



TOWN OF AMSTERDAM

283 Manny's Corner Road
Amsterdam, NY 12010
Phone: 518-842-7961 • Fax: 518-843-6136
www.townofamsterdam.org

APPLICATION FOR ZONING/USE PERMIT

APPLICATION DATE: 1-3-24 ZONE: B-1, R-1, R-2
APPLICATION #: 2024-003 FEB PD: #25 TAX MAP NO.: 40.-1-23.11, 40.-1-23.13
Ch#122

1.) PROPERTY/BUILDING LOCATION: Route 67, Amsterdam
2.) PROPERTY OWNER'S NAME: Rose Industries LLC TELEPHONE: _____
ADDRESS: 4786 State Highway 30, Amsterdam, NY 12010

3.) APPLICATION IS HEREBY MADE FOR: (Check ALL that are applicable),
 NEW CONSTRUCTION
 RESIDENTIAL
 1 FAMILY
 2 FAMILY
 MULTIPLE
 COMMERCIAL
 MOBILE HOME INSTALLATION
 MODULAR HOME INSTALLATION
 GARAGE ATTACHED GARAGE
 ACCESSORY BUILDING/STORAGE SHED
 CHIMNEY CONSTRUCTION
 SOLID FUEL BURNING DEVICE
 STOVE INSERT
 POOL IN GROUND ABOVE GROUND
 SEPTIC SYSTEM WELL
 OTHER: 10.67 MW solar array
 PLANNED UNIT DEVELOPMENT
 KENNEL/STABLES
 HOME OCCUPATION
 OUTDOOR FURNACES
 SOLAR COLLECTORS + INSTALLATIONS
 WIND ENERGY FACILITIES

COMMERCIAL OCCUPANCY (WITH NO RENOVATIONS) INSPECTION ONLY
 DEMOLITION
 COMMERCIAL OR RESIDENTIAL (CHECK ONE)
METHOD OF DEMOLITION: _____
PLACE OF DEBRIS DISPOSAL: _____
DISCONNECTION DATE OF UTILITIES: _____

4.) THE FOLLOWING DESCRIPTION OF THE USE FOR THIS PROPERTY, FOR WHICH APPLICATION IS MADE HERewith, IS SUBMITTED: The applicants intend to construct an approximate 10.67 MW solar facility
Please see narrative

5.) SITE INFORMATION (THE FOLLOWING INFORMATION MUST BE PROVIDED ALONG WITH DETAILED PLOT PLAN)
A.) DIMENSIONS OF LOT: FRONTAGE 823 REAR 1,800 RIGHT SIDE 4,304 LEFT SIDE 4,150
ACREAGE 114.1-ac
B.) IS THIS A CORNER LOT? YES OR NO
C.) WILL THE GRADE OF THIS LOT BE CHANGED AS A RESULT OF THIS CONSTRUCTION? YES OR NO
IF "YES", DESCRIBE AND SHOW ON PLOT PLAN _____
D.) PUBLIC WATER OR PRIVATE WELL n/a
E.) SEWER OR PRIVATE SEPTIC
*** SEPERATE PERMITS ARE REQUIRED FOR PUBLIC WATER AND SANITARY SEWER
F.) DISTANCE FROM LOT LINES: FRONT 1,000 REAR 100 RIGHT SIDE 100 LEFT SIDE 100

6.) TYPE OF CONSTRUCTION: (CHECK ALL THAT APPLY)

STYLE: RANCH RAISED RANCH SPLIT LEVEL CAPE COD COLONIAL DUPLEX
 OTHER: solar array

BASEMENT (CHECK ONE): FULL CRAWL SLAB
GARAGE: 1 STALL 2 STALL 3 STALL PRIVATE PUBLIC n/a

THE ACCESSORY BUILDING WILL BE AS FOLLOWS: DESCRIPTION: n/a

DIMENSIONS: FRONT WIDTH: _____ SIDE LENGTH: _____ HEIGHT: _____

7.) CONTRACTOR'S NAME: Active Solar Development DAY PHONE: (518) 720-4323
MAILING ADDRESS: 02 McCrea Hill Road, Ballston, NY 12020

(ALL CONTRACTORS MUST PROVIDE PROOF OF WORKERS COMPENSATION AND LIABILITY INSURANCE)

8.) ESTIMATED VALUE OF ALL WORK (LABOR & MATERIALS): \$ 18,500,000

9.) SIGNATURE OF PROPERTY OWNER: *John T. Larkin*

I CERTIFY THAT THE CONSTRUCTION PLANS AND ALL OTHER INFORMATION SUBMITTED AS PART OF THIS APPLICATION ARE ACCURATE.

