

**TOWN OF BROOKHAVEN WETLANDS PERMIT
AND COASTAL EROSION MANAGEMENT PERMIT
COMPLETE APPLICATION CHECKLIST**

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT WITHOUT REVIEW

To avoid delays in the processing of your application be sure that all the information indicated below is included (where applicable) with your application. **A complete application consists of the following:**

1. **Application Form** - Must be filled out completely. Be sure to include a complete project description, stating the type of structure or work proposed with specific dimensions and areas for all activities. The application must also include the Suffolk County Tax Map Number, the property location, and be signed by the applicant/owner and dated.
2. **Owner's Consent Form** - must be completed by the owner of the property if the applicant is someone other than the owner of the property.
3. **Affidavit of Indemnity Form** - Completed and signed by the owner of the property and by a Notary Public. The contract vendee of the property must sign a second affidavit, if applicable, and it must be notarized.
4. **A copy of the deed of the property and a copy of the last prepared survey.**
5. **Wetlands Application Fee** - All applications must be accompanied by a \$329.94 nonrefundable fee. Applications for flagging must be paid in full (\$329.94 for the first acre, and \$55.00 for each acre thereafter). Applicants who are legalizing pre-existing structures must, by Town Code, pay an additional permit fee of \$329.94. This fee must be paid at the time of application in addition to the minimum fee of \$329.94. Fees are set by the Town Board of the Town of Brookhaven and may not be waived by Town personnel. A schedule of fees is available from the Division of Environmental Protection.
6. **Two recent photos of the project area** (projects may require more than two photos for better verification). Photographs should show any relevant feature on the property (structures, dunes, ponding areas, shoreline, etc.) and the approximate area of construction. Photographs should be labeled with applicant's name, date, and the direction in which photo was taken.
7. **Survey or Project Plan (4 complete sets)** - ANY ACTIVITY WHICH REQUIRES A BUILDING PERMIT MUST HAVE A DETAILED PROJECT PLAN AND/OR SURVEY PREPARED BY A SURVEYOR, ENGINEER, ARCHITECT OR LANDSCAPE ARCHITECT WHO IS LICENSED BY THE STATE OF NEW YORK, UNLESS WAIVED BY THE DIVISION OF ENVIRONMENTAL PROTECTION. All plans or surveys should include all the information listed in the appropriate sections listed on the following pages and as listed in Chapter 81 of the Town Code. On any vacant lot, the surveyor, prior to the submission of the application, should stake out structure(s). All plans must be drawn in a scale no less detailed than one inch equals forty feet or in a scale as required to meet the guidelines as required in the Brookhaven Subdivision Regulations.
8. **Transactional Disclosure Form.**
9. **The applicant may be required to submit additional information and fees as required by the Town Code of the Town of Brookhaven or as deemed necessary by the Division of Environmental Protection to effectuate the provisions and intent of this local law.**

Town of Brookhaven: Application for a Wetlands and Waterways Permit
and/or
Coastal Erosion Management Permit

Applicant Information:

_____		_____	
name of applicant		phone/fax	
_____	_____	_____	_____
mailing address/PO Box	Hamlet	State	Zip Code
_____		_____	
name of property owner (if different from above)		phone/fax	
_____	_____	_____	_____
mailing address/PO Box	Hamlet	State	Zip Code
_____		_____	
name of agent (if any)		phone/fax	
_____	_____	_____	_____
mailing address/PO Box	Hamlet	State	Zip Code

Project Location: N S E W side of _____, # _____
name of street house number
 _____ feet N S E W of _____,
distance in feet nearest cross street Hamlet

S.C. Tax #: _____ **Item #** _____
District Section Block Lot per tax bill

Applicant Requests: Wetlands Permit Coastal Erosion Management Permit Combined Permit
 Wetlands Delineation Only

Project Description: Bulkhead Dock Residence Accessory Structure Addition to Existing Structure
 (check all that apply) Other _____ New Existing

Dimensions: _____

This project will require the following Town of Brookhaven approvals: Building Permit
 HDA Zoning Board Approval Site Plan Approval Subdivision Approval (Planning Board)

This permit will require additional permits from the following agencies:
 S.C. Dept. of Health Services N.Y. State D.E.C. Army Corps of Engrs.

