

McGOEY, HAUSER and EDSALL CONSULTING ENGINEERS D.P.C.

MARK J. EDSALL, P.E., P.P. (NY, NJ & PA) MICHAEL W. WEEKS, P.E. (NY, NJ & PA) MICHAEL J. LAMOREAUX, P.E. (NY, NJ, PA, VT, VA & CT) PATRICK J. HINES LYLE R. SHUTE, P.E. LEED-AP (NY, NJ, PA) Main Office 33 Airport Center Drive Suite 202 New Windsor, New York 12553

(845) 567-3100 fax: (845) 567-3232 e-mail: <u>mheny@mhepc.com</u>

Principal Emeritus: RICHARD D. McGOEY, P.E. (NY & PA) WILLIAM J. HAUSER, P.E. (NY, NJ & PA)

TOWN OF NEWBURGH PLANNING BOARD TECHNICAL REVIEW COMMENTS

| PROJECT: | CHADWICK WOODS SUBDIVISION |
|--------------------------------|-----------------------------------|
| PROJECT NO.: | 19-02 |
| PROJECT LOCATION: | SECTION 14, BLOCK 1, LOT 51 |
| REVIEW DATE: | 29 JULY 2020 |
| MEETING DATE: | 6 AUGUST 2020 |
| PROJECT REPRESENTATIVE: | TALCOTT ENGINEERING/CHARLES BROWN |

- The project is located in the Town's Chadwick Lake Critical Environmental Area. All projects located within the Critical Environmental Area are Type I – Actions requiring a coordinated review under the SEQRA regulations. Project must be reviewed by NYSDOT, NYSDEC, Orange County Health Department, as involved agencies and the Orange County Department of Planning as an interested agency.
- 2. NYSDOT approval for the driveway and private road access as well as utilities for stormwater management and water main/service is required.
- **3.** Health Department approval for the water main extension with hydrant is required. Profile of the proposed water main should be provided along with a profile of the proposed private roadway.
- **4.** Information pertaining to the available pressure should be provided including an analysis of the proposed water service lateral for lot #4.
- 5. The location of the water main within the State Highway should be identified.
- 6. Size of the existing water main should be identified.
- 7. Water system notes on Sheet 5 of 6 references ductile iron pipe while details identify PVC.
- 8. Pipe joint restraint chart should be added to the plans.
- **9.** Hydrant detail identifies that a hydrant is proposed to be relocated. It is unclear where the relocated hydrant is on the plans. Location of all proposed gate valves must be depicted on
 - Regional Office 111 Wheatfield Drive Suite 1 Milford, Pennsylvania 18337 570-296-2765 •



the plans. Details of the proposed wet tap must be included on the plans.

- **10.** Hydrant detail should address if the proposed hydrant drain is below groundwater level.
- **11.**Water Department comments regarding the water line installation should be received including confirmation of hydrant specified.
- **12.** A detail of the proposed individual booster pumps and hydrant pneumatic system should be provided for the residence. Details should include required double check valve.
- **13.** The applicant's engineer has requested to review the location of the water service lateral serving lot #4 as it appears to encroach on lot #3.
- 14. An Access and Maintenance Agreement is required for the private road. Access and Maintenance Agreement should include the ability for the Town to access the water main for repairs. Water Superintendent's comments regarding dedication of the water main should be received.
- **15.** Sheet 1 of 6 should have proposed common driveway easement changed to proposed private road easement.
- **16.** A labeled building envelope on all lots.
- **17.** Detail of tapping sleeve and the valves should be provided.
- **18.**Construction of the private road triggers the Town of Newburgh Stormwater Management Regulations. A Stormwater Pollution Prevention Plan is required to be developed.

Respectfully submitted,

McGoey, Hauser and Edsall Consulting Engineers, D.P.C.

