

TRUSTEES OFFICE

116 HAMPTON ROAD
SOUTHAMPTON, NY 11968



PHONE: 631 287-5717

FAX: 631 287-5723

BOARD OF TRUSTEES
OF THE FREEHOLDERS AND COMMONALTY OF THE
TOWN OF SOUTHAMPTON

GENERAL PERMIT FEE SCHEDULE

FOR TRUSTEES PERMIT FOR NEW WORK, RECONSTRUCTION AND REPLACEMENT OF EXISTING STRUCTURES

ALL Fees Are Non-Refundable

_____ Application Fee:	\$500.00
_____ Renewal Application Fee:	\$400.00
_____ Modification Application Fee:	\$400.00
_____ Modification AND Renewal Application Fee:	\$800.00

FEES PAID AFTER PERMIT IS APPROVED BY THE TRUSTEES

_____ As-Built Fee (if applicable): (IN ADDITION TO \$500 APPLICATION FEE)	\$1,000.00
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NON-REFUNDABLE DIMENSIONAL FEES

PERMIT TYPE:	DIMENSIONAL FEE:	UNITS:
Bulkheads	\$6.00	Per Linear Foot (includes reconstruction and re-facing)
Dredging/Spoil Site	\$15.00	For each cubic yard of material removed from Town bay bottom
Fixed Dock	\$5.00	Per Square Foot of surface area
Floating Dock	\$5.00	Per Square Foot of surface area
Jetty/Revetment/Rip Rap	\$6.00	Per Linear Foot (includes reconstruction and re-facing)
Piling	\$20.00	Per Piling (Includes post/piles securing a floating dock and tie-off poles)
Sand Fence	\$3.00	Per Linear Foot (includes reconstruction and re-facing)
Steps or Stairs	\$5.00	Per Square Foot of surface area
Walkway/Ramp/Catwalk	\$5.00	Per Square Foot of surface area
Biolog Stabilization Structure	NO DIMENSIONAL FEE	Per Linear Foot
Boat Lift or Hoist	NO DIMENSIONAL FEE	
Jet Ski Lift or Hoist	NO DIMENSIONAL FEE	
Circulating Pump (Aerator)	NO DIMENSIONAL FEE	
Dewatering Construction	NO DIMENSIONAL FEE	
Drainage Structures	NO DIMENSIONAL FEE	
Dune Restoration	NO DIMENSIONAL FEE	
Kayak Rack	NO DIMENSIONAL FEE	
Phragmites Removal	NO DIMENSIONAL FEE	
Refuse Removal	NO DIMENSIONAL FEE	
Replant/Revegetate	NO DIMENSIONAL FEE	
Sand/Gravel Replenishment	NO DIMENSIONAL FEE	
Underground Utilities (<i>Electrical, Water, Cable, Telephone, Gas</i>)	NO DIMENSIONAL FEE	

YOU ARE ADVISED THAT PERMITS MAY ALSO BE NECESSARY FROM THE FOLLOWING AGENCIES:

NYS Department of Environmental Conservation
www.dec.ny.gov
Regional Permit Administrator
SUNY at Stony Brook – 50 Circle Road
Stony Brook, NY 11790
Phone: 631-444-0365; Fax: 631-444-0360
E-mail: dep.rl@dec.ny.gov

US Army Corps of Engineers, New York District
<http://www.usace.army.mil/>
Jacob K. Javits Federal Building
26 Federal Plaza, Room 1937
New York, NY 10278-0090
Attn: Regulatory Branch
Phone: 917-790-8511

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GENERAL PERMIT CHECKLIST

DOCUMENTS TO BE SUBMITTED WITH APPLICATION:

*The Southampton Town Trustees office will **NOT** accept any incomplete applications.
You **MUST** provide two (2) copies of the application and documents submitted with application.*

Please check the following to ensure your application is complete and acknowledge with signature below:

_____ **Application**

_____ **Notarized Agent Letter** (attached)

_____ **Notarized Authorization Form** (attached)

_____ **SEQRA Short Environmental Assessment Form** (attached)

_____ **Property Survey**

- * Done by a New York State licensed surveyor, and updated **no more than one (1) year** prior to the application date. The survey submitted must bear the original seal of the licensed surveyor or engineer. Water depths **MUST** be on survey. Surveys must be no larger than 11" x 17".

_____ **Drawings/Plans**

- * Must be drawn to scale with dimensions, separate or on survey. We will **NOT** accept hand-drawn drawings/plans – **MUST** be printed. Drawings/Plans must be no larger than 11" x 17".

_____ **Photographs**

- * Photographs of the proposed work area. Photographs must be no larger than 11" x 17".