Certification:

The applicant/owner of the property certifies that the above statements are true and agrees that the issuance of the permit is based on the accuracy thereof. As a condition of the issuance of a permit, the applicant accepts full legal responsibility for all damage direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless the Town from suits, actions, damages and costs of every name and description resulting from said project.

 Signature of Applicant/Agent

 Signature of Owner (if not the same)

Dated: _____

For office use only:

_____ Received check \$ _____ Application Number _____ - _____ - _____

SEQR Type _____ Analyst _____ Category _____

For additional information, contact:

Town of Brookhaven, Division of Environmental Protection, One Independence Hill, Farmingville, NY 11738 (631) 451-6455

All plans/surveys must include the following information:

1. Location of all existing structures and proposed structures, including but not limited to docks, decks, swimming pools, bulkheads, sheds, tennis courts, retaining walls, etc.
2. Location of any wetlands (tidal or freshwater) or surface waters. Tidally influenced bodies of water must indicate the apparent high water mark and the apparent low water mark and the date and time the measurements were taken.
3. The applicant's name, the Preparer of the plan/survey, date prepared and any revision dates.

A. All plans for residential or accessory structures must be done by a licensed surveyor, architect or engineer and include the following:

1. Limits of clearing, filling or disturbance to vegetation.
2. The limit of wetlands, the date and the person or agency who provided the delineation should be marked. Any waterbody adjacent to or on the project site should be indicated and shaded.
3. An accurate depiction and location of either the proposed or existing sanitary system including a cross-sectional diagram, the system's distance to Apparent High Water and/or the edge of any wetlands or waterbody; any dry well(s) and their recharge capacity; location and date of a recent test hole result showing depth to groundwater; and the distance to any private well. If retaining wall(s) are required, top and bottom elevation should be indicated at each corner of the retaining wall(s) and the total amount of fill required.
4. If fill is required for the construction, then the type and source of material, existing and proposed contours at 1 or 2 foot intervals using National Geodetic Vertical Datum (NGVD) or Town of Brookhaven Datum must be provided. The flood zone designation should be indicated and proof that the structure will comply with the rules and regulations of the appropriate flood zone.
5. For primary residential structures or large impervious surfaces such as tennis courts and driveways, drainage calculations should be provided for four (4") inches of rainfall and adequate containment and overflow structures indicated.

B. Bulkhead, Revetment, Retaining Wall or Gabions Jetties, Groins and Breakwaters

1. Location of proposed and existing structure(s), Apparent High Water, Apparent Low Water or wetland edge, distance to existing or proposed structure(s) or reference points (i.e. house, roads, property line, monument). In addition, the survey should indicate any bulkheads within 100 feet of the proposed bulkhead.
2. Cross Sectional Plan View, drawn to scale, of the structure(s) should include: location of and Storm or Spring High Water; existing and proposed elevations seaward and landward of proposed structure according to National Geodetic Vertical Datum (NGVD) or Town of Brookhaven datum, and complete construction detail with specific dimensions.
3. Outline of excavation and/or fill. State amount, type and source of all required fill.
4. If the bulkhead is going to tie into that of the adjacent property, then consent from the appropriate property owner is required.
5. For any new Bulkhead or Erosion Control Device the following MUST be submitted with the application:
 - a. estimate of erosion over preceding twenty (20) years and identification of the cause of erosion.
 - b. analysis of available non-structural erosion protection measures. Before a structural measure can be considered for approval, the impracticality of non-structural measures must be shown.