10.) FOR OFFICE USE ONLY:

DATE APPROVED: _____

DATE DENIED: 1/12/24

SIGNATURE: _____
(ZONING OFFICER)

PERMIT EXPIRES: _____
 DENIED AND REFERRED TO PLANNING BOARD
 DENIED AND REFERRED TO ZONING BOARD OF APPEALS

NOTES OR COMMENTS: THE PROPOSED USE IDENTIFIED ON THIS FORM IS HEREBY CLASSIFIED AS A "UTILITY-SCALE SOLAR ENERGY SYSTEM" UNDER THE TOWN'S ZONING LAW. THE SITE, COMPRISING THE ABOVE-REFERENCED TAX ID (SPUR ZONED) PARCELS LYING IN THE D-1 R-2 AND R-1 ZONING DISTRICT ACCORDING TO THE SUBMITTED CONCEPT PLAN, THE PROPOSED USE LIES JUST NORTH OF TAX PARCEL 40.-1-23.12 (ON WHICH THERE IS AN EXISTING UTILITY SCALE SOLAR FARM) AND IS THEREFORE SITUATED ENTIRELY WITHIN THE R-2 AND R-1 DISTRICTS. UTILITY SCALE SOLAR ENERGY SYSTEMS ARE NOT A PERMITTED USE IN THE R-2 OR THE R-1 ZONES. (SEE SECTION 35(2)(c) OF THE ZONING LAW)

1/8/98

Application #: ZBA-2024-003
Date: _____

**Town of Amsterdam
Zoning Board of Appeals**

Application to Board of Appeals

CHECKLIST

- 1) Completed, signed and notarized Application to Board of Appeals (including this checklist and all information required hereon)
- 2) Tax Map indicating property in question and SBL or Tax parcel ID #
- 3) A complete sketch plan drawing with all appropriate dimensions and information
- 4) Copy of denied Application, including the Administrative Officer's Denial
- 5) Copy of any supporting documentation submitted with the Zoning Permit Application including, but not limited to photos, notarized statements, etc.
- 6) If appropriate, and at a minimum, a completed Part I of a Short Environmental Form (SEQR) (see attached), for type 1 actions please use Part I of a Full Environmental Form (SEQR) (also attached).
- 7) If the property is a farm operation within a New York State Agricultural District or with boundaries within 500 feet of a farm operation located in a New York State Agricultural District, the applicant must complete and submit (with this application) a completed Agricultural Data Statement (Ag. and Markets) (see attached)
- 8) Other a) explain: _____
 b) explain: _____
 c) explain: _____
 d) explain: _____
 e) explain: _____

2/10/2011

Application #: ZBA 7024 003

Date: _____

**Town of Amsterdam
Zoning Board of Appeals**

Application to Board of Appeals

A completed Application must be filed at least ten (10) days prior to the meeting at which it is to be considered by the Zoning Board of Appeals.

Applicant: <u>Paul Kruger</u>	Property Owner: <u>Rose Industries LLC</u>
<u>ASD Route 67 Solar 1</u>	(if different)
Address: <u>02 McCrea Hill Road</u>	Address: <u>4786 State Highway 30</u>
<u>Ballston, NY 12020</u>	<u>Amsterdam, NY 12010</u>
Phone: () <u>518-720-4323</u>	Phone: () _____
Professional Advisor: <u>Lansing Engineering</u>	Other : _____
Address: <u>2452 State Route 9</u>	(if appropriate)
<u>Malta, NY 12020</u>	Address: _____
Phone: () <u>518-899-5243</u>	Phone: () _____

1.) Property Location

Address: Route 67, Amsterdam, NY 12010

General Location: The parcel is located along the north side of Route 67
approximately 1,050' east of the intersection of Route 67 and Clizbe Ave.

