



# VILLAGE OF COLD SPRING

85 MAIN STREET, COLD SPRING, NY 10516  
TEL: (845) 265-3611 FAX: (845) 265-1002  
WEB: WWW.COLDSRINGNY.GOV

DAVE MERANDY, MAYOR  
MARIE EARLY, TRUSTEE  
HEIDI BENDER, TRUSTEE  
KATHLEEN E. FOLEY, TRUSTEE  
FRANCES MURPHY, TRUSTEE

JEFF VIDA KOVICH, CLERK/TREASURER  
MICHELLE ASCOLILLO, ACCOUNTANT  
LARRY BURKE, OFFICER-IN-CHARGE  
MATHEW KROOG, WATER SUPERINTENDENT  
ROBERT DOWNEY, HIGHWAY DEPT CREW CHIEF  
CHARLOTTE MOUNTAIN, CODE ENFORCEMENT OFFICER

## Board of Trustees

Tuesday Dec. 15, 2020 @ 6:00 PM

Via Video Conference Pursuant to Executive Order 202.1

1. Presentation of FY 2019-20 Audit Findings (EFPR Group)
2. Discussion w/ Greenplan regarding Code Update (T. Fink)
  - a. Resolution 21-2020 naming Village Board of Trustees Lead Agency for SEQR
3. TAB Presentation
4. Discussion on meeting schedule for remainder of December
  - a. Dec 22<sup>nd</sup> – Scheduled Board Workshop
  - b. Other dates?
5. Discussion on COVID-19
6. Old Business
  - a. Official Newspaper (currently PCNR)
    - i. Request to add The Current as additional official newspaper
  - b. Continued Discussion on Food Trucks
7. Approval of Bills - Batch #: 5835 Amount: \$53,494.15

**The public is invited to attend the meeting as follows:**

<https://zoom.us/j/94086293122?pwd=eVJpUnFZRUt5K3A3anhFLzIERG9SQTO9>

or to Join by Phone: (646) 558-8656

Meeting ID: 940 8629 3122 Password: 259033



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## 617.6 State Environmental Quality Review (SEQR) Resolution No. 21-2020 Establishing Lead Agency Type 1 Action

Name of Action: **Adoption of Village of Cold Spring Code Amendments**

The following resolution was offered by \_\_\_\_\_ for adoption and seconded by \_\_\_\_\_, to wit:

Whereas, the Village of Cold Spring Board of Trustees is considering adoption of a comprehensive set of amendments to the Village of Cold Spring Code, Putnam County, New York, and

Whereas, a Part 1 Full Environmental Assessment Form (EAF) dated December 11, 2020 was prepared to address adoption of the Code Amendments, and

Whereas, after comparing the thresholds contained in 6 NYCRR 617.4 and 5, the Village Board of Trustees has determined that the proposed action is a Type I Action that meets the thresholds found in 617.4(b)(2), and

Whereas, after examining the EAF, the Village Board of Trustees has determined that there are no other involved and/or federal agencies on this matter; the Village Planning Board and the Putnam County Planning Department are both designated interested agencies under SEQR.

Now Therefore Be It Resolved, that the Village of Cold Spring Board of Trustees hereby declares itself Lead Agency for the review of this action.

Be It Further Resolved, that a Determination of Significance will be made at such time as all information has been reviewed by the Village Board to enable it to determine whether the action will or will not have a significant effect on the environment.

On roll call vote:

Trustee Heidi Bender voted: \_\_\_\_\_

Trustee Marie Early voted: \_\_\_\_\_

Trustee Kathleen E. Foley voted: \_\_\_\_\_

Trustee Frances Murphy voted: \_\_\_\_\_

Mayor Dave Merandy voted: \_\_\_\_\_

This Resolution was officially adopted on \_\_\_\_\_ by a vote of \_\_\_\_\_.