C. Dock, Catwalk, Pier, Bridge:

1. Location of proposed structure(s) in relation to Mean High water or wetland edge, and distances to any existing structure(s).
 2. Cross-sectional plan/view showing structure, dimensions and elevations above Mean Low Water, Mean High Water, and identified wetlands.
- *** The Town Code of the Town of Brookhaven requires all piers and docks to be placed a minimum of 3.5 feet above any wetlands, not be located within 10 feet of any side property line, be of open construction, and have a maximum length not to exceed 15% the width of the waterway, 150 feet or end at a water depth not to exceed 3.0 feet. ***

D. Dredging:

1. Cross-sectional plan view of the area to be dredged to include depth below the Low Water mark showing proposed depths in relation to National Geodetic Vertical Datum and adjacent slope.
2. Amount, in cubic yards, showing how this was determined, and type of sediment to be removed.
3. Means of dredging (i.e. hydraulic, clam shell bucket).
4. Limits of proposed spoil site and cross sectional diagram of spoil site indicating containment volume and interior and exterior elevations according to NGV datum. If dredging is to be done hydraulically, a complete diagram of the dewatering system should be included.
5. Authorization by the owner for the use of the spoil site.

If you have any questions or require assistance, you may call the Town of Brookhaven Division of Environmental Protection at (631) 451-6455 between 9 AM and 4:30 PM. Before coming to the offices of the Division of Environmental Protection, One Independence Hill, Farmingville, NY 11738, it is recommended that you call for an appointment.

TOWN OF BROOKHAVEN

OWNERS CONSENT FORM

Date: _____

Town of Brookhaven
Division of Environmental Protection
One Independence Hill
Farmingville, New York 11738

RE: Application for a Wetlands & Waterways Permit for _____
(Owner's Name)

SUFFOLK COUNTY Tax # of parcel(s) _____

To whom it may concern:

Please be advised that I am the owner of record for the above referenced property and hereby consent to

_____ making an application for a WETLANDS & WATERWAYS
(Name of agent or contract vendee)

PERMIT/COASTAL EROSION MANAGEMENT PERMIT to the Division of Environmental Protection.

As owner of the property, I understand that I will receive copies of all correspondence unless noted below. I also acknowledge that as the owner, I am responsible for all activities that take place on the property identified above.

Sincerely,

(Signature of Owner)

Date

The applicant is the contract vendee of the property and I do not wish to receive copies of any correspondence.

AFFIDAVIT-OF-INDEMNITY
CORPORATION

KNOW ALL MEN BY THESE PRESENTS:

That _____ hereinafter referred to as Applicant, as a responsible party/officer of the corporation known as _____, located at _____, County of _____, State of _____, for the purpose of obtaining a permit pursuant to Chapter 81, Section 81-9 and/or Chapter 76 of the Code of the Town of Brookhaven, having been duly sworn does hereby depose and say that:

In consideration of the issuance of said permit, the Applicant does hereby agree to indemnify and save harmless the Town of Brookhaven, its employees, agents and public officers, against any and all damages to property or injuries to or death of any person or persons, including property and employees, public officers, or agents of the Town of Brookhaven, and shall defend, indemnify, and save harmless the Town of Brookhaven, its employees, agents, and public officers, from any and all claims, demands, suits, actions, or proceedings of any kind or nature, of or by anyone whomsoever in any way resulting from or arising out of operations connected with the issuance of the permit. This indemnification shall be binding upon any assignees, heirs or successors in interest.

Additionally, the applicant does hereby agree to allow employees of the Town of Brookhaven, in conjunction with this application, to inspect the project site as necessary.

IN WITNESS WHERE OF I have hereto set my hand this ____ day of _____, 20____

APPLICANT

STATE OF NEW YORK ↵

-SS.:

COUNTY OF SUFFOLK ↵

On the ____ day of _____, in the year 20____, before me, the undersigned, a Notary Public in and for said State, 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 the within 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

AFFIDAVIT-OF-INDEMNITY
INDIVIDUAL
(Contract Vendee)

KNOW ALL MEN BY THESE PRESENTS:

That _____, as the contract vendee of the project property and hereinafter referred to as Applicant, residing at _____, _____, County of _____, State of _____, for the purpose of obtaining a Permit pursuant to Chapter 81, Section 81-9 and/or Chapter 76 of the Code of the Town of Brookhaven, having been duly sworn does hereby depose and say that:

In consideration of the issuance of said permit, the Applicant does hereby agree to indemnify and save harmless the Town of Brookhaven, its employees, agents and public officers, against any and all damages to property or injuries to or death of any person or persons, including property and employees, public officers, or agents of the Town of Brookhaven, and shall defend, indemnify, and save harmless the Town of Brookhaven, its employees, agents, and public officers, from any and all claims, demands, suits, actions, or proceedings of any kind or nature, of or by anyone whomsoever, in any way resulting from or arising out of operations connected with the issuance of the permit. This indemnification shall be binding upon any assignees, heirs or successors in-interest.

