

Jwhittredge1963@yahoo.com

ALL CONSTRUCTION TO BE IN COMPLIANCE WITH "NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE" AND "VILLAGE OF BALLSTON SPA ZONING ORDINANCE"

1. GENERAL INFORMATION

PDD/ Subdivision Name: Bogun  
Tax Map No: 2.16.23-1-5.1 Historic District:  Yes  No Ownership:  Private  Public

2. APPLICANT

Name: Audrey Bogun Position: Niece Organization: \_\_\_\_\_  
Address: 1315 Midline Road City: Amsterdam State: NY Zip Code: 12010  
Telephone: 518-879-0393 Ext.: \_\_\_\_\_

3. PROPERTY OWNER

Name: James Whittredge Position: Owner Organization: \_\_\_\_\_  
Address: 101 Fairground Ave City: Ballston Spa State: NY Zip Code: 12020  
Telephone: 518-852-4737 Ext.: \_\_\_\_\_ Liability Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

4. PROPOSED CONSTRUCTION LOCATION

Street Number: 101 Street Name: Fairground Ave  
Apt. Number: \_\_\_\_\_ Zoning District: R-1

5. USE

Existing Use: \_\_\_\_\_ Proposed Use: New home

6. TYPE OF WORK

New  Addition  Change of Tenant  Other  
Brief Description of proposed work: Single story house  
1800 sq/ft

SETBACKS (in feet)	
FRONT	<u>25</u>
BACK	<u>25</u>
LEFT SIDE	<u>12</u>
RIGHT SIDE	<u>12</u>

7. PROPOSED BUILDING

Height: 25'5" Actual Stories: 1 Total Size: 1800 square feet Style: farmhouse  
Type of Frame: \_\_\_\_\_ Type of Foundation: \_\_\_\_\_ Number of Rooms (excl. bathrooms): 8 Number of Bathrooms: 2.5  
Number of Bedrooms: 3 Primary Heat System: \_\_\_\_\_ Type of Fuel: \_\_\_\_\_ Number of Fireplaces: \_\_\_\_\_ Number of Wood Stoves: \_\_\_\_\_  
Sprinklers:  Yes  No Central Air Conditioning:  Yes  No Garage:  Attached - No. of Cars: 2  Detached - No. of Cars: \_\_\_\_\_

8. ARCHITECT / ENGINEER

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Organization: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Professional License No.: \_\_\_\_\_ State: \_\_\_\_\_

9. CONTRACTOR

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Organization: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Liability Carrier: \_\_\_\_\_ Policy No.: \_\_\_\_\_

10. NAMES, ADDRESSES AND TELEPHONE NUMBERS OF ALL SUBCONTRACTORS:

11. COST AND FEES

Estimated Project Cost \$ \_\_\_\_\_ Building Permit Fee \$ \_\_\_\_\_

12. PROVIDED WITH THIS APPLICATION

Two (2) Complete Sets of Plans  Plot Plan  Energy Audit  Materials List  Electrical Layout  Plumbing Layout

13. AFFIDAVIT

I swear to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE, the ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature: [Signature] DATE: 6/29/2022  
(Owner or Owner's Agent)

BELOW THIS LINE TO BE COMPLETED BY THE BUILDING DEPARTMENT

ACTION ON APPLICATION

Permit Granted Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
Permit Denied Date: JUL 13 2022 Signed: [Signature]  
Reason for Denial: Per Parcel Lot Docs NOT meet Requirements of 205 Sub B Part 1. SEE Letter of Denial.  
Variance/ Special Permit Granted By: \_\_\_\_\_ Date: \_\_\_\_\_  
Certificate of Occupancy Granted By: \_\_\_\_\_ Date: \_\_\_\_\_  
Certificate of Compliance Granted By: \_\_\_\_\_ Date: \_\_\_\_\_

# Village of Ballston Spa

66 FRONT STREET

*Ballston Spa, NY 12020*

518-885-5711

July 13, 2022

To: James Whittredge  
101 Fairground Avenue  
Ballston Spa, NY 12020

Re: Application for construction of a single-story house on the property located at 101 Fairground Avenue, Ballston Spa, NY 12020.

Tax ID: 216.23-1-5.1

Dear Mr. Whittredge:

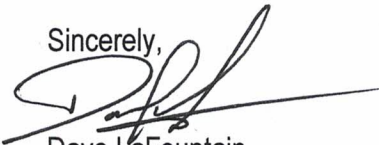
Attached please find your denied application for construction of a single-story house on the property located at 101 Fairground Avenue. Your application is being denied for the following reasons:

**205 Schedule B Part 1**

*Proposed lot does not have minimum lot width at the road. Proposed lot does not exist at this time. A sub-division and a variance will be required.*

If you wish to move forward with this project, please submit the previously issued Planning Board and Zoning Board of Appeals applications to the Building Department Clerk.