---

Jeff Vidakovich, Village Clerk-Treasurer

Date

**Full Environmental Assessment Form  
Part 1 - Project and Setting**

**Instructions for Completing Part 1**

**Part 1 is to be completed by the applicant or project sponsor.** 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

**A. Project and Applicant/Sponsor Information.**

Name of Action or Project: Adoption of Village of Cold Spring Code Amendments		
Project Location (describe, and attach a general location map): Village of Cold Spring, Putnam County, NY (see attached map of the Village)		
Brief Description of Proposed Action (include purpose or need): See section F.1 for a description of the action.		
Name of Applicant/Sponsor: Village of Cold Spring Board of Trustees		Telephone: 845-265-3611
		E-Mail: mayor@coldspringny.gov
Address: 85 Main Street		
City/PO: Cold Spring	State: NY	Zip Code: 10516
Project Contact (if not same as sponsor; give name and title/role): Jeff Vidakovich, Village Clerk		Telephone: 845-265-3611
		E-Mail: vcsclerk@coldspringny.gov
Address: Same as Sponsor		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor): Not Applicable		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

**B. Government Approvals**

<b>B. <u>Government Approvals, Funding, or Sponsorship.</u></b> (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)		
<b>Government Entity</b>	<b>If Yes: Identify Agency and Approval(s) Required</b>	<b>Application Date (Actual or projected)</b>
a. City Counsel, Town Board, <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees	Village Board of Trustees adoption of code amendments	2021 - exact date to be determined
b. City, Town or Village Planning Board or Commission <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Planning Board advisory report on specific code amendments as per §§ 21-7 & 134-32	To be determined
c. City, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Putnam County Planning for GML § 239-m advisory review	To be determined
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Is the project site within a Coastal Erosion Hazard Area?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**C. Planning and Zoning**

<b>C.1. <u>Planning and zoning actions.</u></b>	
Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• If Yes, complete sections C, F and G.</li> <li>• If No, proceed to question C.2 and complete all remaining sections and questions in Part 1</li> </ul>	
<b>C.2. <u>Adopted land use plans.</u></b>	
a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, identify the plan(s): Hudson River Valley Greenway, Hudson River Valley National Heritage Area, Hudson Highlands Scenic Area of Statewide Significance and NYS designated Significant Coastal Fish & Wildlife Habitats	
_____	
_____	
c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, identify the plan(s):	
_____	
_____	
_____	

**C.3. Zoning**

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance.  Yes  No  
 If Yes, what is the zoning classification(s) including any applicable overlay district?  
 Cold Spring has 10 existing zoning districts including R-1, R-3, B-1, B-2, B-3, I-1, I-2, HHR, B-4, and B-4A  
 \_\_\_\_\_

b. Is the use permitted or allowed by a special or conditional use permit?      Not Applicable       Yes  No

c. Is a zoning change requested as part of the proposed action?  Yes  No  
 If Yes,  
 i. What is the proposed new zoning for the site? The Village Zoning Law and other Village Code provisions are proposed for amendment  
 \_\_\_\_\_

**C.4. Existing community services**

a. In what school district is the project site located? Haldane Central School District  
 \_\_\_\_\_

b. What police or other public protection forces serve the project site?  
 See Section F.2 below

c. Which fire protection and emergency medical services serve the project site?  
 Cold Spring Fire Company No.1, Philipstown Volunteer Ambulance Company  
 \_\_\_\_\_

d. What parks serve the project site?  
 See Section F.3 below.  
 \_\_\_\_\_

**D. Project Details**      Not Applicable

**D.1. Proposed and Potential Development**

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)?  
 \_\_\_\_\_

b. 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

c. Is the proposed action an expansion of an existing project or use?  Yes  No  
 i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % \_\_\_\_\_ Units: \_\_\_\_\_

d. Is the proposed action a subdivision, or does it include a subdivision?  Yes  No  
 If Yes,  
 i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)  
 \_\_\_\_\_  
 ii. Is a cluster/conservation layout proposed?  Yes  No  
 iii. Number of lots proposed? \_\_\_\_\_  
 iv. Minimum and maximum proposed lot sizes? Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

e. Will the proposed action be constructed in multiple phases?  Yes  No  
 i. If No, anticipated period of construction: \_\_\_\_\_ months  
 ii. If Yes:  
 • Total number of phases anticipated \_\_\_\_\_  
 • Anticipated commencement date of phase 1 (including demolition) \_\_\_\_\_ month \_\_\_\_\_ year  
 • Anticipated completion date of final phase \_\_\_\_\_ month \_\_\_\_\_ year  
 • Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