Patrick J. Hines Principal

PJH/dns

Full Environmental Assessment Form Part 1 - Project and Setting

Instructions for Completing Part 1

٩

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 project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Sponsor Information.

| Name of Action or Project: | | |
|--|---|-------------------------|
| CHADWICK WOODS SUBDIVISION | TED # | 17100-MMR |
| Project Location (describe, and attach a general location map): | | |
| BEHIND AND AROUND 1743 ROUTE 300 | | |
| Brief Description of Proposed Action (include purpose or need): | | |
| SUBDIVIDE AN EXISTING 14.92 ACRE VACANT PARCEL TO CREATE FIVE NEW LOTS WILL BE SERVICED BY TOWN WATER AND SEPTIC SYSTEMS AND WILL ROUTE 300. LOT #1 WILL HAVE A DRIVEWAY TO NYS ROUTE 300. | BUILDING LOTS. ALL BUT ONE BE ACCESSED B | Y A PRIVATE ROAD TO NYS |
| | | |
| Name of Applicant/Sponsor: | Telephone: 845-527-3 | 110 |
| HUDSON ASSET HOMES, LLC/ MIKE MAHER | E-Mail: MIKCHIEF99@AOL.COM | |
| Address: 4171 ALBANY POST ROAD | | |
| City/PO: HYDE PARK | State: NY | Zip Code: 12538 |
| Project Contact (if not same as sponsor; give name and title/role): | Telephone: | |
| (SAME) | E-Mail: | |
| Address: | | |
| City/PO: | State: | Zip Code: |
| Property Owner (if not same as sponsor): | Telephone: | <u></u> |
| (SAME) | E-Mail: | |
| Address: | | |
| City/PO: | State: | Zip Code: |

B. Government Approvals

• ъ

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance)

| assistance.) | | | |
|--|---------------------------|---|---|
| Government Ent | ity | If Yes: Identify Agency and Approval(s) Required | Application Date (Actual or projected) |
| a. City Council, Town Board, or Village Board of Trustees | ∐Yes Z No | | |
| b. City, Town or Village Planning Board or Commiss | ✓Yes⊡No sion | PLANNING BOARD/ SUBDIVISION APPROVAL | 1-4-2019 |
| c. City Council, Town or Village Zoning Board of Ap | □Yes ☑ No peals | | |
| d. Other local agencies | ∐Yes Z No | | |
| e. County agencies | ∏ Yes ⊡ No | ORANGE COUNTY PLANNING DEPARTMENT | 1-18-2019 |
| f. Regional agencies | ∐Yes Z No | | |
| g. State agencies | Z Yes⊡No | NYSDOT/ DRIVEWAY APPROVALS | 1-20-2019 |
| h. Federal agencies | Yes No | | |
| i. Coastal Resources. <i>i</i> . Is the project site within | a Coastal Area, (| or the waterfront area of a Designated Inland W | Vaterway? 🛛 Yes 🖉 No |
| <i>ii</i> . Is the project site located | | v with an approved Local Waterfront Revitaliza | tion Program? ☐ Yes☑No ☐ Yes☑No |

iii. Is the project site within a Coastal Erosion Hazard Area?

C. Planning and Zoning

| C.1. Planning and zoning actions. | |
|--|------------------|
| Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? If Yes, complete sections C, F and G. If No, proceed to question C.2 and complete all remaining sections and questions in Part 1 | Yes No |
| C.2. Adopted land use plans. | |
| a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? | ZYes No |
| If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? | □Yes 2 No |
| b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) | ∐Yes ⊠ No |
| If Yes, identify the plan(s): | |
| c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? If Yes, identify the plan(s): | ∐Yes ZNo |
| | |

