Department of State



JOINT APPLICATION FORM

For Permits for activities activities affecting streams, waterways, waterbodies, wetlands, coastal areas, sources of water, and endangered and threatened species.

You must separately apply for and obtain Permits from each involved agency before starting work. Please read all instructions.

| 1. Applications To: | |
|--|--|
| >NYS Department of Environmental Conservation | Check here to confirm you sent this form to NYSDEC. |
| Check all permits that apply: Dams and Impound- Stream Disturbance ment Structures | ☐ Tidal Wetlands ☐ Water Withdrawal ☐ Wild, Scenic and ☐ Long Island Well |
| Excavation and Fill in 401 Water Quality Navigable Waters Certification * | Recreational Rivers Incidental Take of Coastal Erosion Endangered / |
| □ Docks, Moorings or | Management Threatened Species* See Instructions Page 3 |
| >US Army Corps of Engineers | Check here to confirm you sent this form to USACE. |
| Check all permits that apply: Section 404 Clean Wa | ater Act Section 10 Rivers and Harbors Act |
| Is the project Federally funded? Yes No | |
| If yes, name of Federal Agency: | |
| General Permit Type(s), if known: | |
| Preconstruction Notification: Yes No | |
| >NYS Office of General Services | Check here to confirm you sent this form to NYSOGS. |
| Check all permits that apply: State Owned Lands Under Water Utility Easement (pipelines, conduits, ca | ables, etc.) Docks, Moorings or Platforms |
| , | books, woorings or reactions |
| >NYS Department of State Check if this applies: Coastal Consistency Concur | Check here to confirm you sent this form to NYSDOS. |
| >NYS Department of State Check if this applies: Coastal Consistency Concur | Check here to confirm you sent this form to NYSDOS. |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC Mailing Address P.O. BOX 442 | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 Post Office / City State Zip |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC Mailing Address P.O. BOX 442 | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 Post Office / City Ferndale NY 12734 |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC Mailing Address P.O. BOX 442 Telephone 516-398-5886 Email jriato1@ | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 Post Office / City Ferndale Ogmail.com |
| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC Mailing Address P.O. BOX 442 Telephone 516-398-5886 Email jriato1@ Applicant Must be (check all that apply): Owner 3. Name of Property Owner (if different than Applicant) | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 Post Office / City Ferndale Ogmail.com |
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| >NYS Department of State Check if this applies: Coastal Consistency Concur 2. Name of Applicant Riato Stone, LLC Mailing Address P.O. BOX 442 Telephone 516-398-5886 Email jriato1@ Applicant Must be (check all that apply): Owner 3. Name of Property Owner (if different than Applicant) Riato Stone, LLC Mailing Address P.O. BOX 442 | Check here to confirm you sent this form to NYSDOS. rrence Taxpayer ID (if applicant is NOT an individual) 58-65154 Post Office / City Ferndale NY 12734 Post Office / City Lessee Post Office / City Ferndale NY 12734 |

JOINT APPLICATION FORM – Continued. Submit this completed page as part of your Application.

| 4. Name of Contact / Agent | 1 |
|--|--|
| Paul M. Adel, PE Mailing Address | Post Office / City State Zip |
| 19 British American Boulevard | |
| 19 Billish American Boulevaru | Latham |
| Telephone (518) 218-5638 Email padel@ | 2jmt.com |
| | |
| 5. Project / Facility Name | Property Tax Map Section / Block / Lot Number: |
| Riato Stone, LLC Project Street Address, if applicable | Post Office / City State Zip |
| 40 McIntosh Road | NV |
| To Midiliosh Road | Liberty 12754 |
| Provide directions and distances to roads, intersections, brid | dges and bodies of water |
| | |
| ✓ Town Village City County | Stream/Waterbody Name |
| Fallsburg | NYSDEC Wetland (Buffer Area): LE-20 |
| Project Location Coordinates: Enter Latitude and Longitude | |
| Latitude: 41 ° 48 ' 7 " | Longitude: 74 ° 41 ' 10 " |
| | |
| Project Description: Provide the following information a any additional information on other pages. <u>Attach plans on</u> | |
| | separate pages. |
| a. Purpose of the proposed project: | |
| To construct an outfall structure within a wetland buffer zone to allow for | or occasional discharge from an onsite stormwater management pond. |
| | |
| | |
| b. Description of current site conditions: | |
| See Engineer's Report prepared by JMT of New York, Inc., dated Dece | ember 2021 for pre/post-development conditions and additional |
| information. | |
| | |
| c. Proposed site changes: | |
| See Engineer's Report prepared by JMT of New York, Inc., dated Dece | ember 2021 for pre/post-development conditions and additional |
| information. | |
| | |
| d. Type of structures and fill materials to be installed, and | augntity of materials to be used (e.g., square feet of |
| coverage, cubic yards of fill material, structures below of | |
| One (1) HDPE pipe: 3 x 30 inch x 70 feet; pipe bedding: approximately | |
| cubic yards over approximately 800 square feet; headwall bank rip rap: | approximately 25 cubic yards over approximately 330 square feet. |
| | |
| a. Area of executation or dradging, volume of material to be | removed location of dradged material placement: |
| e. Area of excavation or dredging, volume of material to be | proximately 900 square feet. Spoils to be placed in upland areas within |
| mine site. | sproximately 300 square reet. Opolis to be placed in upland areas within |
| | |
| | |
| <u> </u> | es, explain below. No |
| Timing of the proposed cutting or clearing (month/year) | |
| Number of trees to be cut: <5 Acre | eage of trees to be cleared: 0.025 |

JOINT APPLICATION FORM – Continued. Submit this completed page as part of your Application.