f. Does the project include new residential uses?  Yes  No  
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)?  Yes  No  
 If Yes,  
 i. Total number of structures \_\_\_\_\_  
 ii. Dimensions (in feet) of largest proposed structure: \_\_\_\_\_ height; \_\_\_\_\_ width; and \_\_\_\_\_ length  
 iii. Approximate extent of building space to be heated or cooled: \_\_\_\_\_ square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage?  Yes  No  
 If Yes,  
 i. Purpose of the impoundment: \_\_\_\_\_  
 ii. If a water impoundment, the principal source of the water:  Ground water  Surface water streams  Other specify: \_\_\_\_\_  
 iii. If other than water, identify the type of impounded/contained liquids and their source. \_\_\_\_\_  
 iv. Approximate size of the proposed impoundment. Volume: \_\_\_\_\_ million gallons; surface area: \_\_\_\_\_ acres  
 v. Dimensions of the proposed dam or impounding structure: \_\_\_\_\_ height; \_\_\_\_\_ length  
 vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): \_\_\_\_\_

**D.2. Project Operations**

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)  Yes  No  
 If Yes:  
 i. What is the purpose of the excavation or dredging? \_\_\_\_\_  
 ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?  
 • Volume (specify tons or cubic yards): \_\_\_\_\_  
 • Over what duration of time? \_\_\_\_\_  
 iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. \_\_\_\_\_  
 iv. Will there be onsite dewatering or processing of excavated materials?  Yes  No  
 If yes, describe. \_\_\_\_\_  
 v. What is the total area to be dredged or excavated? \_\_\_\_\_ acres  
 vi. What is the maximum area to be worked at any one time? \_\_\_\_\_ acres  
 vii. What would be the maximum depth of excavation or dredging? \_\_\_\_\_ feet  
 viii. Will the excavation require blasting?  Yes  No  
 ix. Summarize site reclamation goals and plan: \_\_\_\_\_

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area?  Yes  No  
 If Yes:  
 i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): \_\_\_\_\_

*ii.* Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*iii.* Will the proposed action cause or result in disturbance to bottom sediments?  Yes  No  
 If Yes, describe: \_\_\_\_\_

*iv.* Will the proposed action cause or result in the destruction or removal of aquatic vegetation?  Yes  No  
 If Yes:

- acres of aquatic vegetation proposed to be removed: \_\_\_\_\_
- expected acreage of aquatic vegetation remaining after project completion: \_\_\_\_\_
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): \_\_\_\_\_
- \_\_\_\_\_
- proposed method of plant removal: \_\_\_\_\_
- if chemical/herbicide treatment will be used, specify product(s): \_\_\_\_\_

*v.* Describe any proposed reclamation/mitigation following disturbance: \_\_\_\_\_

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*c.* Will the proposed action use, or create a new demand for water?  Yes  No  
 If Yes:

*i.* Total anticipated water usage/demand per day: \_\_\_\_\_ gallons/day

*ii.* Will the proposed action obtain water from an existing public water supply?  Yes  No  
 If Yes:

- Name of district or service area: \_\_\_\_\_
- Does the existing public water supply have capacity to serve the proposal?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No
- Do existing lines serve the project site?  Yes  No

*iii.* Will line extension within an existing district be necessary to supply the project?  Yes  No  
 If Yes:

- Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_
- Source(s) of supply for the district: \_\_\_\_\_

*iv.* Is a new water supply district or service area proposed to be formed to serve the project site?  Yes  No  
 If, Yes:

- Applicant/sponsor for new district: \_\_\_\_\_
- Date application submitted or anticipated: \_\_\_\_\_
- Proposed source(s) of supply for new district: \_\_\_\_\_

*v.* If a public water supply will not be used, describe plans to provide water supply for the project: \_\_\_\_\_

*vi.* If water supply will be from wells (public or private), what is the maximum pumping capacity: \_\_\_\_\_ gallons/minute.