| | - |
|---|----------------------|
| 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? | Z Yes No |
| p. 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 Z No |
| f Yes, <i>i</i> . What is the proposed new zoning for the site? | |
| C.4. Existing community services. | |
| . In what school district is the project site located? NEWBURGH ENLARGED CITY SCHOOL DISTRICT | |
| What police or other public protection forces serve the project site? OWN OF NEWBURGH POLICE DEPARTMENT | |
| . Which fire protection and emergency medical services serve the project site? ROMNER VALLEY FIRE DEPARTMENT | |
| I. What parks serve the project site? HADWICK PARK | |
| D. Project Details | |
| D.1. Proposed and Potential Development | |
| . What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mic components)? RESIDENTIAL | xed, include all |
| a. Total acreage of the site of the proposed action? 14.92 acres | |
| b. Total acreage to be physically disturbed? 2.30 acres c. Total acreage (project site and any contiguous properties) owned | |
| or controlled by the applicant or project sponsor? <u>14.92</u> acres | |
| . Is the proposed action an expansion of an existing project or use? | Yes Vo |
| <i>i.</i> If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, m square feet)? % Units: | iles, housing units, |
| . Is the proposed action a subdivision, or does it include a subdivision? | ZYes No |
| f Yes, <i>i</i> . Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) ESIDENTIAL | |
| <i>ii.</i> Is a cluster/conservation layout proposed? | □Yes 2No |
| ii. Number of lots proposed? <u>5</u> iv. Minimum and maximum proposed lot sizes? Minimum 2.00 Maximum 6.77 | |
| . Will proposed action be constructed in multiple phases? | ☐ Yes ZNo |
| <i>i</i> . If No, anticipated period of construction: <u>8</u> months <i>i</i> . If Yes: | |
| Total number of phases anticipated | |
| Anticipated commencement date of phase 1 (including demolition) month year | |
| Anticipated completion date of final phase monthyear | <u> </u> |
| Generally describe connections or relationships among phases, including any contingencies where prodetermine timing or duration of future phases: | |
| | |
| | |

| | ct include new resid | | | | ∑ Yes □ No |
|--------------------------------|----------------------------------|---------------------------|--|---|--------------------------|
| If Yes, show nun | nbers of units prope | | Thurson 17 | Maltinla Family (fam. or m | 242) |
| | <u>One Family</u> | <u>Two Family</u> | Three Family | Multiple Family (four or m | ore) |
| Initial Phase | 5 | | | ······· | |
| At completion of all phases | 5 | | | | |
| of all pliases | | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | osed action include | new non-resident | ial construction (inclu | iding expansions)? | □Yes 2 No |
| If Yes, | 6 | | | | |
| <i>i</i> . Total number | of structures | | h ai ai t | width; andler | arth |
| <i>iii</i> Approximate | extent of building | space to be heated | or cooled: | square feet | ngui |
| | | | | | any □Yes ☑ No |
| | | | | l result in the impoundment of a agoon or other storage? | |
| If Yes, | 5 oreanon or a wate | <i>x</i> supply, reserved | , pond, iako, wasto i | igoon of onior storage. | |
| · · · | e impoundment: | | | | |
| ii. If a water imp | oundment, the prin | cipal source of the | e water: | Ground water Surface wat | er streams Other spec |
| 222 TE ada an da an a | and a star is a star of the star | | /4 : # 1:: # | 1.1 | |
| <i>ui</i> . It other than v | valer, identify the r | vpe or impounded | contained liquids an | a meir source. | |
| iv. Approximate | size of the propose | d impoundment. | Volume: | million gallons; surface | area: a |
| v. Dimensions o | of the proposed dam | or impounding st | ructure: | million gallons; surface height; length ructure (e.g., earth fill, rock, wo | |
| vi. Construction | method/materials | for the proposed d | am or impounding st | ructure (e.g., earth fill, rock, wo | od, concrete): |
| | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | |
| D.2. Project Op | erations | | | | |
| <u> </u> | | ···· | ····· ··· ··· ··· ··· ··· ··· ··· ··· | | |
| | | | | uring construction, operations, | |
| materials will r | | ation, grading or i | istallation of utilities | or foundations where all excav | ated |
| If Yes: | emain onsite) | | | | |
| | upose of the excave | ation or dredging? | | | |
| | | | | o be removed from the site? | · ··· ··· |
| | | | | | |
| Over wh | at duration of time | ? | | | |
| iii. Describe natu | re and characteristi | es of materials to l | be excavated or dred | ged, and plans to use, manage o | r dispose of them. |
| | | | | | |
| iv Will there bo | onsite doivotoring | or proceeding of a | xcavated materials? | | Yes |
| If yes describ | be | or processing of e. | | | |
| xi 500, 000011 | | | | | |
| v. What is the to | tal area to be dredo | | | | · |
| vi. What is the m | aximum area to be | worked at any one | e time? | acres | |
| vii. What would h | e the maximum de | pth of excavation | or dredging? | feet | |
| | vation require blas | | | | Yes No |
| ix. Summarize sit | e reclamation goals | and plan: | | | |
| | | | | · · | |
| | | | | ····· | |
| | | | | | |
| b. Would the prop | oosed action cause | or result in alterati | on of, increase or de | crease in size of, or encroachme | ent Yes VNo |
| | ng wetland, waterb | | | | |
| If Yes: | , | | aon or auracorr areas | | |
| | | , | aon or aujacont area: | | |
| | vetland or waterbod | • | - | vater index number, wetland ma | |
| i. Identify the w | | y which would be | affected (by name, v | vater index number, wetland ma | ap number or geographic |
| i. Identify the w | | y which would be | affected (by name, v | | ap number or geographic |