Sincerely,



Dave LaFountain  
Code Enforcement Officer

Phone: (518)885-3167

Email: [buildinginspector@villageofballstonspa.org](mailto:buildinginspector@villageofballstonspa.org)

Cc: Anna Stanko



Village of Ballston Spa  
Zoning Board of Appeals  
66 Front Street  
Ballston Spa, NY 12020  
518.885.5711

Instructions

APPEAL TO THE ZONING BOARD FOR AN INTERPRETATION, USE VARIANCE AND/OR VARIANCE EXTENSION

APPLICATION REQUIREMENTS

1. **Eligibility:** To apply for relief from the Village's Zoning Ordinance, an applicant must be the property owner(s) or lessee or have an option to lease or purchase the property in question. The Zoning Board of Appeals (ZBA) shall not accept any application for appeal that includes a parcel which has a written violation from the Building Inspector that is not the subject of the application.

2. **Complete Submissions:** Applicants are encouraged to work with Village staff to ensure a complete application. The ZBA will only consider completed applications that contain 1 original and 1 digital of the following:

Completed application pages 1 and 8, the pages relating to the requested relief (p.2 for interpretation or extension, pp. 3-5 for use variance, pp. 6-7 for area variance) and any additional supporting materials/documentation.

Completed SEQR Environmental Assessment Form - short or long form as required by action. [http://www.dec.ny.gov/docs/permits\\_ej\\_operations\\_pd/seafpartone.pdf](http://www.dec.ny.gov/docs/permits_ej_operations_pd/seafpartone.pdf)

Detailed "to scale" drawings of the proposed project – folded and no larger than 24" x 36". Identify all existing and proposed structures, lot boundaries and dimensions, and the relationship of structures to the lot dimensions. Also, include any natural or manmade features that might affect your property (e.g., drains, ponds, easements, etc.).

3. **APPLICATION FEE (NON-REFUNDABLE):** Make checks payable to the "Village of Ballston Spa". Fees are cumulative and required for each request below.

\_\_\_ Interpretation \$500.

\_\_\_ Use variance \$200.

\_\_\_ Area variance Residential use/property \$100. Non-residential use/property \$300.

\_\_\_ Extensions \$150.

Check Village website [www.villageofballstonspa.org](http://www.villageofballstonspa.org) for application meeting Dates.



VILLAGE OF BALLSTON SPA

66 Front St

Ballston Spa, NY 12020

Ph: (518)885-5711 Fax: (518)885-0512

APPLICATION FOR:
APPEAL TO THE ZONING BOARD FOR AN
INTERPRETATION, USE VARIANCE, AREA VARIANCE AND/OR VARIANCE EXTENSION

Table with columns: APPLICANT(S), OWNER(S) (if not applicant), ATTORNEY/AGENT. Rows include Name, Address, Phone, and Email.

\*An applicant must be the property owner, lessee, or one with an option to lease or purchase the property in question.

Applicant's interest in the premises: [X] Owner [ ] Lessee [ ] Under option to lease of purchase

PROPERTY INFORMATION

- 1. Property Address/Location: 101 Fairground Ave. BS Tax Parcel No: 216.23-1-5.1
2. Date acquired by current owner: August 13, 1996
3. Zoning District when purchased: R1
4. Present use of property: Home
5. Current Zoning District: R1
6. Has a previous ZBA application/appeal been filed for this property?
a. [ ] Yes (when? , for what? )
b. [X] No
7. Is property located within (check all that apply):
[ ] Historic District
[ ] Architectural Review District
[ ] 500' of a State Park, city boundary, or county/state highway?



8. Brief description of proposed action:

Subdivide property for family member to build  
a home on.

9. Is there a written violation for this parcel that is not the subject of this application? \_\_\_ Yes  No

10. Has the work, use or occupancy to which this appeal relates already begun? \_\_\_ Yes  No

11. Identify the type of appeal you are requesting (*check all that apply*):

- INTERPRETATION (p.2)
- VARIANCE EXTENSION (p.2)
- USE VARIANCE (pp.3-6)
- AREA VARIANCE (pp. 6-7)

**FEES:** Make checks payable to the "VILLAGE OF BALLSTON SPA". Fees are cumulative and required for each request below:

<input type="checkbox"/> Interpretation	\$500
<input type="checkbox"/> Use variance	\$200
<input checked="" type="checkbox"/> Area variance	
- Residential use/property:	<u>\$100</u>
- Non-residential use/property:	\$300
<input type="checkbox"/> Extensions:	\$150