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*d.* Will the proposed action generate liquid wastes?  Yes  No  
 If Yes:

*i.* Total anticipated liquid waste generation per day: \_\_\_\_\_ gallons/day

*ii.* Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): \_\_\_\_\_

\_\_\_\_\_

*iii.* Will the proposed action use any existing public wastewater treatment facilities?  Yes  No  
 If Yes:

- Name of wastewater treatment plant to be used: \_\_\_\_\_
- Name of district: \_\_\_\_\_
- Does the existing wastewater treatment plant have capacity to serve the project?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No



- Do existing sewer lines serve the project site?  Yes  No
- Will a line extension within an existing district be necessary to serve the project?  Yes  No

 If Yes:
 

- Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_

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iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?  Yes  No  
 If Yes:
 

- Applicant/sponsor for new district: \_\_\_\_\_
- Date application submitted or anticipated: \_\_\_\_\_
- What is the receiving water for the wastewater discharge? \_\_\_\_\_

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):  
 \_\_\_\_\_  
 \_\_\_\_\_

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vi. Describe any plans or designs to capture, recycle or reuse liquid waste: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?  Yes  No  
 If Yes:
 

- How much impervious surface will the project create in relation to total size of project parcel?  
 \_\_\_\_\_ Square feet or \_\_\_\_\_ acres (impervious surface)  
 \_\_\_\_\_ Square feet or \_\_\_\_\_ acres (parcel size)
- Describe types of new point sources. \_\_\_\_\_
- Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?  
 \_\_\_\_\_  
 \_\_\_\_\_
  - If to surface waters, identify receiving water bodies or wetlands: \_\_\_\_\_
  - Will stormwater runoff flow to adjacent properties?  Yes  No

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iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?  Yes  No

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f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?  Yes  No  
 If Yes, identify:
 

- Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)  
 \_\_\_\_\_
- Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)  
 \_\_\_\_\_
- Stationary sources during operations (e.g., process emissions, large boilers, electric generation)  
 \_\_\_\_\_

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g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit?  Yes  No  
 If Yes:
 

- Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year)  Yes  No
- In addition to emissions as calculated in the application, the project will generate:
  - \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide (CO<sub>2</sub>)
  - \_\_\_\_\_ Tons/year (short tons) of Nitrous Oxide (N<sub>2</sub>O)
  - \_\_\_\_\_ Tons/year (short tons) of Perfluorocarbons (PFCs)
  - \_\_\_\_\_ Tons/year (short tons) of Sulfur Hexafluoride (SF<sub>6</sub>)
  - \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
  - \_\_\_\_\_ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?  Yes  No  
 If Yes:  
 i. Estimate methane generation in tons/year (metric): \_\_\_\_\_  
 ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): \_\_\_\_\_

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i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?  Yes  No  
 If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): \_\_\_\_\_  
 \_\_\_\_\_

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j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services?  Yes  No  
 If Yes:  
 i. When is the peak traffic expected (Check all that apply):  Morning  Evening  Weekend  
 Randomly between hours of \_\_\_\_\_ to \_\_\_\_\_.  
 ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): \_\_\_\_\_  
 \_\_\_\_\_  
 iii. Parking spaces: Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Net increase/decrease \_\_\_\_\_  
 iv. Does the proposed action include any shared use parking?  Yes  No  
 v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: \_\_\_\_\_  
 \_\_\_\_\_  
 vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site?  Yes  No  
 vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles?  Yes  No  
 viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes?  Yes  No

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k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy?  Yes  No  
 If Yes:  
 i. Estimate annual electricity demand during operation of the proposed action: \_\_\_\_\_  
 \_\_\_\_\_  
 ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): \_\_\_\_\_  
 \_\_\_\_\_  
 iii. Will the proposed action require a new, or an upgrade, to an existing substation?  Yes  No

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l. Hours of operation. Answer all items which apply.  
 i. During Construction:  
 • Monday - Friday: \_\_\_\_\_  
 • Saturday: \_\_\_\_\_  
 • Sunday: \_\_\_\_\_  
 • Holidays: \_\_\_\_\_  
 ii. During Operations:  
 • Monday - Friday: \_\_\_\_\_  
 • Saturday: \_\_\_\_\_  
 • Sunday: \_\_\_\_\_  
 • Holidays: \_\_\_\_\_

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration: _____</p>
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>Describe: _____</p>
<p>n. Will the proposed action have outdoor lighting? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures: _____</p>
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>Describe: _____</p>
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p>
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p>
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p>i. Describe proposed treatment(s): _____</p>
<p>ii. Will the proposed action use Integrated Pest Management Practices? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> <li>• Construction: _____ tons per _____ (unit of time)</li> <li>• Operation : _____ tons per _____ (unit of time)</li> </ul> <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> <li>• Construction: _____</li> <li>• Operation: _____</li> </ul> <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> <li>• Construction: _____</li> <li>• Operation: _____</li> </ul>

s. Does the proposed action include construction or modification of a solid waste management facility?  Yes  No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): \_\_\_\_\_

ii. Anticipated rate of disposal/processing:

