## 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.

Part 1 – Project and Sponsor Information					
Name of Action or Project:					
Schoharie Dental					
Project Location (describe, and attach a location map):					
229 Main St. Schoharie NY 12157					
Brief Description of Proposed Action:					
Expand waiting room towards Bridge St by replicating porch facing Main st. (See attached elevation)					
Name of Applicant or Sponsor:	Telephone: 617-513-9940				
Hazem Elbialy	E-Mail: hazememad@gmail.com				
Address:	I				
143 Lancaster St					
City/PO:	State:	Zip Code:			
Albany	NY	12210			
1. Does the proposed action only involve the legislative adoption of a plan, local	l law, ordinance,	NO YES			
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.					
2. Does the proposed action require a permit, approval or funding from any other government Agency?  NO YES					
If Yes, list agency(s) name and permit or approval: Building Permit, Planning Board approval, County approval.					
3. a. Total acreage of the site of the proposed action?	1.51 acres				
b. Total acreage to be physically disturbed?	.0088acres				
c. Fotal acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?  1.51					
of total application of project policy					
4. Check all land uses that occur on, are adjoining or near the proposed action:					
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial 🗹 Commercia	al 🗹 Residential (subur	ban)			
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Spec	cify):				
Parkland					

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5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?		V	
b. Consistent with the adopted comprehensive plan?		V	
6 To the grant action against with the sundaminant description of the first little of		NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		П	V
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES
If Yes, identify:			TES
		~	Ш
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES
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?			~
9. Does the proposed action meet or exceed the state energy code requirements?		NO	YES
If the proposed action will exceed requirements, describe design features and technologies:			
			V
			2
10. Will the proposed action connect to an existing public/private water supply?		NO	YES
If No, describe method for providing potable water:			
			V
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:		_	
		Ш	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district		NO	YES
which is listed on the National or State Register of Historic Places, or that has been determined by the			V
Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?		Ш	
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?	8	<b>V</b>	ш
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain		NO	YES
wetlands or other waterbodies regulated by a federal, state or local agency?		<b>V</b>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		V	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:			
	_	5 100	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:				
Shoreline Forest Agricultural/grasslands Early mid-successional				
☐Wetland ☐ Urban ☑ Suburban				
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or	NO	YES		
Federal government as threatened or endangered?  Northern Long-eared Bat		V		
	ш			
16. Is the project site located in the 100-year flood plan?	NO	YES		
16		~		
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES		
If Yes,	V			
a. Will storm water discharges flow to adjacent properties?	~			
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	V			
If Yes, briefly describe:				
		1		
18. Does the proposed action include construction or other activities that would result in the impoundment of water	NO	YES		
or other liquids (e.g., retention pond, waste lagoon, dam)?	NO	1123		
If Yes, explain the purpose and size of the impoundment:				
		Ш		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES		
If Yes, describe:				
	V			
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or	NO	YES		
completed) for hazardous waste?  If Yes, describe:				
11 Tes, describe.	V			
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I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF				
MY KNOWLEDGE				
Applicant/sponsor/name: Hazem Elbialy Date: 01/06/2024		s		
SignatureTitle: Owner				