**INTERPRETATION – PLEASE ANSWER THE FOLLOWING (add additional information as necessary):**

1. Identify the section(s) of the Zoning Ordinance for which you are seeking an interpretation:

Section(s) \_\_\_\_\_

2. How do you request that this section be interpreted?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If interpretation is denied, do you wish to request alternative zoning relief? \_\_\_ Yes \_\_\_ No

4. If the answer to #3 is "yes", what alternative do you request? \_\_\_ Use Variance \_\_\_ Area Variance



**EXTENSION OF A VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):**

1. Date original variance was granted: \_\_\_\_\_

2. Type of variance granted? \_\_\_\_ Use \_\_\_\_ Area

3. Date original variance expired: \_\_\_\_\_

4. Explain why the extension is necessary. Why wasn't the original timeframe sufficient:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When requesting an extension of time for an existing variance, the applicant must prove that the circumstances upon which the original variance was granted have not changed. Specifically demonstrate that there have been no significant changes on the site, in the neighborhood, or within the circumstances upon which the original variance was granted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**USE VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):**

A use variance is requested to permit the following: Subdivide property to build house

\_\_\_\_\_  
\_\_\_\_\_

For the Zoning Board to grant a request for a use variance, an applicant must prove that the zoning regulations create an unnecessary hardship in relation to that property. In seeking a use variance, New York State law requires an applicant to prove all four of the following "tests".

1. That the applicant cannot realize a reasonable financial return on initial investment for any currently permitted use on the property. "Dollars & cents" proof must be submitted as evidence. The property in question cannot yield a reasonable return for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**A. Submit the following financial evidence relating to this property (attach additional evidence as needed):**

1. Date of purchase: \_\_\_\_\_ Purchase amount: \$ \_\_\_\_\_

2. Indicate dates and costs of any improvements made to property after purchase:

<u>Date</u>	<u>Improvement</u>	<u>Cost</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Annual maintenance expense: \$ \_\_\_\_\_

4. Annual taxes: \$ \_\_\_\_\_

5. Annual income generated from property: \$ \_\_\_\_\_

6. City assessed value: \$ \_\_\_\_\_

7. Appraised Value: \$ \_\_\_\_\_ Appraiser: \_\_\_\_\_ Date: \_\_\_\_\_

Appraisal Assumptions: \_\_\_\_\_

**B. Has property been listed for sale with the Multiple Listing Service (MLS)?**

\_\_\_ Yes If "yes", for how long?

No

1. Original listing date(s): \_\_\_\_\_ Original listing price: \$ \_\_\_\_\_

If listing price was reduced, describe when and to what extent:

\_\_\_\_\_  
\_\_\_\_\_



2. Has the property been advertised in the newspapers or other publications? \_\_\_ Yes  No

If yes, describe frequency and name of publications:

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3. Has the property had a "For Sale" sign posted on it? \_\_\_ Yes  No

If yes, list dates when sign was posted:

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4. How many times has the property been shown and with what results?

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2. That the financial hardship relating to this property is unique and does not apply to a substantial portion of the neighborhood. Difficulties shared with numerous other properties in the same neighborhood or district would not satisfy this requirement. This previously identified financial hardship is unique for the following reasons:

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3. That the variance, if granted, will not alter the essential character of the neighborhood. Changes that will alter the character of a neighborhood or district would be at odds with the purpose of the Zoning Ordinance. The requested variance will not alter the character of the neighborhood for the following reasons:

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4. That the alleged hardship has not been self-created. An applicant (whether the property owner or one acting on behalf of the property owner) cannot claim "unnecessary hardship" if that hardship was created by the applicant, or if the applicant acquired the property knowing (or was in a position to know) the conditions for which the applicant is seeking relief. The hardship has not been self-created for the following reasons:

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**AREA VARIANCE-PLEASE ANSWER THE FOLLOWING** (add additional information as necessary):

The applicant requests relief from the following Zoning Ordinance article(s) 205 Schedule B Part 1

<u>Dimensional Requirements</u>	<u>From</u>	<u>To</u>
<hr/>	<u>80'</u>	<u>15'</u>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Other:  

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To grant an area variance, the ZBA must balance the benefits to the applicant and the health, safety, and welfare of the neighborhood and community, taking into consideration the following:

1. Whether the benefit sought by the applicant can be achieved by other feasible means. Identify what alternatives to the variance have been explored (alternative designs, attempts to purchase land, etc.) and why they are not feasible.

Proposed lot does not have minimum Lot width  
at the road.

2. Whether granting the variance will produce an undesirable change in the character of the neighborhood or a detriment to nearby properties. Granting the variance will not create a detriment to nearby properties or an undesirable change in the neighborhood character for the following reasons:

Preexisting single family home in similar  
location at back of property. This is a  
Residential Area

3. Whether the variance is substantial. The requested variance is not substantial for the following reasons:

Home will be located in the back of property  
Variance required for driveway access.