- \_\_\_\_\_ Tons/month, if transfer or other non-combustion/thermal treatment, or
- \_\_\_\_\_ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: \_\_\_\_\_ years

---

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste?  Yes  No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: \_\_\_\_\_

ii. Generally describe processes or activities involving hazardous wastes or constituents: \_\_\_\_\_

iii. Specify amount to be handled or generated \_\_\_\_\_ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: \_\_\_\_\_

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility?  Yes  No

If Yes: provide name and location of facility: \_\_\_\_\_

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: \_\_\_\_\_

**E. Site and Setting of Proposed Action**      Not Applicable

**E.1. Land uses on and surrounding the project site**

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

Urban     Industrial     Commercial     Residential (suburban)     Rural (non-farm)

Forest     Agriculture     Aquatic     Other (specify): \_\_\_\_\_

ii. If mix of uses, generally describe: \_\_\_\_\_

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b. Land uses and covertypes on the project site.

Land use or Covertypes	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces			
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____			

c. Is the project site presently used by members of the community for public recreation?  Yes  No  
i. If Yes: explain: \_\_\_\_\_

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  Yes  No  
If Yes,  
i. Identify Facilities: \_\_\_\_\_

e. Does the project site contain an existing dam?  Yes  No  
If Yes:  
i. Dimensions of the dam and impoundment:  
• Dam height: \_\_\_\_\_ feet  
• Dam length: \_\_\_\_\_ feet  
• Surface area: \_\_\_\_\_ acres  
• Volume impounded: \_\_\_\_\_ gallons OR acre-feet  
ii. Dam's existing hazard classification: \_\_\_\_\_  
iii. Provide date and summarize results of last inspection: \_\_\_\_\_

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility?  Yes  No  
If Yes:  
i. Has the facility been formally closed?  Yes  No  
• If yes, cite sources/documentation: \_\_\_\_\_  
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: \_\_\_\_\_  
iii. Describe any development constraints due to the prior solid waste activities: \_\_\_\_\_

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste?  Yes  No  
If Yes:  
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: \_\_\_\_\_

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?  Yes  No  
If Yes:  
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:  Yes  No  
 Yes – Spills Incidents database Provide DEC ID number(s): \_\_\_\_\_  
 Yes – Environmental Site Remediation database Provide DEC ID number(s): \_\_\_\_\_  
 Neither database  
ii. If site has been subject of RCRA corrective activities, describe control measures: \_\_\_\_\_  
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?  Yes  No  
If yes, provide DEC ID number(s): \_\_\_\_\_  
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): \_\_\_\_\_

v. Is the project site subject to an institutional control limiting property uses?  Yes  No

- If yes, DEC site ID number: \_\_\_\_\_
- Describe the type of institutional control (e.g., deed restriction or easement): \_\_\_\_\_
- Describe any use limitations: \_\_\_\_\_
- Describe any engineering controls: \_\_\_\_\_
- Will the project affect the institutional or engineering controls in place?  Yes  No
- Explain: \_\_\_\_\_

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**E.2. Natural Resources On or Near Project Site**

a. What is the average depth to bedrock on the project site? \_\_\_\_\_ feet

b. Are there bedrock outcroppings on the project site?  Yes  No  
 If Yes, what proportion of the site is comprised of bedrock outcroppings? \_\_\_\_\_ %

c. Predominant soil type(s) present on project site: \_\_\_\_\_ %  
 \_\_\_\_\_ %  
 \_\_\_\_\_ %

d. What is the average depth to the water table on the project site? Average: \_\_\_\_\_ feet

e. Drainage status of project site soils:  Well Drained: \_\_\_\_\_ % of site  
 Moderately Well Drained: \_\_\_\_\_ % of site  
 Poorly Drained \_\_\_\_\_ % of site

f. Approximate proportion of proposed action site with slopes:  0-10%: \_\_\_\_\_ % of site  
 10-15%: \_\_\_\_\_ % of site  
 15% or greater: \_\_\_\_\_ % of site

g. Are there any unique geologic features on the project site?  Yes  No  
 If Yes, describe: \_\_\_\_\_