| Indusry-standard practices will be employed to in | nclude an excavator and backhoe. |
|--|--|
| . Describe the planned sequence of ac | ctivities: |
| | ill from construction area; (2) Excavate outlet area; (3) Dig trench across road; (4) Lay pipe and be energy dissipation apron rip rap; (7) Revegetate disturbed areas used to construct the outlet; after vegetation re-established. |
| Pollution control methods and other a | actions proposed to mitigate environmental impacts: |
| Silt fence will be set up between construction are | ea and wetland boundary. |
| Drawings and details are included in the Engine Engineer's Report for additional details. | er's Report prepared by JMT of New York, Inc., dated December 2021. Please refer to the |
| Erosion and silt control methods that | will be used to prevent water quality impacts: |
| Silt fence will be set up between construction are | ea and wetland boundary. |
| Drawings and details are included in the Engined Engineer's Report for additional details. | er's Report prepared by JMT of New York, Inc., dated December 2021. Please refer to the |
| Alternatives considered to avoid reguminimize impacts: | ulated areas. If no feasible alternatives exist, explain how the project will |
| boundary- only within the 100-foot wetland buffe | ed location. As the stormwater feature will not be situated within the delineated wetland er- there are only minimal temporary impacts associated with construction anticipated. ment design as a whole is an improvement to current conditions. Please see Engineer's Report mber 2021 for details. |
| Proposed use: 🗸 Private 🔲 I | Public Commercial |
| n. Proposed Start Date: Spring 2022 | Estimated Completion Date: Spring 2022 |
| . Has work begun on project? | Yes If Yes, explain below. ✓ No |
| | |
| . Will project occupy Federal, State, or | r Municipal Land? Yes If Yes, explain below. ✓ No |
| | |
| . List any previous DEC, USACE, OGS | S or DOS Permit / Application numbers for activities at this location: |
| NYSDEC Mined Land Reclamation Permit: #3- NYSDEC Air Facility Registration: #3-4828-000 SPDES MSGP NYR00G576 | |
| | deral, State, or Local authorizations, including zoning changes? |
| . Will this project require additional Fed | |
| . Will this project require additional Fed — Yes If Yes, list below. | ✓ No |

| 7. | Sig | na | atu | res |
|----|-----|------|-----|-----|
| | ٩рр | lica | ant | and |
| | | _ | | |

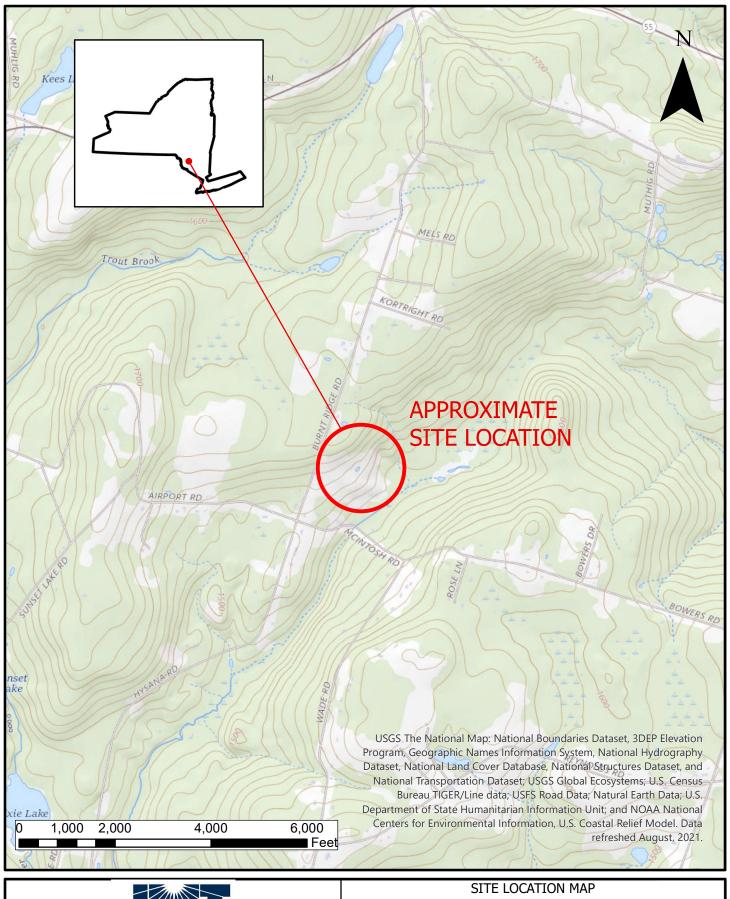
Applicant and Owner (If different) must sign the application. If the applicant is the landowner, the landowner attestation form can be used as an electronic signature as an alternative to the signature below, if necessary. Append additional pages of this Signature section if there are multiple Applicants, Owners or Contact/Agents.

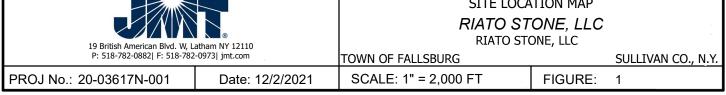
I hereby affirm that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief.

Permission to Inspect - I hereby consent to Agency inspection of the project site and adjacent property areas. Agency staff may enter the property without notice between 7:00 am and 7:00 pm, Monday - Friday. Inspection may occur without the owner, applicant or agent present. If the property is posted with "keep out" signs or fenced with an unlocked gate, Agency staff may still enter the property. Agency staff may take measurements, analyze site physical characteristics, take soil and vegetation samples, sketch and photograph the site. I understand that failure to give this consent may result in denial of the permit(s) sought by this application.

False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law. Further, the applicant accepts full 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 State from suits, actions, damages and costs of every name and description resulting from said project. In addition, Federal Law, 18 U.S.C., Section 1001 provides for a fine of not more than \$10,000 or imprisonment for not more than 5 years, or both where an applicant knowingly and willingly falsifies, conceals, or covers up a material fact, or knowingly makes or uses a false, fictitious or fraudulent statement.

| material fact, or knowingly makes or uses | |
|---|--|
| Signature of Applicant | Date |
| Marca of the | 5/23/2022 |
| Applicant Must be (check all that apply) | Owner Operator Lessee |
| Printed Name | Title |
| James Scandariato | Manager |
| Signature of Owner (if different than App | licant) Date |
| | |
| Printed Name | Title |
| | |
| | |
| Signature of Contact / Agent | <u>Date</u> |
| 10 | 5/23/2022 |
| July gen | 711. |
| Printed Name | Title |
| JAMES SCANAGERAT | O MANAGER |
| | |
| For Agency Use Only DETER | MINATION OF NO PERMIT REQUIRED |
| | Agency Application Number |
| | (Agency Name) has determined that No Permit is |
| required from this Agency for the project | described in this application. |
| Agency Representative: | Title |
| Printed Name | Lifte |
| | |
| Signature | Date |







