landmarks, distance from intersections, etc.)							
Town of Harrison Tax Map Designation: Section Block Lot(s)			Zoning Designation of Site:				
APPLICANT/OWNER INFORMATION							
Property Owner:		Phone #: Fax#:			Email:		
Owners Address: No. Street: Town: State: Zip:						Zip:	
Applicant (If different than owner	Phone #: Fax#:	Phone #: Email					
Applicant Address (If different than owner): No. Street: Town: State: Zip:							
Firm Responsible for Delineating	Phone #: Fax#:			Email:	<i>r</i>		
Address:							
No. Street:	T	own:		+	State:	Zip:	
Other Representatives:		Phone #: Fax#:			Email:		
Owners Address:	7				Ctata	7in.	
No. Street:		own:	ION		State:	Zip:	
PROJECT INFORMATION							
Lot size: Acres: Square Feet: Are existing structures located on the site? Yes: □ No: □						site f	
What is the predominant soil type	What is the approximate depth to water table?						
Total area of wetland on site:	Total area of wetland buffer on site:						
Total proposed disturbance:	Wetland:	Wetland buffer:		square feet			
Estimated quantity of excavation:	Cut (C V)			Square reet			
] No: □		
Does the site contain any species of plant or animal life listed as rare, threatened, or endangered by the New York State Natural Heritage Program? Yes: □ No: □							
Is the site located in a designated floodplain? Yes: □ No: □							
Is the site located within 500' of:							
 The boundary of an adjoining city, town or village The boundary of a state or county park, recreation area or road right-of-way Yes: □ No: □ 							
■ A county drainage channel line.							
■ The boundary of state or county owned land on which a building is located Yes: □ No: □							
Is the site burdened by any existing easements, covenants or restrictions? Yes: \Box No: \Box If so, attach a copy							
	Will the project require the preparation of a Stormwater Pollution Prevention Plan						
Yes: □ No: □ If yes, attach a copy							

	PROJECT IMPACT DESCRIPTION					
Provide a description of the propattach a separate sheet):	osed activity requirin	g a wetland permit (if a	dditional space is needed			
Miles discussed to the continued on the	dend buffer will record	from the man and action	iv.O (if a delitional arrassis			
What impact to the wetland or wet needed attach a separate sheet)	liand butter will result	from the proposed activ	ity? (if additional space is			
What mitigation measures are pro	posed? (if additional s	space is needed attach a	separate sheet)			
Explain why the proposed activity can not be located at another location that will avoid encroaching into the regulated wetland area: (if additional space is needed attach a separate sheet)						
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APPLICANTS ACKNOWLEDGEMENT						
I hereby depose and certify that all the above statements and information, and all statements and information contained in the supporting documents and drawings attached hereto are true and correct.						
Applicants Name		Applicants Signature				
Sworn before me this	day of _		20			
Notary Public	-					