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h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?  Yes  No

ii. Do any wetlands or other waterbodies adjoin the project site?  Yes  No

If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?  Yes  No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Lakes or Ponds: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Wetlands: Name \_\_\_\_\_ Approximate Size \_\_\_\_\_
- Wetland No. (if regulated by DEC) \_\_\_\_\_

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?  Yes  No

If yes, name of impaired water body/bodies and basis for listing as impaired: \_\_\_\_\_

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i. Is the project site in a designated Floodway?  Yes  No

j. Is the project site in the 100-year Floodplain?  Yes  No

k. Is the project site in the 500-year Floodplain?  Yes  No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?  Yes  No

If Yes:

i. Name of aquifer: \_\_\_\_\_

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____          _____          _____</p>	
<p>n. Does the project site contain a designated significant natural community? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:            i. Describe the habitat/community (composition, function, and basis for designation): _____            ii. Source(s) of description or evaluation: _____            iii. Extent of community/habitat:                • Currently: _____ acres                • Following completion of project as proposed: _____ acres                • Gain or loss (indicate + or -): _____ acres</p>	
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:            i. Species and listing (endangered or threatened): _____          _____</p>	
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:            i. Species and listing: _____          _____</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If yes, give a brief description of how the proposed action may affect that use: _____          _____</p>	
<b>E.3. Designated Public Resources On or Near Project Site</b>	
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>            i. If Yes: acreage(s) on project site? _____            ii. Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:            i. Nature of the natural landmark:   <input type="checkbox"/> Biological Community   <input type="checkbox"/> Geological Feature            ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____          _____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>          If Yes:            i. CEA name: _____            ii. Basis for designation: _____            iii. Designating agency and date: _____</p>	

e. 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
<i>i.</i> Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District	
<i>ii.</i> Name: _____	
<i>iii.</i> Brief description of attributes on which listing is based: _____	
f. 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 type="checkbox"/> Yes <input type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes:	
<i>i.</i> Describe possible resource(s): _____	
<i>ii.</i> Basis for identification: _____	
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
<i>i.</i> Identify resource: _____	
<i>ii.</i> Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____	
<i>iii.</i> Distance between project and resource: _____ miles.	
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
<i>i.</i> Identify the name of the river and its designation: _____	
<i>ii.</i> Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

**F. Additional Information**

See attached Section F for additional information


Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

**G. Verification**

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Village of Cold Spring Board of Trustees      Date December 15, 2020

Signature J. Theodore Fink, AICP       Title Village Planning Consultant



## Village of Cold Spring Code Amendments Full Environmental Assessment Form Section F Additional Information

- 1. Brief Description of the Action.** The Village Board of Trustees, with the assistance of a Code Update Committee and working under grants provided by the New York State Energy Research and Development Authority (NYSERDA) and the Hudson River Valley Greenway, has prepared a comprehensive set of amendments to the Village of Cold Spring Code, the proposed action. The Code amendments are intended to create an environment that encourages Smart Growth. To accomplish this, the Village Board proposes to amend its Village Code to encourage and enable future development and redevelopment that will save energy, increase use of renewable energy, save greenhouse gas emissions, avoid future emissions, and reduce future energy use.

Proposed Village Code amendments focus on walkability, access to transit, mixed-uses, and compact building design, among a wide number of other features. If adopted, the Village Code amendments will assist in achieving the overall vision and goals of the Village's Comprehensive Plan. This includes: 1) Preserve and enhance the small town, historic, neighborly, diverse and safe character of Village life; 2) Take full advantage of the Village's location on the Hudson River; 3) Protect the natural environment and conserve energy; 4) Enhance the economic vitality of the Village; 5) Ensure that community facilities and services meet the Village's needs and are efficient and affordable; 6) Control property taxes; and 7) Integrate new development with the traditional Village.

The Village Comprehensive Plan, adopted by the Village Board of Trustees on January 10, 2012, includes numerous policies related to changes to the Village Code and its recommendations for implementing these policies rest with the series of amendments proposed to the Village Code. For instance, the Village Zoning Law was originally adopted in 1967 and has been amended numerous times since then. The proposed action represents the first comprehensive update of the Village Code that has been undertaken since 2001.