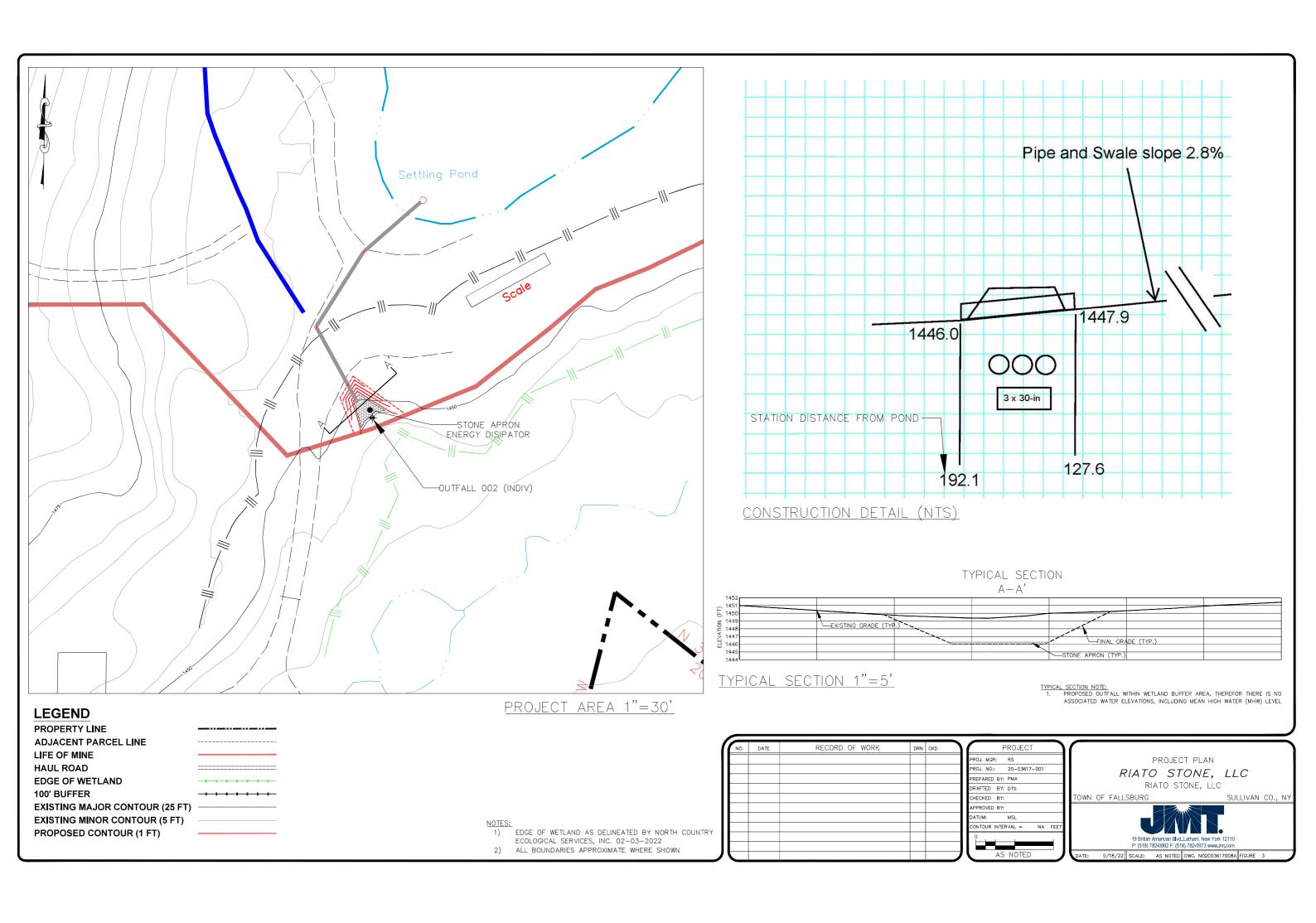


1963 AERIAL IMAGE RIATO STONE, LLC RIATO STONE, LLC

TOWN OF FALLSBURG

SULLIVAN CO., N.Y.

PROJ No.: 20-03617N-001 | Date: 12/2/2021 | SCALE: 1" = 2,000 FT | FIGURE: 2



PHOTOGRAPHIC LOG

Riato Stone, LLC

Riato Stone, LLC - Wetland Permit Application TOWN OF FALLSBURG, SULLIVAN COUNTY, NEW YORK





View from entrance looking northeast towards the wetland buffer

Proposed Outfall 002 (INDIV) location from the entrance road. Viewed towards the northeast.

PHOTOGRAPHIC LOG

Riato Stone, LLC

Riato Stone, LLC - Wetland Permit Application TOWN OF FALLSBURG, SULLIVAN COUNTY, NEW YORK





Proposed Outfall 002 (INDIV) location viewed towards the north

Picture of the wetland from the site of proposed Outfall 002 (INDIV). Viewed towards the southeast.

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: | | |
|---|--|---------------------------|
| Riato Stone, LLC - Site Expansion | | |
| Project Location (describe, and attach a general location map): | | |
| North side of McIntosh Road, Town of Fallsburg | | |
| Brief Description of Proposed Action (include purpose or need): | | |
| Riato Stone, LLC seeks to expand their existing sand and gravel mining operations north ea area for an additional 15.3 +/- acres. The current Life-of-Mine at the Riato Stone, LLC is lo and the proposed total Life-of-Mine affected area is 33.5+/- acres. Although no increase in p would increase available reserves. | cated in Fallsburg, Sullivan County, N | New York is 18.2+/- acres |
| | | |
| Name of Applicant/Sponsor: | Telephone: (631)-495-3442 | |
| Riato Stone, LLC | E-Mail: JRIATO1@GMAIL.COM | |
| Address: PO BOX 442 | | |
| City/PO: Ferndale | State: NY | Zip Code: 12734 |
| Project Contact (if not same as sponsor; give name and title/role): | Telephone: (576) 398-5886 | |
| JAMES SCANDARIATO | E-Mail: JRIATO1@GMAIL.COM | |
| Address: | | |
| City/PO: | State: | Zip Code: |
| Property Owner (if not same as sponsor): | Telephone: | 1 |
| Riato Stone, LLC | E-Mail: | |
| Address: | | |
| City/PO: | State: | Zip Code: |
| | | |