1

| <i>ii.</i> Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, place alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in s | |
|--|--------------------|
| <i>iii.</i> Will proposed action cause or result in disturbance to bottom sediments? If Yes, describe: | ☐ Yes ☐ No |
| iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation? If Yes: | ☐ Yes No |
| 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: | |
| v. Describe any proposed reclamation/mitigation following distuibance. | |
| c. Will the proposed action use, or create a new demand for water? | V Yes No |
| If Yes: | |
| <i>i</i> . Total anticipated water usage/demand per day: 2,200 gallons/day | |
| <i>ii.</i> Will the proposed action obtain water from an existing public water supply? | ZYes No |
| If Yes: | |
| Name of district or service area: TOWN OF NEWBURGH CONSOLIDATED WATER DISTRICY | |
| Does the existing public water supply have capacity to serve the proposal? | ✓ Yes No |
| • Is the project site in the existing district? | Z Yes No |
| • Is expansion of the district needed? | Yes No |
| • Do existing lines serve the project site? | Z Yes No |
| <i>iii.</i> Will line extension within an existing district be necessary to supply the project? If Yes: | Yes No |
| • Describe extensions or capacity expansions proposed to serve this project: | |
| INSTALL 850' OF 8" WATER LINE AND A HYDRANT IN THE PROPOSED PRIVATE ROAD | |
| Source(s) of supply for the district: CHADWICK LAKE | |
| <i>iv.</i> Is a new water supply district or service area proposed to be formed to serve the project site? | Yes No |
| If, Yes: | |
| Applicant/sponsor for new district: | |
| Date application submitted or anticipated: | |
| Proposed source(s) of supply for new district: | |
| 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), maximum pumping capacity: gallons/n | ninute. |
| d. Will the proposed action generate liquid wastes? | ∠ Yes □No |
| If Yes: | |
| <i>i</i> . Total anticipated liquid waste generation per day: 2,200 gallons/day | |
| <i>i.</i> Total anticipated liquid waste generation per day:2,200 gallons/day <i>ii.</i> Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe | all components and |
| approximate volumes or proportions of each): | |
| ANITARY WASTEWATER | |
| <i>iii.</i> Will the proposed action use any existing public wastewater treatment facilities? If Yes: | ∐Yes Z 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? Will line extension within an existing district be necessary to serve the project? | □Yes□No □Yes□No |
|---|--------------------|
| If Yes: Describe extensions or capacity expansions proposed to serve this project: | |
| | |
| <i>iv.</i> 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? v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including spectrum | cifying proposed |
| receiving water (name and classification if surface discharge, or describe subsurface disposal plans): | |
| SUBS <u>URFACE SEWERAGE DISPOSAL</u> | |
| 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? | |
| Square feet or <u>0.98</u> acres (impervious surface) Square feet or <u>14.92</u> acres (parcel size) | |
| <i>ii.</i> Describe types of new point sources.ROOF LEADERS | |
| iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent p | properties. |
| groundwater, on-site surface water or off-site surface waters)? | nopennes, |
| OFF SITE STREAM | <u></u> |
| If to surface waters, identify receiving water bodies or wetlands: | |
| QUASSICK CREEK | |
| Will stormwater runoff flow to adjacent properties? | ✓ Yes No |
| iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? | Yes No |
| f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? | □Yes 2 No |
| If Yes, identify: <i>i</i> . Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) | |
| ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) | |
| iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) | |
| g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, | Yes No |
| or Federal Clean Air Act Title IV or Title V Permit? If Yes: | |
| <i>i.</i> Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) | □Yes□No |
| <i>ii.</i> In addition to emissions as calculated in the application, the project will generate: | |
| Tons/year (short tons) of Carbon Dioxide (CO₂) | |
| • Tons/year (short tons) of Nitrous Oxide (N ₂ O) | |
| Tons/year (short tons) of Perfluorocarbons (PFCs) Tons/year (short tons) of Sulfur Hexafluoride (SF₆) | |
| Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs) | |
| Tons/year (short tons) of Hazardous Air Pollutants (HAPs) | |