There have been many changes to land uses, socio-economics, demographics, real estate development, and New York State's enabling laws that have occurred. This includes adoption of the 2012 Village Comprehensive Plan. The Comprehensive Plan includes a history of the Village's Working Groups and other Special Board reports and studies that were completed documenting the changes. It also includes the Village's efforts to complete and adopt a Local Waterfront Revitalization Program (LWRP). Many of the Code amendments must be in place before New

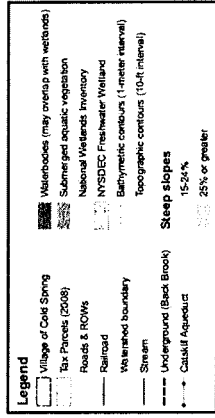
York State will consider approval of the Village's LWRP document, which was essentially completed in draft form in 2014. New York State Village Law § 7-722.11(a) also requires that: "All village land use regulations must be in accordance with a comprehensive plan adopted pursuant to this section." The proposed action has been designed to address each of the above.

2. **Police.** Local and other police departments serving the Village include New York State Police, Putnam County Sheriff's Department, Cold Spring Police Department, and the Metropolitan Transit Authority's Police Department
3. **Parks.** Public and private parks that are open to the public and serve Village residents include Waterfront Park, Foundry Dock Park, Dockside Park, Mayor's Park, West Point Foundry Preserve, McConville Park, Hudson Highlands State Park, and Fahnestock State Park.