B. Government Approvals

| B. Government Approvals, assistance.) | Funding, or Spor | nsorship. ("Funding" includes grants, loans, ta | ax relief, and any othe | r forms of financial |
|--|--------------------------------------|---|-------------------------|--------------------------|
| Government E | ntity | If Yes: Identify Agency and Approval(s) Required | Applicati (Actual or | |
| a. City Counsel, Town Board or Village Board of Truste | | | | |
| b. City, Town or Village Planning Board or Commi | □Yes ☑ No ission | | | |
| c. City, Town or Village Zoning Board of A | □Yes ☑ No Appeals | | | |
| d. Other local agencies | □Yes ☑ No | | | |
| e. County agencies | □Yes ☑ No | | | |
| f. Regional agencies | □Yes ☑ No | | | |
| g. State agencies | ☑ Yes□No | NYSDEC MLR, NYSDEC SPDES | 12/2021 | |
| h. Federal agencies | ∐Yes ∑ No | | | |
| i. Coastal Resources. i. Is the project site withi | n a Coastal Area, o | or the waterfront area of a Designated Inland W | Jaterway? | □Yes ☑ No |
| ii. Is the project site locateiii. Is the project site within | | with an approved Local Waterfront Revitaliza Hazard Area? | tion Program? | ☐ Yes ☑ No ☐ Yes ☑ No |
| C. Planning and Zoning | | | | |
| C.1. Planning and zoning a | | | | |
| only approval(s) which must • If Yes, complete sec | be granted to enabetions C, F and G. | mendment of a plan, local law, ordinance, rule ble the proposed action to proceed? Inplete all remaining sections and questions in I | - | □Yes ☑ No |
| C.2. Adopted land use plans | S. | | | |
| where the proposed action | would be located? | lage or county) comprehensive land use plan(s) ecific recommendations for the site where the p | | ☑Yes□No □Yes☑No |
| | rea (BOA); design | ocal or regional special planning district (for e ated State or Federal heritage area; watershed | | Z Yes□No |
| c. Is the proposed action loca or an adopted municipal fa If Yes, identify the plan(s): | | ially within an area listed in an adopted municin plan? | ipal open space plan, | □Yes☑No |
| | | | | |

| C.3. Zoning |
|---|
| a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? AG- Agricultural |
| b. Is the use permitted or allowed by a special or conditional use permit? ☐ 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? |
| C.4. Existing community services. |
| a. In what school district is the project site located? Tri-Valley Central School District |
| b. What police or other public protection forces serve the project site? Fallsburg Police Department |
| c. Which fire protection and emergency medical services serve the project site? Loch Sheldrake Fire Department |
| d. What parks serve the project site? William E Pearson Park, Francis A Hanofee Park, Morningside Park |
| D. Project Details |
| 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)? Industrial (mining) |
| b. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 15.3 acres 15.3 acres 92.6 acres |
| c. Is the proposed action an expansion of an existing project or use? i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % 84 |
| 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? □Ves □No iv. Minimum and maximum proposed lot sizes? Minimum □Ves □No |
| e. Will the proposed action be constructed in multiple phases? i. If No, anticipated period of construction: ii. If Yes: • Total number of phases anticipated • Anticipated commencement data of phase 1 (including demolition) • Multiplicated commencement data of phase 1 (including demolition) • Multiplicated commencement data of phase 1 (including demolition) • Multiplicated commencement data of phase 1 (including demolition) • Multiplicated commencement data of phase 1 (including demolition) |
| 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: |
| |

| | t include new resid | | | | □Yes ☑ No |
|----------------------|-----------------------|--------------------------|-------------------------------------|--|------------------------|
| If Yes, show num | bers of units propo | | 771 D 21 | Maria De de Co | |
| | One Family | <u>Two Family</u> | Three Family | Multiple Family (four or more) | |
| Initial Phase | | | | | |
| At completion | | | | | |
| of all phases | | | | | |
| g. Does the propo | sed action include | new non-residentia | l construction (inclu | iding expansions)? | □Yes☑No |
| If Yes, | | | | | |
| i. Total number | of structures | | | | |
| ii. Dimensions (| in feet) of largest p | proposed structure: _ | height; | width; andlength | |
| iii. Approximate | extent of building | space to be heated | or cooled: | square feet | |
| | | | | l result in the impoundment of any | ✓ Yes □ No |
| | s creation of a wate | er supply, reservoir, | pond, lake, waste la | agoon or other storage? | |
| If Yes, | | | | | |
| | | ormwater managemer | | Ground water 🗸 Surface water stream | ns Other specify: |
| ii. Ii a watei iiip | oundment, the prin | icipal source of the | water. | Ground water W_Surface water stream | iisOuler specify. |
| iii. If other than v | vater, identify the t | ype of impounded/o | contained liquids and | d their source. | |
| iv Annroximate | size of the propose | ed impoundment | Volume: | 0.0825 million gallons; surface area: | 0.063 acres |
| v. Dimensions o | f the proposed dan | n or impounding str | ucture: N | A height; NA length | 0.000 46163 |
| | | | | ructure (e.g., earth fill, rock, wood, cond | crete): |
| The detention p | ond within the expar | nded LOM will use indu | ıstry-standard excavati | on practices. | |
| | | | | | |
| D.2. Project Op | erations | | | | |
| a. Does the propo | sed action include | any excavation, mi | ning, or dredging, d | uring construction, operations, or both? | ✓ Yes No |
| | | ration, grading or ins | stallation of utilities | or foundations where all excavated | |
| materials will r | emain onsite) | | | | |
| If Yes: | C (1 | | | | |
| | | | | , gravel and other natural materials for sale. | |
| | , - | ıbic yards): 20,000 c | | o be removed from the site? | |
| | | | ubic yards iding on market demar | nd | |
| | | | | ged, and plans to use, manage or dispose | e of them. |
| | | vill be excavated, proce | | or and praise to use, manage or ampos | |
| | | | | | |
| | | or processing of ex | | | ✓ Yes No |
| If yes, descri | be. Materials will be | processed at the exist | ing processing plant in | the currently approved life of mine. | |
| What is the to | tal anaa ta ba duad | and an assassated? | | 1F 2 0 0 m 2 5 | |
| v. What is the to | tai area to be areas | ged or excavated? _ | time? | 15.3 acres 15.3 acres acres | |
| vii What would h | se the maximum de | enth of excavation of | r dredging? | 20-50 feet | |
| | ivation require blas | | dicuging: | <u> 20-30</u> leet | ∐Yes √ No |
| | e reclamation goal | | | | |
| | | | e, the expanded life of | mine affected area will consists of grassland | I, meadow, pond areas. |
| | | · | · | <u> </u> | · |
| | | | | | |
| b. Would the proj | osed action cause | or result in alteration | on of, increase or de | crease in size of, or encroachment | ☐Yes √ No |
| • | ng wetland, waterb | oody, shoreline, bea | ch or adjacent area? | | <u>—</u> |
| If Yes: | .1 1 | | 66 . 1.4 | | |
| | | | | vater index number, wetland map numb | er or geographic |
| description): | | | | | |
| | | | | | |