_____ **Copies of any covenants or restrictions on the property** (if applicable)

_____ **Proof of insurance - \$1,000,000 minimum liability (UNDERGROUND UTILITY APP. ONLY)**

- * Licensee shall cause Licensor to be named an additional insured and as a certificate holder entitled to notice under such insurance policies. Licensor should be stated as follows:

*Southampton Town Trustees
116 Hampton Road
Southampton, NY 11968*

_____ **Notarized Indemnification and Hold Harmless (UNDERGROUND UTILITY APP. ONLY)**

_____ **An electrical permit from the Town of Southampton Building Department** (if applicable)

Applicant Signature: _____ **Date:** _____

PLEASE CHECK ONE:

- New Application:** \$500.00
- Renewal Application:** \$400.00
 - o Renew Permit #: _____
- Modification Application:** \$400.00
 - o Modify Permit #: _____
- Modification AND Renewal Application:** \$800.00
 - o Modify & Renew Permit #: _____
- As-Built Permit Application:** \$1,000.00

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DATE RECEIVED

GENERAL PERMIT APPLICATION COVER SHEET

PROPERTY INFORMATION:

Address of Proposed Project: _____

SCTM: _____ - _____ - _____ **Waterbody of Project:** _____

Previous Owner: _____ **Gated Property?** (If gated, call office to schedule access) YES NO

AGENT/CONTACT PERSON INFORMATION: (Check if same as owner)

Agency: _____ **Agent Name:** _____

Street Address: _____

Mailing Address: _____

Agent's Phone Number: _____ **Agent's E-mail:** _____

HOMEOWNER INFORMATION:

Owner(s) of Property: _____

Mailing Address: _____

Owner's Phone Number: _____ **Owner's E-mail:** _____

CONTRACTOR INFORMATION:

Contractor Company: _____ **Contractor's Name:** _____

Street Address: _____

Mailing Address: _____

Contractor's Phone Number: _____ **Contractor's E-mail:** _____

CHARACTER, DIMENSIONS, AND DESCRIPTION OF WORK (MUST BE TYPED):

We do not accept any Surveys, Drawings, Plans and/or Photographs larger than 11" x 17".

BREAKDOWN OF PROPOSED CONSTRUCTION

Piling _____ \$20.00 per piling Fixed Dock _____ \$5.00 per square foot Floating Dock _____ \$5.00 per square foot Steps or Stairs _____ \$5.00 per square foot Walkway/Ramp/Catwalk _____ \$5.00 per square foot Bulkheads _____ \$6.00 per linear foot Sand Fence _____ \$3.00 per linear Dredging/Spoil Site _____ \$15.00 per cubic yard Biolog Stabilization Structure _____ Boat Lift or Hoist _____ Jet Ski Lift or Hoist _____	Circulating Pump (Aerator) _____ Dewatering Construction _____ Drainage Structures _____ Dune Restoration _____ Kayak Rack _____ Phragmites Removal _____ Refuse Removal _____ Replant/Revegetate _____ Sand/Gravel Replenishment _____ Underground Utilities _____ Other _____
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_____ (applicant print name) says that he/she is the Owner Authorized Agent of the premises described in within the applications, and states that the applicant is authorized to make this application. The undersigned has read the rules of The Board of Trustees and Freeholders & Commonality of the Town of Southampton, a copy of which is attached hereto, and is familiar with same and agrees to fully comply with all of the provisions thereof, and has signed herof as part of this application.

Signature of Applicant: _____ **Date:** _____

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AGENT LETTER

I, _____ being duly sworn, depose and say that I am
the owner of the premises located at: _____

and I am designating: _____
to represent and act on my behalf as my agent, and to file the necessary documents to obtain
a permit(s).

Owner Signature

Date

Sworn to before me this _____ day of
_____, 20____

Notary Signature & Stamp

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AUTHORIZATION FORM

This form may not be signed by an agent of the property owner unless it is accompanied by a notarized document signed by the property owner authorizing the agent to sign and submit any and all forms, requests and applications related to the application(s) for subject premises.

Any authorization from the property owner as provided for herein shall remain in effect until final determination of the application(s), unless the Town is notified in writing by the property owner that such authorization has been revoked or amended. All authorizations from the property owner shall acknowledge this condition.

I, the owner, hereby authorize the Southampton Town Trustees and/or its agents, employees to enter the subject parcel in reference to an application to inspect the site and structures thereon. In addition, I authorize any future visits that would be in reference to the subject Trustees Application.

Property Address: _____

Name (type or print): _____

Signature: _____

ACKNOWLEDGEMENT

STATE OF _____)

ss:

COUNTY OF _____)

On the _____ day of _____, in the year _____, before me personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is/are subscribed to this instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Signature & Stamp

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:			
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
			YES
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO
			YES
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, adjoining and 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			

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p>	<p>YES</p>
<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>	<p>NO</p>	<p>YES</p>
<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>	<p>NO</p>	<p>YES</p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____</p>		

PRINT FORM