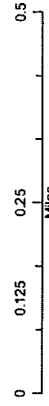
# Natural Resources

## Village of Cold Spring

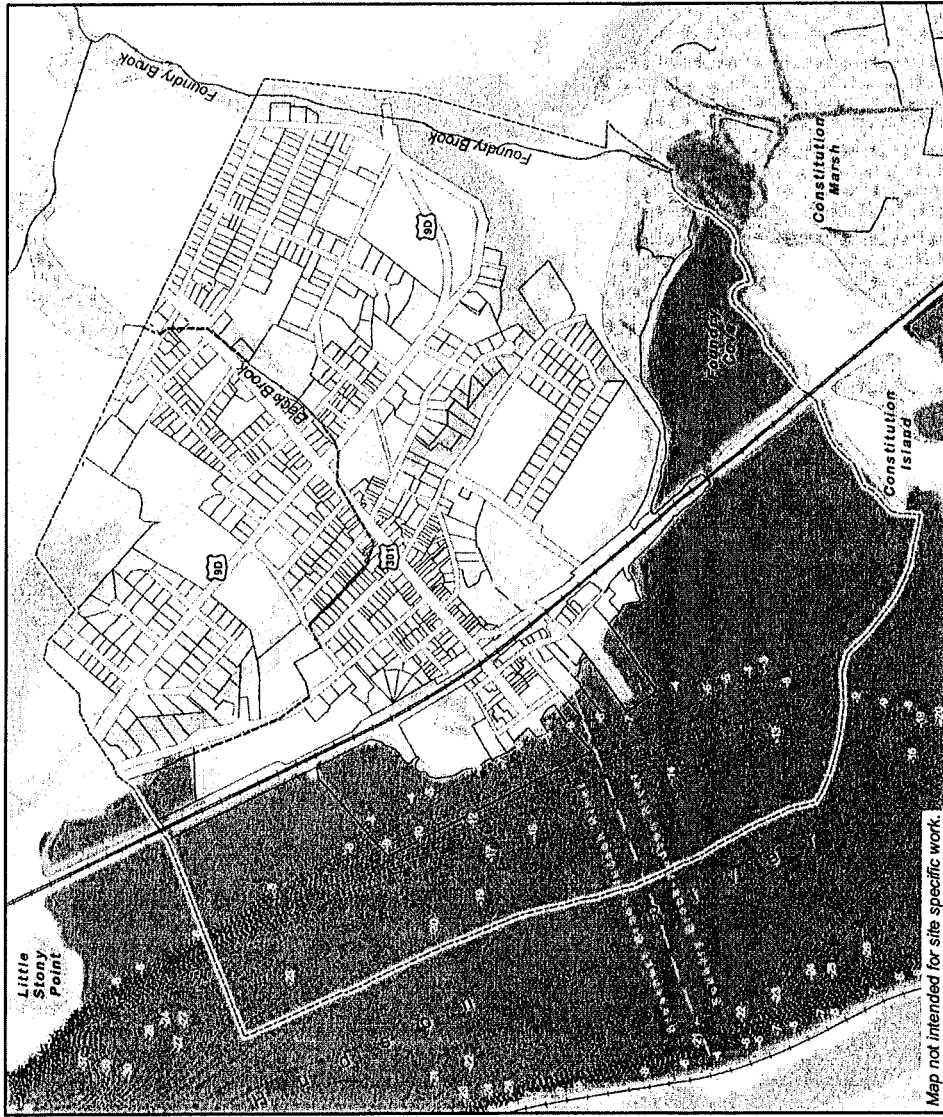
Putnam County, New York



Data sources:  
 Bathymetric contours: NYSDEC, 2008.  
 NWI: US Fish & Wildlife Service, National Wetlands Inventory, 2008.  
 NYSDEC Wetlands: Freshwater Wetlands For Putnam County (2006).  
 Railroad: NYSDOT, 2009.  
 Sleep slopes, topographic contours: Derived from 10-meter DEM, USGS, National Elevation data set.  
 Streams, watersheds: National Hydrography data, USGS.  
 Submerged aquatic vegetation: NYSDEC Hudson River Estuary Program, 2011.  
 Watersheds: 12 Digit Watershed Boundary Data 1:24,000, USGS.  
 Village boundary, tax parcels, roads & ROWs: Putnam County Real Property Tax Service, 2008.



Prepared by GREENPLAN, Inc.  
 August 2011



## A Message on COVID-19 from The Village Board of Trustees

COVID-19 rates in Putnam County are on the rise.<sup>1</sup> We do not yet have information about when a vaccine will be widely available.

While the state government is now looking at areas as microclusters, and Philipstown has a relatively low infection rate, it's important that we as a community continue to work together to stay healthy throughout the holiday season and the coming winter.

The Village Board of Trustees encourages everyone to follow CDC guidelines, including wearing a mask whenever you are near people you do not live with, or are heading to a busy area such as Main Street.

The cost of this pandemic has been high and many have faced hardship. Isolation is difficult and it is normal to want to connect with your community. If you plan to see friends or family, please consider the following:

- You are less likely to transmit COVID-19 if you gather outside in small numbers and stay at least 6 feet apart.<sup>2</sup>
- Masks are proven to help stop transmission.<sup>3</sup>
- The more people you come in close contact with, the more opportunities there are to spread or contract the virus.
- You can spread the virus to others even if you have no symptoms and are feeling fine.
- Testing for COVID-19 is free through New York State, even if you don't have health insurance.

In addition to hospitals and urgent care centers, many pharmacies are now offering COVID-19 testing. If you use a test site run by New York state there is no fee, but you should call ahead. Here are some resources to find our nearest testing centers:

- Anthony Wayne Recreation Center drive through NYS testing site: 1-888-364-3065, Palisades Parkway, Exit 17 Bear Mountain, NY 10911
- <https://www.hhs.gov/coronavirus/community-based-testing-sites>
- <https://www.projectbaseline.com/study/covid-19/>
- <https://covid19screening.health.ny.gov/>

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<sup>1</sup><https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Map?%3Aembed=yes&%3Atoolbar=no>

<sup>2</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

<sup>3</sup> <https://www.cdc.gov/media/releases/2020/p0714-americans-to-wear-masks.html>

You may also be able to request home testing kits through your health insurance.

This has been a difficult year and we appreciate you continuing to take measures to keep one another healthy. We will get through this together. If you are struggling, please take advantage of our community resources:

- The Philipstown HUB for assistance with mental health services: Confidential call/text 845-260-1001  
<https://www.philipstownhub.org/get-help>
- The Philipstown Food Pantry  
<https://www.presbychurchcoldspring.org/food-pantry.html>, [ptfp2481f@gmail.com](mailto:ptfp2481f@gmail.com)

Please continue to check on friends and neighbors, especially those who are alone or have special needs. And if you have the means, please consider donating to the Philipstown Food Pantry--the Pantry is spread very thin serving many more families than usual. Now more than ever, we need to look after each other.

Additionally, we are looking for local residents to share with the community why you wear a mask. Please send one to two sentences on why it's important to you to [trustee.bender@coldspringny.gov](mailto:trustee.bender@coldspringny.gov).