| h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? If Yes: | ∐Yes Z No |
|--|--|
| i. Estimate methane generation in tons/year (metric): ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generative, flaring): | generate heat or |
| Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): | Yes No |
| j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? If Yes: <i>i</i>. When is the peak traffic expected (Check all that apply): Morning Evening Weekend Randomly between hours of to <i>ii</i>. For commercial activities only, projected number of semi-trailer truck trips/day: | Yes No |
| <i>iv.</i> Does the proposed action include any shared use parking? <i>v.</i> If the proposed action includes any modification of existing roads, creation of new roads or change in existing <i>vi.</i> Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? <i>vii.</i> Will the proposed action include access to public transportation or accommodations for use of hybrid, electric | ☐Yes☐No access, describe: ☐Yes☐No ☐Yes☐No |
| will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? | ∐Yes∐No |
| k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? If Yes: i. Estimate annual electricity demand during operation of the proposed action: | Yes No |
| <i>ii.</i> Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/l other): | local utility, or |
| <i>iii.</i> Will the proposed action require a new, or an upgrade to, an existing substation? | Yes No |
| 1. Hours of operation. Answer all items which apply. ii. During Construction: iii. During Operations: • Monday - Friday: 8AM TO 8PM • Monday - Friday: • Monday - Friday: • Saturday: 8AM TO 8PM • Saturday: • Saturday: • Holidays: • Holidays: • Holidays: | |

•

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

,

| s. Does the proposed action include construction or mod | ification of a calid waste me | macamont fagility? | Yes 🗸 No |
|---|--------------------------------|----------------------------------|---------------|
| s. Does the proposed action include construction or mod If Yes: | ilication of a solid waste ma | magement factility? | |
| i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or | | | |
| other disposal activities): | | | |
| • Tons/month, if transfer or other non- | | nt, or | |
| • Tons/hour, if combustion or thermal <i>iii</i> . If landfill, anticipated site life: | | , | |
| | | and imagel of herendeur | Yes No |
| t. Will proposed action at the site involve the commercia waste? | ll generation, treatment, stor | age, or disposal of hazardous | TESMINO |
| If Yes: | | 1 . 6 . 11. | |
| <i>i</i> . Name(s) of all hazardous wastes or constituents to be | e generated, handled or man | aged at facility: | |
| | | | |
| ii. Generally describe processes or activities involving l | hazardous wastes or constitu | ents: | |
| | | | |
| <i>iii</i> . Specify amount to be handled or generated t | | | |
| iv. Describe any proposals for on-site minimization, rec | cycling or reuse of hazardou: | s constituents: | |
| | | | |
| v. Will any hazardous wastes be disposed at an existing If Yes: provide name and location of facility: | - | sility? | Yes No |
| <u> </u> | | | |
| If No: describe proposed management of any hazardous | wastes which will not be ser | nt to a hazardous waste facility | <i>r</i> : |
| | <u> </u> | | |
| | ······ | | |
| E. Site and Setting of Proposed Action | | | i |
| 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 Urban Industrial I Commercial I Resid | | al (non-farm) | |
| 🔽 Forest 🔲 Agriculture 🗌 Aquatic 🛛 🛛 Other | r (specify): <u>TOWN PARK</u> | | |
| <i>ii.</i> If mix of uses, generally describe: | | | |
| | · · · · · | | |
| b. Land uses and covertypes on the project site. | | | |
| Land use or | Current | Acreage After | Change |
| Covertype | Acreage | Project Completion | (Acres +/-) |
| Roads, buildings, and other paved or impervious | 0.00 | 0.98 | +0.98 |
| • Forested | 14.92 | 12.62 | -2.30 |
| Meadows, grasslands or brushlands (non- | 17.32 | | 2.00 |
| agricultural, including abandoned agricultural) | | | |
| Agricultural | | | |
| (includes active orchards, field, greenhouse etc.) Surface water features | | · · · | |
| (lakes, ponds, streams, rivers, etc.) | | | |
| • Wetlands (freshwater or tidal) | · · · · · · · · · | | |
| • Non-vegetated (bare rock, earth or fill) | | | |
| • Other | | | |
| Describe: LAWNS | 0.00 | 1.32 | +1.32 |