| <i>ii.</i> Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square | |
|---|-------------------|
| | |
| iii. Will the proposed action cause or result in disturbance to bottom sediments? If Yes, describe: | □Yes□No |
| 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: | |
| 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: | |
| c. Will the proposed action use, or create a new demand for water? | ☐Yes Z No |
| If Yes: | |
| i. Total anticipated water usage/demand per day: gallons/day | |
| <i>ii.</i> Will the proposed action obtain water from an existing public water supply? If Yes: | □Yes □No |
| 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: | |
| <i>iv.</i> Is a new water supply district or service area proposed to be formed to serve the project site? If, Yes: | ☐ Yes☐No |
| Applicant/sponsor for new district: | |
| Date application submitted or anticipated: | |
| | |
| 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. |
| d. Will the proposed action generate liquid wastes? | ☐ Yes Z No |
| If Yes: | |
| i. Total anticipated liquid waste generation per day: gallons/dayii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe al | I commonants and |
| approximate volumes or proportions of each): | n components and |
| | |
| iii. Will the proposed action use any existing public wastewater treatment facilities? If Yes: | □Yes□No |
| 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? If Y = Y = Y = Y = Y = Y = Y = Y = Y = Y | □Yes□No |
| If Yes:Describe extensions or capacity expansions proposed to serve this project: | |
| | |
| iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? If Yes: | □Yes□No |
| | |
| Applicant/sponsor for new district: Date application submitted or anticipated: | |
| • What is the receiving water for the wastewater discharge? | if in a managad |
| receiving water (name and classification if surface discharge or describe subsurface disposal plans): | nying proposed |
| | |
| vi. Describe any plans or designs to capture, recycle or reuse liquid waste: | |
| | |
| e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point | Z Yes □ No |
| 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? | |
| If Yes: | |
| i. How much impervious surface will the project create in relation to total size of project parcel? | |
| NA Square feet or NA acres (impervious surface) NA Square feet or NA acres (parcel size) | |
| ii. Describe types of new point sources. An outfall will be constructed within the current Life-of-Mine and will serve the existing | storm water pond |
| (Outfall 2). | |
| iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent pr | operties, |
| groundwater, on-site surface water or off-site surface waters)? | |
| Stormwater within the proposed LOM expansion will be received by the detention pond and be directed to the existing stormwaturrent LOM before draining to wetland LE-20 | ater pond within the |
| If to surface waters, identify receiving water bodies or wetlands: | |
| Wetland LE-20 | |
| Will stormwater runoff flow to adjacent properties? | ☐ Yes Z No |
| <i>iv</i> . Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? | |
| f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel | Z Yes□No |
| combustion, waste incineration, or other processes or operations? If Yes, identify: | |
| <i>i.</i> Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) | |
| Continued use of bulldozers, scrapers, front-end wheel loaders, haul trucks, and other standard industry equipment. | |
| ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) | |
| NA iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) | |
| No new stationary sources are proposed during the operation of the expansion area. | |
| g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, | Z Yes□No |
| or Federal Clean Air Act Title IV or Title V Permit? | |
| If Yes: i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet | □Yes ☑ No |
| ambient air quality standards for all or some parts of the year) | 1 63 2 1 10 |
| ii. In addition to emissions as calculated in the application, the project will generate: | |
| •Tons/year (short tons) of Carbon Dioxide (CO ₂) | |
| •Tons/year (short tons) of Nitrous Oxide (N ₂ O) | |
| •Tons/year (short tons) of Perfluorocarbons (PFCs) Tons/year (short tons) of Sulfur Hayafluorida (SF.) | |
| Tons/year (short tons) of Sulfur Hexafluoride (SF₆) Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs) | |
| Tons/year (short tons) of Carbon Dioxide equivalent of Hydronourocarbons (III es) Tons/year (short tons) of Hazardous Air Pollutants (HAPs) | |

| h. Will the proposed action generate or emit methane (includant landfills, composting facilities)? If Yes: i. Estimate methane generation in tons/year (metric): ii. Describe any methane capture, control or elimination melectricity, flaring): | easures included in project design (e.g., combustion to g | □Yes☑No enerate heat or |
|--|--|-------------------------------|
| Will the proposed action result in the release of air pollut quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., describe operated from internal transportation and management.) | • | Z Yes□No |
| j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services? If Yes: i. When is the peak traffic expected (Check all that apply ☐ Randomly between hours of to |): ☐ Morning ☐ Evening ☐ Weekend | ∏Yes ∏ No |
| iii. Parking spaces: Existing | ng? | ∐Yes□No |
| vi. Are public/private transportation service(s) or facilitiesvii Will the proposed action include access to public transportation or other alternative fueled vehicles?viii. Will the proposed action include plans for pedestrian or pedestrian or bicycle routes? | portation or accommodations for use of hybrid, electric | ☐Yes☐No ☐Yes☐No ☐Yes☐No |
| k. Will the proposed action (for commercial or industrial proposed for energy?If Yes: i. Estimate annual electricity demand during operation of | | ∐Yes √ No |
| <i>ii.</i> Anticipated sources/suppliers of electricity for the proje other): | ct (e.g., on-site combustion, on-site renewable, via grid/ | ocal utility, or |
| iii. Will the proposed action require a new, or an upgrade, t | to an existing substation? | □Yes□No |
| Hours of operation. Answer all items which apply. i. During Construction: | ii. During Operations: Monday - Friday: 7:00 AM - 5:00 P Saturday: 7:00 AM - 5:00 P Sunday: N/A Holidays: No operations on Hol | M |

^{*} New Year's Day, Memorial Day, Independence Day (July 4), Labor Day, Thanksgiving, and Christmas.