4. Whether the variance will have adverse physical or environmental effects on neighborhood or district. The requested variance will not have an adverse physical or environmental effect on the neighborhood or district for the following reasons:

minimal change noted from street view.



5. Whether the alleged difficulty was self-created (although this does not necessarily preclude the granting of an area variance). Explain whether the alleged difficulty was or was not self-created:

No Self Created difficulty

**DISCLOSURE**

Does any Village of Ballston Spa officer, employee, or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application?  No \_\_\_ Yes If "yes", a statement disclosing the name, residence and nature and extent of this interest must be filed with this application.

**APPLICANT CERTIFICATION**

I/We, the property owner(s), or purchaser(s)/lessee(s) under contract, of the land in question, hereby request an appearance before the Zoning Board of Appeals.

By the signature(s) attached hereto, I/we certify that the information provided within this application and accompanying documentation is, to the best of my/our knowledge, true and accurate. I/We further understand that intentionally providing false or misleading information is grounds for immediate denial of this application.

Furthermore, I/we hereby authorize the members of the Zoning Board of Appeals and designated Village of Ballston Spa staff to enter the property associated with this application for purposes of conducting any necessary site inspections relating to this appeal.

[Signature] Date: \_\_\_\_\_  
(applicant signature)

[Signature] Date: \_\_\_\_\_  
(applicant signature)

If applicant is not the currently the owner of the property, the current owner must also sign.

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

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



**PUBLIC HEARING ADVERTISEMENT**

The Zoning Board of Appeals is required to hold a public hearing on each submitted application within ninety (90) days from when it is determined to be properly complete by Village staff.

Village staff will prepare a legal notice for the public hearing and arrange to have the public hearing announcement printed in the Daily Gazette legal notices at least 5 days before the hearing.

Applicants must pay the Daily Gazette for the legal ad and present proof of payment to the ZBA prior to the public hearing. If proof of payment is not presented prior to the hearing, the hearing will be cancelled.

**PROPERTY OWNER NOTIFICATION**

Applicants are required to mail a copy of the public hearing notice to all property owners within the following distances from the boundaries of the land in question:

<u>Type of variance</u>	<u>Distance for property owner notification</u>
Use variance	250 feet
Area variance & Interpretation	100 feet

Village staff will email a copy of the "property owner notification letter" to the applicant. The applicant must then send the notification letter to the nearby property owners. Applicants must not include any other materials in this mailing. The mailing must be certified by the U.S. Post Office. Prior to the public hearing, applicants must present the "certificates of mailing" to the ZBA. If "certificates of mailing" are not presented prior to the hearing, the hearing will be cancelled.



# 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: <i>Proposed Building of family home</i>			
Project Location (describe, and attach a location map): <i>101 Fairground Avenue, Ballston Spa NY 12020</i>			
Brief Description of Proposed Action: <i>Subdivision for Single family Residential Home.</i>			
Name of Applicant or Sponsor: <i>James + Kelly Whittredge</i>		Telephone: <i>518.852.4737</i>	
Address: <i>101 Fairground Avenue</i>		E-Mail: <i>jwhittredge1963@yahoo.com</i>	
City/PO: <i>Ballston Spa</i>		State: <i>NY</i>	Zip Code: <i>12020</i>
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"/>
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: <i>Building Permit</i>			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<u><i>1.63</i></u> acres	
b. Total acreage to be physically disturbed?		<u><i>0.32</i></u> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u><i>1.63</i></u> 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 checked="" 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,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	
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: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?			
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?			
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?			
	<input checked="" 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?			
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			



<p>14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:</p> <p><input type="checkbox"/> Shoreline   <input type="checkbox"/> Forest   <input type="checkbox"/> Agricultural/grasslands   <input type="checkbox"/> Early mid-successional</p> <p><input type="checkbox"/> Wetland   <input type="checkbox"/> Urban   <input checked="" type="checkbox"/> Suburban</p>		
<p>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?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>16. Is the project site located in the 100-year flood plan?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>17. Will the proposed action create storm water discharge, either from point or non-point sources?</p> <p>If Yes,</p> <p>a. Will storm water discharges flow to adjacent properties?</p> <p>b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?</p> <p>If Yes, briefly describe:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
<p>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)?</p> <p>If Yes, explain the purpose and size of the impoundment:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p><b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor/name: <u>James + Kerly Whitfledge</u>      Date: _____</p> <p>Signature: <u><i>James H Whitfledge</i></u>      Title: <u>Land Owner</u></p> <p><u><i>Kerly C Whitfledge</i></u></p>		