Onondaga County Planning Board

GML Referral Submission Form



Referral Contact:	Municipality:	
Job Title/Office:	Referring Board(s):	Municipal Board Planning Board Zoning Board of Appeals
Project is within 500 feet of (specify facility): State Road: County Road: County/State Property: (parkland, drainage channel or public buildings) Municipal Boundary with: Farm Operation in an Agricultural District (include Ag Data Statement)	Type of Review (*See instructions for guidance): OCPB Full Review Administrative Review Informal Review - by OCPB Informal Review – by SOCPA staff Drinking Water Service:	
Application Info: Project Applicant Name: Project Address: Total Acres:	Existing Municipal/OCWA Well None	<u>Proposed</u> Municipal/OCWA Well None
Current Zoning:	Wastewater / SewerService:	
Current Land Use: Tax ID Number(s):	<u>Existing</u> Municipal Septic System None	<u>Proposed</u> New Municipal NewSeptic System Adding Flow
SEQR Type of Action (Required):		No Changes

Project Description: Please provide adequate detail of the proposed action, including any future planned development

Status of Local Review / Related Actions / Notes: Please also attach any meeting minutes that would assist in OCPB review

Site Plan Describe proposed project

Special Use Permit Describe proposed project and relevant trigger(s) to require a Special Permit

Zone Change / Zoning Map Amendment Describe proposed zoning district and purpose for the zone change/amendment

Adoption / Amendments to Zoning Ordinances, Subdivision Regulations, Comprehensive Plans, and Related Local Laws Describe changes here and attach a document with track changes OR existing/proposed text with summary of changes

Subdivision / Resubdivision / Lot Line Amendments:

 Preliminary or Final Subdivision:

 Is this a Cluster Subdivision (Sec. 278 of NYS Town Law)?

 Proposed Land Uses / Other Details:

Use Variance Describe how the proposed project varies from local code requirements

Area Variance Describe how the proposed project varies from local code requirements

Other Authorization Indicate the referrable action and provide any other applicable details

A Reminder:

This referral, as required by NYS GML §239 I, m & n, must be accompanied by all materials required by and submitted to the referring body as an application on the proposed action, including <u>all materials required by the referring body</u> in order to make its determination of significance pursuant to SEQRA.

Did You Include

Short or Long EAF/ (**At least Part 1 required**) or EIS Local Application Forms Surveys / Site Plans / Subdivision Plans Text Amendments with Track Changes Local Minutes and Other Materials to Assist in Review