| m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, or both? | etion, Yes No |
|--|-------------------|
| If yes: | |
| i. Provide details including sources, time of day and duration: | |
| | |
| <i>ii.</i> Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Describe: | □Yes□No |
| | |
| n. Will the proposed action have outdoor lighting? If yes: | ☐ Yes ☑ No |
| i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied s | structures: |
| | |
| ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? | □Yes□No |
| Describe: | |
| o. Does the proposed action have the potential to produce odors for more than one hour per day? | ☐ Yes Z No |
| If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity | |
| occupied structures: | |
| | |
| p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 galle | ons) Yes No |
| or chemical products 185 gallons in above ground storage or any amount in underground storage? If Yes: | |
| i. Product(s) to be stored | |
| ii. Volume(s) per unit time (e.g., month, year)iii. Generally, describe the proposed storage facilities: | |
| - Solition and proposed storage radiation. | |
| q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., he | erbicides, |
| insecticides) during construction or operation? If Yes: | |
| <i>i.</i> Describe proposed treatment(s): | |
| | |
| | |
| ii. Will the proposed action use Integrated Pest Management Practices? | ☐ Yes ☐No |
| r. Will the proposed action (commercial or industrial projects only) involve or require the management of solid waste (excluding hazardous materials)? | or disposal |
| If Yes: | |
| i. Describe any solid waste(s) to be generated during construction or operation of the facility: | |
| Construction: tons per (unit of time) Operation: tons per (unit of time) ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as | |
| ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as | solid waste: |
| • Construction: | |
| Operation: | |
| iii. Proposed disposal methods/facilities for solid waste generated on-site: | |
| • Construction: | |
| • Operation: | |
| | |

| s. Does the proposed action include construction or modification of a solid waste management facility? | | | | | | |
|---|--|----------------------------------|-----------------------|--|--|--|
| 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 comme | years | 1C11 | | | | |
| waste? If Yes: i. Name(s) of all hazardous wastes or constituents to be | | | | | | |
| ii. Generally describe processes or activities involving h | nazardous wastes or constituer | nts: | | | | |
| iii. Specify amount to be handled or generatedto iv. Describe any proposals for on-site minimization, rec | ons/month cycling or reuse of hazardous o | constituents: | | | | |
| v. Will any hazardous wastes be disposed at an existing If Yes: provide name and location of facility: | | | □Yes□No | | | |
| If No: describe proposed management of any hazardous | wastes which will not be sent | to a hazardous waste facilit | V. | | | |
| 11 110. desertoe proposed management of any nazardous | wastes which will not be sent | to a nazardous waste facilit | | | | |
| | | | | | | |
| E. Site and Setting of Proposed Action | | | | | | |
| 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): Sand and Gravel Mine ii. If mix of uses, generally describe: Grassland, Sand And Gravel Mine, Wooded Lands, Farmland, Rural | | | | | | |
| | | | | | | |
| b. Land uses and covertypes on the project site. | | | | | | |
| Land use or Covertype | Current Acreage | Acreage After Project Completion | Change (Acres +/-) | | | |
| Roads, buildings, and other paved or impervious | Acreage | Froject Completion | (Acres +/-) | | | |
| surfaces | 0 | 0 | 0 | | | |
| Forested | 15.3 | 0 | -15.3 | | | |
| Meadows, grasslands or brushlands (non- agricultural, including abandoned agricultural) | 0 | 15.3 | +15.3 | | | |
| Agricultural (includes active orchards, field, greenhouse etc.) | 0 | 0 | 0 | | | |
| Surface water features (lakes, ponds, streams, rivers, etc.) | 0 | 0.063 | + 0.063 | | | |
| Wetlands (freshwater or tidal) | 0 | 0 | 0 | | | |
| Non-vegetated (bare rock, earth or fill) | 0 | 0 | 0 | | | |
| Other Describe: | 0 | 0 | 0 | | | |
| | | 1 | | | | |

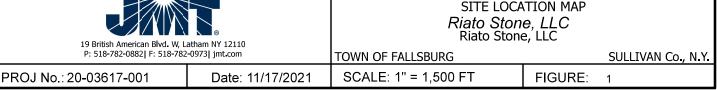
| c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain: | □Yes☑No |
|---|--------------------------|
| d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, i. Identify Facilities: | ∐Yes √ No |
| | |
| e. Does the project site contain an existing dam? If Yes: i. Dimensions of the dam and impoundment: | ☐ Yes No |
| • 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 facil If Yes: | □Yes ☑ No ity? |
| 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? If Yes: | □ Yes ☑ No |
| i. Describe waste(s) handled and waste management activities, including approximate time when activities occurre | ed: |
| | |
| | |
| 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? If Yes: | ☐Yes ☑ No |
| <i>i.</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): | |
| ☐ 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? If yes, provide DEC ID number(s): | □Yes□No |
| iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): | |
| | |
| | |

