



# TOWN OF SOUTHPORT

1139 Pennsylvania Avenue, Elmira, NY 14904

607.737.5268

[www.townofsouthport.com](http://www.townofsouthport.com)

## Special Use Permit Procedure

**Special Use Permit** procedure requires a Public Hearing to be held. Procedure on what you will need to do for the Public Hearing will be provided to you. The Town will also post a sign on the site plan property stating the date and time of the Public Hearing. It will take at least two meetings before you will have the Planning Boards decision on your application. Please follow the procedure listed below.

If the Special Use Permit is approved, a Building Permit is required for any construction, renovations, or alterations. All commercial projects will require stamped architect prints. Discuss your project fully with the Code Enforcement Officer.

The Planning Board, subject to the approval of the Town Board, may require an applicant for site plan review to deposit in an escrow account a reasonable amount established by the Planning Board to pay the fees and/or costs of any consultant, engineer, or attorney designated by the Town Board to review the application. The fees and/or costs charged by such consultant, engineer, or attorney in connection with such review will be charged against the sum deposited in escrow. If specific circumstances warrant it, additional funds will be required to be deposited in order to cover reasonable expenses incurred beyond the original estimate. Any amount remaining shall be returned to the applicant within 45 days of final action on the application. Payment to the escrow account, if required, is a prerequisite to a complete application, and no review will be initiated until payment is received. The deposit specified above does not include all approvals or fees required from or by agencies other than the Town, costs associated with extensions to districts to provide necessary services to the proposal nor fees charged by Town departments or boards for permits, approvals, hearings, or other actions, except as noted above. (Town Code §525-65 Professional assistance)

1. Fill out attached Special Use Permit application.
2. Write a letter to the Planning Board explaining your Special Use Permit request.
3. Fill out attached State Environmental Assessment (SEQR) form.
4. Submit a property survey map depicting all Bulk & Density requirements and actual dimensions. Major projects will require full Site Plan drawings.
5. If you do not own the property, provide a letter from the Owner giving you permission for your project. If you are buying the property, provide copy of purchase offer agreement (cost may be redacted).
6. Application fee. Make check payable to "Town of Southport".  
\$75.00 Minor Special Use Permit      \$150.00 Major Special Use Permit

Submit all paperwork to our office by the 3<sup>rd</sup> Wednesday of the month. \_\_\_\_\_

**(Incomplete or late Applications will be put on the next agenda.)**

First meeting is at 7:00 p.m. at the Town Hall on \_\_\_\_\_

**(You or your representative must attend all meetings.)**

Some applications need to be reviewed by Chemung County Planning Board

**ACKNOWLEDGEMENT**

I/we hereby certify that I/we have read the instructions and received a copy. I/we understand that a provision of laws and ordinances covering this application will be complied with whether specified or not. Instructions specified here do not presume to give authority to violate or cancel provisions of any other law or local law regulating this application and/or construction or performance of construction relating to this application. I/we understand that I/we cannot operate or start the project applied for herein until such time as the Town of Southport grants approval and all necessary permits are secured.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_



# SPECIAL USE PERMIT APPLICATION

## PROJECT INFORMATION

Name of Proposed Development			Date
Address			
Tax Map #			Zoning District
Setbacks	Front	Side	Rear
Describe Project			

## APPLICANT

Name			
Address			
City	State	Zip	
Phone	Email		

## OWNER (if different)

Name			
Address			
City	State	Zip	
Phone	Email		

## PROPOSAL DATA (must fill in all information)

Days and Hours of Operation	
# of Parking Spaces	
# of Handicap Parking Spaces	
# of Employees	
# of Daily Customers (estimated)	
# of Vehicles on Lot (automotive business)	

Handicap Access			
# of Signs		Size	Location
Type of Outside Lighting			
Type of Buffer (fence, bushes, etc.)			
Disposal of garbage and/or debris			
Stormwater drainage			
Water/Sewer/Septic			

**OTHER PERMITS NEEDED (CHECK ALL THAT APPLY)**

<input type="checkbox"/> Town of Southport Building Permit	<input type="checkbox"/> CC Sewer District
<input type="checkbox"/> Town of Southport Driveway Permit	<input type="checkbox"/> Dept. of Health Water/Septic
<input type="checkbox"/> NYS DOT	<input type="checkbox"/> SWPPP
<input type="checkbox"/> CC DPW-driveway permit	<input type="checkbox"/> NYSDEC-SPDES
<input type="checkbox"/> Elmira Water Board	<input type="checkbox"/> Other: _____

**CERTIFICATION**

I (We) hereby make application for a Site Plan Approval declaring that the information contained in this application is accurate and correct to the best of my (our) knowledge, and that property described above and indicated on a Concept/Preliminary/Final Plan is in my (our) legal, uncontested ownership, without any outstanding rights, reservations, or other encumbrances, which could nullify the intended use as shown. I (We) understand that a provision of laws and ordinances covering this application will be complied with whether specified or not. This application does not presume to give authority to violate or cancel provisions of any local law regarding this application, and/or construction regarding this application. I/we understand that this application may require additional fees and expenses, at my/our expense, for preparation of necessary environmental, engineering and planning studies. I (We) understand that I (We) can not operate or start the project applied for herein until such time as the Town of Southport grants approval and all necessary permits are secured.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Property Owner \_\_\_\_\_ Date \_\_\_\_\_

# Short Environmental Assessment Form

## Part 1 - Project Information

### 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.			NO <input type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/>	YES <input type="checkbox"/>
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, are adjoining or 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. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services 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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
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: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?  b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
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. 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: _____ _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

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    Agricultural/grasslands    Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban    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?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
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? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
49. 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: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
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: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>  Applicant/sponsor/name: _____ Date: _____  Signature: _____ Title: _____		