

Appendix C
State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR <i>Robert Pollock</i>	2. PROJECT NAME <i>Buttermilk Falls / SPA</i>
3. PROJECT LOCATION: Municipality <i>Marlborough</i> County <i>Ulster</i>	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <i>220 North Rd., Po. Box 442 Milton, NY 12547</i> <i>Between intersection of Mahoney Road + North Road.</i>	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: <i>Building #3 - Convert garage to exercise Room with Proposed Patio. Building #2 Convert From Garage to 80 Seat banquet Room/Kitchen with Rest Rooms. Proposed Deck + Second story Addition For Building #2 And SF increase From 552 SF to 3118 SF.</i>	
7. AMOUNT OF LAND AFFECTED: Initially <u><i>11.3</i></u> acres Ultimately <u><i>11.3</i></u> acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: <i>Resort Hotel + Day SPA</i>	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals: <i>UCHD - SEPTIC APPROVAL, ISSUED 9-10-02.</i> <i>NYS-DEC - SPDES Existing Permit issued 6-1-04.</i>	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals: <i>Site Plan APPROVAL</i>	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: <i>Robert Pollock</i> Date: <i>8-10-09</i> Signature: <i>[Signature]</i> <i>Edward SPRAGUE, Agent For APPLICANT -</i> <i>Medenbach + Eggers P.C.</i>	

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