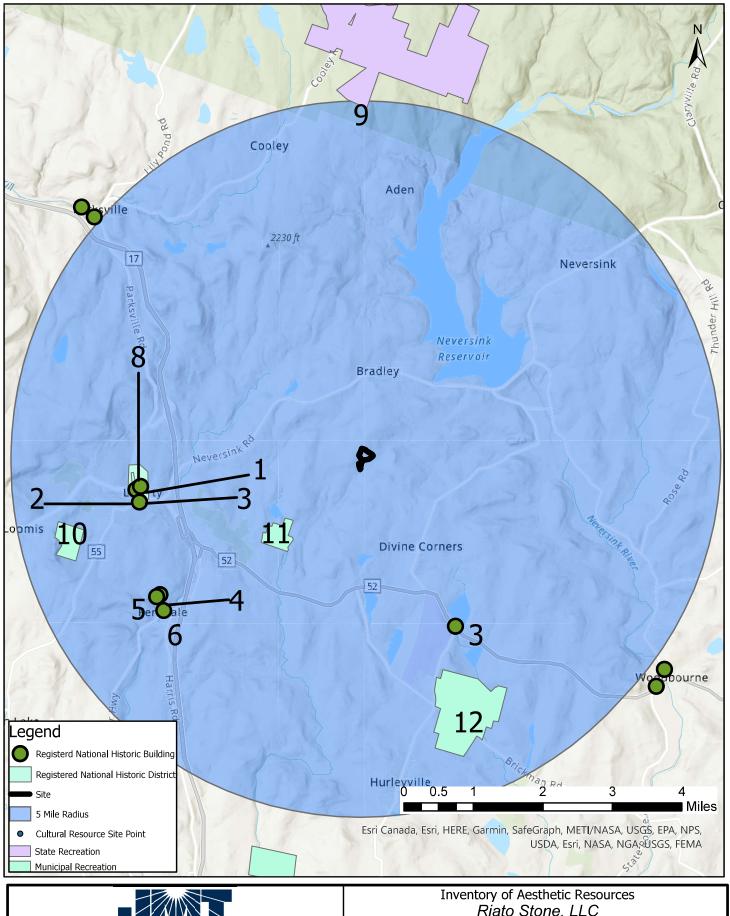
| v. Is the project site subject to an institutional control | | □Yes□No |
|--|---|----------------------------|
| If yes, DEC site ID number: Describe the type of institutional control (e.g., p. 1). Describe the type of institutional control (e.g., p. 1). | ., deed restriction or easement): | _ |
| Describe the type of institutional control (e.g. Describe any use limitations: | , deed restriction of easement). | |
| Describe any engineering controls: | | _ |
| Will the project affect the institutional or eng | ineering controls in place? | ☐ Yes ☐ No |
| Explain: | | |
| | | _ |
| E.2. Natural Resources On or Near Project Site | | |
| a. What is the average depth to bedrock on the project | site? 10-50+ feet | |
| | <u> </u> | □Vaa □ Na |
| b. Are there bedrock outcroppings on the project site? If Yes, what proportion of the site is comprised of bedr | rock outcroppings?% | ☐ Yes Z No |
| c. Predominant soil type(s) present on project site: | Wurtsboro loam 8-15% 32.4 % | |
| | Wellsboro and Wurtsboro soils55.4 %Tunkhannock gravelly loam11.4 % | |
| | | 1 |
| d. What is the average depth to the water table on the p | roject site? Average:5-50'_feet | |
| e. Drainage status of project site soils: Well Drained | | |
| ✓ Moderately V ☐ Poorly Drain | Well Drained: 88.6 % of site ed % of site | |
| f. Approximate proportion of proposed action site with | | |
| i. Approximate proportion of proposed action site with | Stopes: | |
| | 15% or greater: % of site | |
| g. Are there any unique geologic features on the project If Yes, describe: | | □Yes☑No |
| | | |
| h. Surface water features. | | |
| i. Does any portion of the project site contain wetland | s or other waterbodies (including streams, rivers, | ✓ Yes No |
| ponds or lakes)? ii. Do any wetlands or other waterbodies adjoin the property of the property | oiect site? | ∠ Yes□No |
| If Yes to either <i>i</i> or <i>ii</i> , continue. If No, skip to E.2.i. | sjeet site. | E 1 C S 1 (C |
| iii. Are any of the wetlands or waterbodies within or a | djoining the project site regulated by any federal, | ✓ Yes □No |
| state or local agency? | | |
| | dy on the project site, provide the following information: Classification B(T) | |
| _ | | |
| Wetlands: Name Federal Waters, NYS | Wetland Classification Approximate Size 31.8 | |
| • Wetland No. (if regulated by DEC) <u>LE-20</u> v. Are any of the above water bodies listed in the most | | □Yes ☑ No |
| waterbodies? | recent compliation of N 13 water quanty-impaned | I es A INO |
| If yes, name of impaired water body/bodies and basis f | For listing as impaired: | |
| | | |
| 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 adjoin | ning, a primary, principal or sole source aquifer? | □Yes ☑ No |
| If Yes: i. Name of aquifer: | | |
| | | |

| m. | Identify the predominant wildlife spo | ecies that occupy or use | the project site: | | |
|------------|--|-------------------------------|------------------------|-----------------------------|--------------------|
| | Transient Species | Deer | | Snakes | |
| | Salamander | _ Frogs | <u></u> | Birds | |
| | | | | | |
| | Does the project site contain a designation | ated significant natural c | ommunity? | | □Yes ☑ No |
| If Y | | | 1 | | |
| 1. | Describe the habitat/community (cor | nposition, function, and | basis for designation) |): | |
| ;; | Source(s) of description or evaluation | | | | |
| | Extent of community/habitat: | JII | | | |
| ııı. | • Currently: | | 0 | oras | |
| | T 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | cres | |
| | | as proposed. | <u> </u> | cres | |
| | • Gain or loss (indicate + or -): | | a | cres | |
| ei If Y | Does project site contain any species of andangered or threatened, or does it confers. Yes: Species and listing (endangered or threatened) | ontain any areas identifie | | dangered or threatened spec | ☐ Yes No ies? |
| s If Y | Does the project site contain any special concern? Yes: Species and listing: | cies of plant or animal th | · | s rare, or as a species of | ☐Yes ☑ No |
| q. Is | s the project site or adjoining area cu | rrently used for hunting, | trapping, fishing or s | hell fishing? | Yes Z No |
| F 2 | Designated Dublic Description On | an Maan Duaiset Site | | | |
| | . Designated Public Resources On | <u> </u> | | LOV. 1 | |
| A | s the project site, or any portion of it, Agriculture and Markets Law, Article Yes, provide county plus district nam | e 25-AA, Section 303 an | d 304? | ertified pursuant to | Z Yes □No |
| h ^ | Are agricultural lands consisting of hi | ahly productive soils pro | esent? | | ☐Yes Z No |
| | If Yes: acreage(s) on project site? | | | | |
| | Source(s) of soil rating(s): | | | | |
| | | | | to the table to | |
| | Does the project site contain all or pa Natural Landmark? | rt of, or is it substantially | y contiguous to, a reg | istered National | □Yes ☑ No |
| If Y | | | | | |
| | Nature of the natural landmark: | ☐ Biological Commu | nity 🔲 Geolo | ogical Feature | |
| | Provide brief description of landma | | | | |
| | | | | | |
| | | | | | |
| J 7 | a dia ammilia di alia dia dia di di ammilia di di di | adiain a state 15-te 4 C 15 | inal Eurina | | - Vac Z NI. |
| | s the project site located in or does it | aujoin a state listed Criti | icai Environmental A | rea? | □Yes☑No |
| If Y | | | | | |
| l. ;; | CEA name: Basis for designation: | | | | |
| ιι. iii | Designating agency and date: | | | | |
| ııı. | . Designating agency and date. | | | | |

| 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 Commission Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Plates: i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District ii. Name: iii. 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 | ☐ Yes ☑No |
| archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? | |
| g. Have additional archaeological or historic site(s) or resources been identified on the project site? If Yes: i. Describe possible resource(s): | □Yes ☑ No |
| ii. Basis for identification: | |
| h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? If Yes: | ☑ Yes ☐No |
| i. Identify resource: See attached Inventory of Aesthetic Resources ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or | scenic byway, |
| ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or etc.): See attached inventory of Aesthetic Resources iii. Distance between project and resource: < 5 miles. | marinet vara e e error i i grynnoù yelonnoù Aliapeleng likhennoù elleskipelende i kidikista i c |
| i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation: | ☐ Yes No |
| ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? | □Yes □No |
| F. 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 in measures which you propose to avoid or minimize them. | npacts plus any |
| G. Verification I certify that the information provided is true to the best of my knowledge. | |
| Applicant/Sponsor Name James (Min) HIGHTO Date 5/23/2022 | |
| Signature Title Managen | |
| | |