Zoning District: B-1 Business, R-1 & R-2 Residential

Tax Parcel ID # (SBL) 40.-1-23.11, and 40.-1-23.13

2.) Type of Application (please check appropriate box(s)):

- Interpretation of the Zoning Law and/or map
- Area Variance
- Use Variance
- Temporary Permit
- Other _____

3.) For variances and interpretations, indicate the articles(s), section(s), subsection(s) and paragraph(s) of the Zoning Law that apply (by number)

article - _____

section - Section 35 Solar Energy Systems _____

subsection - 2.C General Provisions _____

paragraph - 1. Permitted Zones _____

4.) If previous applications have been made with respect to this property, indicate the Application(s) or Appeal Number(s) and Date(s) below

_____ date _____

_____ date _____

_____ date _____

_____ date _____

_____ date _____

5.) Indicate the reason for the filing of this application. Complete only the relevant blanks below (attach extra sheets, if necessary)

A. Interpretation: _____

B. Area Variance: _____

C. Use Variance: Applicant is seeking a use variance to allow Utility-Scale solar in the _____

R-1 and R-2 Zoning District.

D. Temporary Permit: _____

E. Extension of a Temporary Permit: _____

F. Other _____ :

State of New York
County of Saratoga

BRIGIT M MCELROY
NOTARY PUBLIC, STATE OF NEW YORK
NO. 01MC6440469
QUALIFIED IN SARATOGA COUNTY
MY COMMISSION EXPIRES SEPTEMBER 6, 2026

Sworn to this 27th day of December, year of 2023.

[Signature]
Signature of Applicant

[Signature]
Notary Public

State of New York
County of Montgomery

Sworn to this 26th day of December, year of 2023.

[Signature]
Signature of Property Owner
(if different)

[Signature]
Notary Public

MATTHEW R. EDWARDS
Notary Public, State of New York
Reg. No. 01ED6394813
Qualified in Montgomery County
Commission Expires July 15, 2027

For Office Use Only

Applicant#: 2024-003

Other fees: _____

Application Fee: \$ 25 (1-3-24)

Description: _____

(if applicable)

\$ _____

\$ _____

Total Amount Received: \$ _____

Date Received: _____

Check # _____

Received by: _____

For Zoning Board of Appeals Use Only:

The Zoning Board of Appeals held a Public Hearing on _____ (day) of _____ (date),
_____ (year) in consideration of this application.

The Application is hereby:

: approved

: approved with modifications

: disapproved

Modifications and comments: _____

Secretary, Town of Amsterdam
Zoning Board of Appeals

Chairperson, Town of Amsterdam
Zoning Board of Appeals

Date

Date

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. 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.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: ASD Route 67 Solar 1			
Project Location (describe, and attach a location map): Route 67, Amsterdam, NY - approximately 1,000' east of the intersection of Route 67 and Clizbe Ave			
Brief Description of Proposed Action: The proposed project includes the construction of an approximate 10.67 MW-DC solar array. The proposed solar array will consist of single axis tracker solar panel system and associated limited use access roads and array equipment. The solar panels will be placed throughout the parcel to place the solar array in locations that best fit the existing property and topography.			
Name of Applicant or Sponsor: ASD Route 67 Solar 1		Telephone: 518-720-4323	
		E-Mail: paulk@activesolarusa.com	
Address: 02 McCrea Hill Road, Ballston, NY 12020			
City/PO: Ballston Spa		State: NY	Zip Code: 12020
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: T.O. Amsterdam PB, NYSDOT, NYSERDA			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		126.4 acres	
b. Total acreage to be physically disturbed?		3.5 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		126.4 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

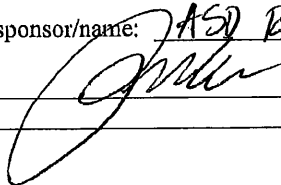
	NO	YES	N/A
5. Is the proposed action,			
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: <u>The proposed project will generate electricity for the grid.</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ The project consists of a solar farm. No water supply connections are proposed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ The project consists of a solar farm. No bathrooms are proposed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
b. 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ Pending wetland delineation.			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES
If Yes,	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe:		

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?	NO	YES
If Yes, explain the purpose and size of the impoundment:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?	NO	YES
If Yes, describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>ASD BUREAU 67 SOLAR 1</u>	Date: <u>12/27/2023</u>	
Signature: 	Title: <u>DIRECTOR OF DEVELOPMENT</u>	

Agency Use Only [If applicable]

Project:

Date:

**Short Environmental Assessment Form
Part 2 - Impact Assessment**

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

PRINT FORM

Agency Use Only [If applicable]

Project:	
Date:	

Short Environmental Assessment Form
Part 3 Determination of Significance

For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.	
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT FORM