| c. Is the project site presently used by members of the community for public recreation?<i>i.</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: | Yes X No |
| <i>i</i> . Dimensions of the dam and impoundment: | |
| Dam height: feet Dam length: feet | |
| • Surface areas | |
| 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 facility for the second se | ∐Yes ∑ No ility? |
| 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: | |
| | |
| <i>iii.</i> 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: | Ves No |
| <i>i</i> . Describe waste(s) handled and waste management activities, including approximate time when activities occur | red: |
| | |
| 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): | |
| Yes – Environmental Site Remediation database Provide DEC ID number(s): Neither database | |
| <i>ii.</i> If site has been subject of RCRA corrective activities, describe control measures: | |
| <i>iii.</i> Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? If yes, provide DEC ID number(s): | |
| 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 limiting property uses? | Yes Z No |
|--|-------------------|
| If yes, DEC site ID number: | |
| Describe the type of institutional control (e.g., deed restriction or easement): | |
| Describe any use limitations: Describe any engineering controls: | |
| Describe any engineering controls. Will the project affect the institutional or engineering 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? OVER 6' feet | |
| b. Are there bedrock outcroppings on the project site? | ☐ Yes / No |
| If Yes, what proportion of the site is comprised of bedrock outcroppings?% | |
| c. Predominant soil type(s) present on project site: SWARDSWOOD & MARDIN-SXC 63 9 | 6 |
| MARDIN-MdB, MdC 37 9 | |
| 9 | 6 |
| d. What is the average depth to the water table on the project site? Average:OVER 4'feet | |
| e. Drainage status of project site soils: V Well Drained:63 % of site | |
| \checkmark Moderately Well Drained: <u>37</u> % of site | |
| Poorly Drained% of site | |
| f. Approximate proportion of proposed action site with slopes: 🔽 0-10%:40 % of site | · · · · · · |
| \checkmark 10-15%:60 % of site | |
| \square 15% or greater:% of site | |
| g. Are there any unique geologic features on the project site? | ☐ Yes 7 No |
| If Yes, describe: | <u> </u> |
| | |
| h. Surface water features. | |
| i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, | √ Yes□No |
| ponds or lakes)? | √ Yes No |
| <i>ii.</i> Do any wetlands or other waterbodies adjoin the project site? If Yes to either <i>i</i> or <i>ii</i> , continue. If No, skip to E.2.i. | |
| <i>iii.</i> Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, | √ Yes ⊡No |
| state or local agency? | |
| <i>iv.</i> For each identified regulated wetland and waterbody on the project site, provide the following information: | |
| Streams: Name Classification | |
| • Lakes or Ponds: Name Classification | |
| Wetlands: Name NYS Wetland, Federal Waters Approximate Size NYS | Wetland (in a |
| Wetland No. (if regulated by DEC) <u>NB-16</u> v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired | Yes ZNo |
| waterbodies? | |
| If yes, name of impaired water body/bodies and basis for listing as impaired: | |
| | |
| i. Is the project site in a designated Floodway? | Yes ZNo |
| j. Is the project site in the 100 year Floodplain? | Yes No |
| k. Is the project site in the 500 year Floodplain? | Yes V No |
| 1. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? | Yes No |
| If Yes: <i>i</i> . Name of aquifer: | |
| ». 1 mar 01 alfanton. | |