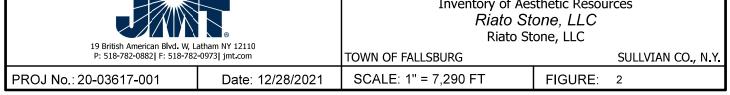




TABLE 1

AESTHETIC RESOURCES WITHIN 5 MILES OF RIATO STONE, LLC

National Register of Historic Places

- 1. Town and Country Building
- 2. St. Paul's Evangelical Lutheran Church
- 3. Munson Diner
- 4. Shelburne Playhouse
- 5. Ferndale School
- 6. Manions General Store
- 7. Loch Sheldrake Synagogue
- 8. Liberty Downtown Historic District

State and Historic Preserves

9. Willowemoc Wild Forest

Municipal Parks

- 10. William E Pearson Park
- 11. Francis A Hanofee Park
- 12. Morningside Park

<u>Note</u>: Identification number (e.g, 12.) corresponds with each resource depicted on *Figure 1, Location Map – Inventory of Aesthetic Resources*.



STRUCTURAL ARCHAEOLOGICAL ASSESSMENT FORM (SAAF) Supplement to the Joint Application Form

PART 1 – APPLICANT COMPLETES

| | APPLICANT INFORMATION | |
|--|--|--|
| 1. Applicant Name: Riato Stone, LLC | | |
| 2. Applicant Address: P.O. BOX 442 Ferndale, New Y | ′ork 12734 | |
| | PROJECT INFORMATION | |
| 3. Project/Facility Name: Riato Stone, | LLC | |
| 4. Project/Facility Location: 40 McInto Liberty, N | osh Road Iew York 12754 | |
| 5. Is the proposed project adjacent t Register of Historic Places? | o, or does it contain a building or structure l | listed in the State or National Yes No |
| 6. Are there any buildings or structu | res 50 years old or older adjacent to or with | in the proposed project area? Yes No |
| If the answer to question 5 and /or 6 (use attachments if necessary): | 5 is yes, provide the following information fo | or each building and structure |
| a. Name of structure: | | |
| b. Location: | | |
| c. Type of structure (ex. house, | outbuilding, barn, bridge, dam, ruins): | |
| d. Approximate age or date of o | construction: | |
| 7. Might the proposed project have State or National Register of Historic | any impact (physical/visual) upon any buildi c Places or 50 years old or older? | ngs or structures listed in the Yes No |
| If yes, describe briefly (use attachme | ents if necessary): | |

| S. |
|---|
| 8. Provide photographs of every building and structure that may be impacted by the project as described in |
| number 7, on the opposite side of this page. The following standards are recommended: |
| Minimum of 2 photographs |
| Photographs must be 3.5" x 5" in size or larger |
| Photos must be clear and focused |
| Digital photographs must be printed on photo paper and be produced at a printer setting of a minimum of 600 dpi |
| Clearly label photos so it is obvious what is being illustrated; key photos to man or plan, if possible |

- Clearly label photos so it is obvious what is being illustrated; key photos to map or plan, if possible
- Photo 1: show both the entire front and side of the structure in a single shot from as close to the building as possible. Be sure the structure is not partially or fully blocked by trees or other obstructions

| Photo 2: show relat | ionship of building or struc | cture to roadway or sur | roundings | |
|--|-------------------------------------|--------------------------|---------------------|-----------------|
| 9. Has the land within the p filled, utilities installed)? | roposed project area beer | ı previously disturbed o | r altered (excavate | ed, landscaped, |
| If yes, describe briefly, inclu | iding depth of disturbance | (use attachments if neo | cessary): | |
| The site is an active sand and grafor details regarding the stormwa application materials for the mine | ter feature and its location, inclu | | | |
| 10. Approximate percentag 0-10% | e of proposed project area | ı with slopes: | | |
| • 10-15% | % | | | |
| • 15% or greater | <u>100</u> % | * | | 2 |
| 11. Approximate percentag | e of proposed project site | with the following drain | nage characteristic | cs: |
| Well drained | <u>100</u> % | | | |
| Moderately well dra | ained% | | | |
| Poorly drained | % | | | |
| Prepared By (Print or type | name): Andrew Philbin | | | |
| Signature: | -M_ | | Date: 5/ | 18122 |

PART 2 – DEPARTMENT OF ENVIRONMENTAL CONSERVATION (DEC) COMPLETES

APPLICANT/PROJECT INFORMATION

| 1.Applicant Name: | | | |
|--|---|---------------------------|---------------|
| 2. Project/Facility Name: | | | |
| 3. DEC Number: | | | |
| | BUILDINGS AND STRUCTURES | | |
| | ve any impact (physical/visual) upon any bu oric Places or 50 years old or older? | ildings or structures Yes | listed in the |
| request a determination of eligib | Office of Parks, Recreation and Historic Presility for the State Register of Historic Places ion supplied by the applicant in response to | and/or comments re | egarding |
| | ARCHAEOLOGICAL SITES | | |
| 5. Does the proposed project are Archaeological Inventory Map? | a coincide with a circle, square or stippled a | rea on OPRHP's Stat | ewide No |
| | utside of a circle or square, but one for whic wn sites) that suggests the area is archaeolog | | een provided |
| If yes, what is the nature and sou | rce of information? | | |
| 7. Is the proposed project area ap | oparently undisturbed? | Yes | No |
| 8. Will the proposed action include | de a physical disturbance of the project area | ? Yes | No |
| 9. Is the slope in the area charact | eristically less than 15% (unless on limeston | e/flint escarpments |)? No |