Additionally, the applicant does hereby agree to allow employees of the Town of Brookhaven, in conjunction with this application, to inspect the project site as necessary.

IN WITNESS WHEREOF I have hereto set my hand this ____ day of _____, 20_____

Contract Vendee's Signature

STATE OF NEW YORK↵

↵SS.:

COUNTY OF SUFFOLK↵

On the ____ day of _____, in the year 2____, before me, the undersigned, a Notary Public in and for said State, 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 the within 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)

TOWN OF BROOKHAVEN BOARD OF ETHICS
TRANSACTIONAL DISCLOSURE FORM

APPLICANT NAME:

LAST NAME, FIRST NAME

APPLICANT ADDRESS:

STREET, APT.

CITY

STATE

ZIP CODE

NATURE OF APPLICATION: (CHECK ALL THAT APPLY)

- | | |
|---|--|
| <input type="checkbox"/> TAX GRIEVANCE | <input type="checkbox"/> APPROVAL OF PLAT |
| <input type="checkbox"/> VARIANCE | <input type="checkbox"/> EXEMPTION FROM PLAT OR OFFICIAL MAP |
| <input type="checkbox"/> AMENDMENT | <input type="checkbox"/> LICENSE OR PERMIT |
| <input type="checkbox"/> CHANGE OF ZONE | <input type="checkbox"/> OTHER: _____ |

DOES ANY OFFICER OF THE STATE OF NEW YORK, OFFICER OR EMPLOYEE OF THE TOWN OF BROOKHAVEN, OFFICER OR EMPLOYEE OF SUFFOLK COUNTY, OFFICER OF A POLITICAL PARTY IN SUFFOLK COUNTY OR HIS OR HER SPOUSE, BROTHER, SISTER, PARENT, CHILD, GRANDCHILD, OR THE SPOUSE OF ANY OF THEM HAVE AN INTEREST IN THIS APPLICATION BY VIRTUE OF BEING THE ACTUAL APPLICANT, OR, BY VIRTUE OF HAVING AN INTEREST IN THE CORPORATION, PARTNERSHIP, OR ASSOCIATION MAKING SUCH APPLICATION?

YES

NO

IF YOU ANSWERED "YES", COMPLETE THE REST OF THE FORM AND DATE AND SIGN WHERE INDICATED.

IF YOU ANSWERED "NO", SIMPLY SIGN AND DATE THE FORM WHERE INDICATED.

INTERESTED PARTY AND NATURE OF INTEREST

NAME: _____

ADDRESS: _____

TITLE: _____

DEPARTMENT: _____

RELATIONSHIP TO PUBLIC OFFICER/EMPLOYEE AND HIS OR HER TITLE IF OTHER THAN SELF: _____

INTERESTED PARTY:

- | | YES | NO |
|---|--------------------------|--------------------------|
| A.) IS THE OWNER OF GREATER THAN FIVE PERCENT (5%) OF THE CORPORATE STOCK OF THE APPLICANT WHEN THE APPLICANT IS A CORPORATION WHOSE STOCK IS LISTED ON THE NEW YORK OR AMERICAN STOCK EXCHANGES; | <input type="checkbox"/> | <input type="checkbox"/> |
| B.) THE ACTUAL APPLICANT; | <input type="checkbox"/> | <input type="checkbox"/> |
| C.) AN OFFICER, DIRECTOR, PARTNER, OR EMPLOYEE OF THE APPLICANT; OR | <input type="checkbox"/> | <input type="checkbox"/> |
| D.) LEGALLY OR BENEFICIALLY OWNS OR CONTROLS ANY STOCK OF A NON-PUBLICLY TRADED CORPORATE APPLICANT OR IS A MEMBER OF A PARTNERSHIP OR ASSOCIATION OF THE APPLICANT. | <input type="checkbox"/> | <input type="checkbox"/> |

DATE

SIGNATURE OF APPLICANT