,

| m. Identify the predominant wildlife species that occupy or use the project site: DEER, SQUIRREL, CHIPMONK, BIRDS | | |
|--|---------------------------------------|------------------|
| SNAKE | | |
| | | |
| n. Does the project site contain a designated significant natural community? If Yes: | | Yes Z No |
| <i>i</i> . Describe the habitat/community (composition, function, and basis for design | ation): | |
| | | |
| <i>ii.</i> Source(s) of description or evaluation: | | |
| <i>iii.</i> Extent of community/habitat:Currently: | acres | |
| Following completion of project as proposed: | | |
| • Gain or loss (indicate + or -): | acres | |
| o. Does project site contain any species of plant or animal that is listed by the fed | leral government or NYS as | Yes No |
| endangered or threatened, or does it contain any areas identified as habitat for a | | |
| ,,, _, | · · · · · · · · · · · · · · · · · · · | |
| | | |
| | | |
| | | |
| Dans the mainst site contain survey and in a fullent on animal that is listed by NE | VC | Yes No |
| p. Does the project site contain any species of plant or animal that is listed by N special concern? | YS as fare, of as a species of | |
| | | |
| | | |
| | | |
| | | |
| q. Is the project site or adjoining area currently used for hunting, trapping, fishing | | ∐Yes Z No |
| If yes, give a brief description of how the proposed action may affect that use: | | ····· |
| | | <u> </u> |
| E.3. Designated Public Resources On or Near Project Site | · · · · · · · · · · · · · · · · · · · | |
| a. Is the project site, or any portion of it, located in a designated agricultural distr | ict certified pursuant to | Yes ZNo |
| Agriculture and Markets Law, Article 25-AA, Section 303 and 304? If Yes, provide county plus district name/number: | | |
| | | |
| b. Are agricultural lands consisting of highly productive soils present? | | Yes Z No |
| <i>i</i>. If Yes: acreage(s) on project site? <i>ii</i>. Source(s) of soil rating(s): | | |
| | | |
| c. Does the project site contain all or part of, or is it substantially contiguous to, Natural Landmark? | a registered National | ☐Yes ⁄ No |
| If Yes: | | |
| | Geological Feature | |
| ii. Provide brief description of landmark, including values behind designation a | | |
| | | |
| ······ | | |
| d. Is the project site located in or does it adjoin a state listed Critical Environmen | tal Area? | √ Yes No |
| If Yes: | | |
| <i>i.</i> CEA name: Chadwick Lake Reservoir <i>ii.</i> Pagis for degination: Development threat to public health | , | |
| <i>ii.</i> Basis for designation: Development threat to public health <i>iii.</i> Designating agency and date: Agency:Newburgh, Town of, Date:5-21-87 | | |
| | | |

•

| e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places? If Yes: i. Nature of historic/archaeological resource: If Archaeological Site ii. Name: iii. Brief description of attributes on which listing is based: | Yes 🗹 No |
|--|------------------|
| f. 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? | Yes No |
| g. Have additional archaeological or historic site(s) or resources been identified on the project site? If Yes: <i>i</i>. Describe possible resource(s): <i>ii</i>. Basis for identification: | ∏Yes ∑ No |
| 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: i. Identify resource: ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or etc.); | Yes No |
| etc.): | |
| 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: ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? | Yes No |

F. Additional Information

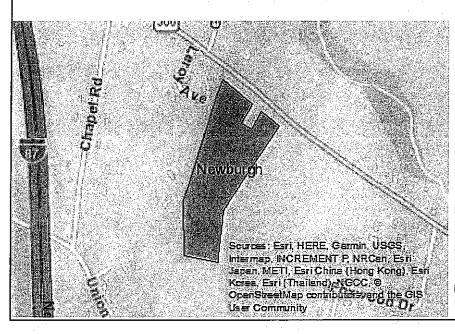
Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

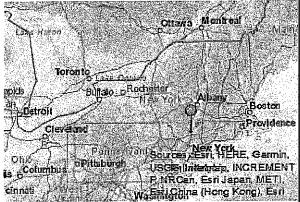
G. Verification

I certify that the information provided is true to the best of my knowledge.

| Applicant/Sponsor Name CH4 | ARLES T. BROWN, PE | Date 6-3-2020 |
|----------------------------|--------------------|------------------------|
| Signature | | Title PROJECT ENGINEER |

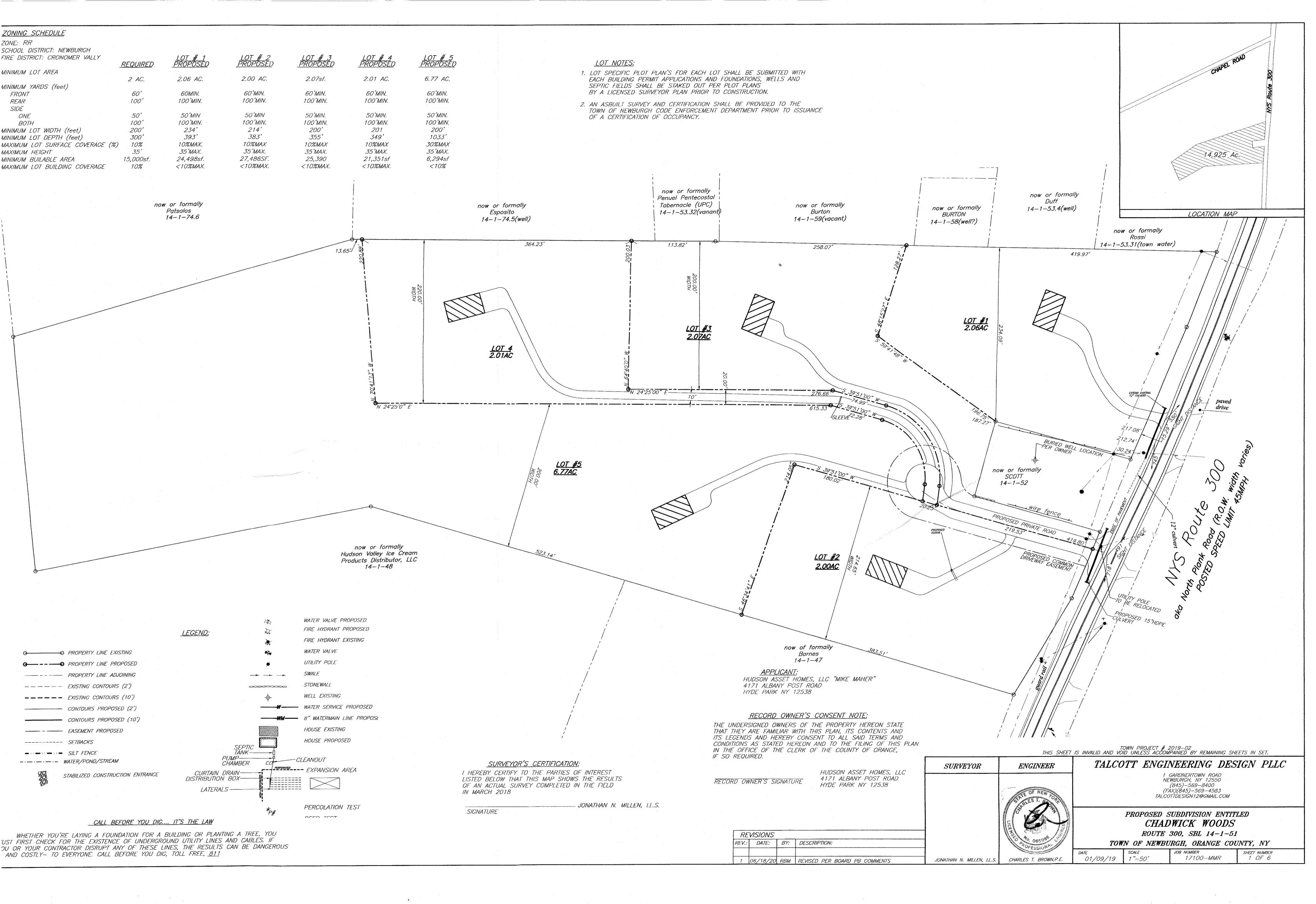


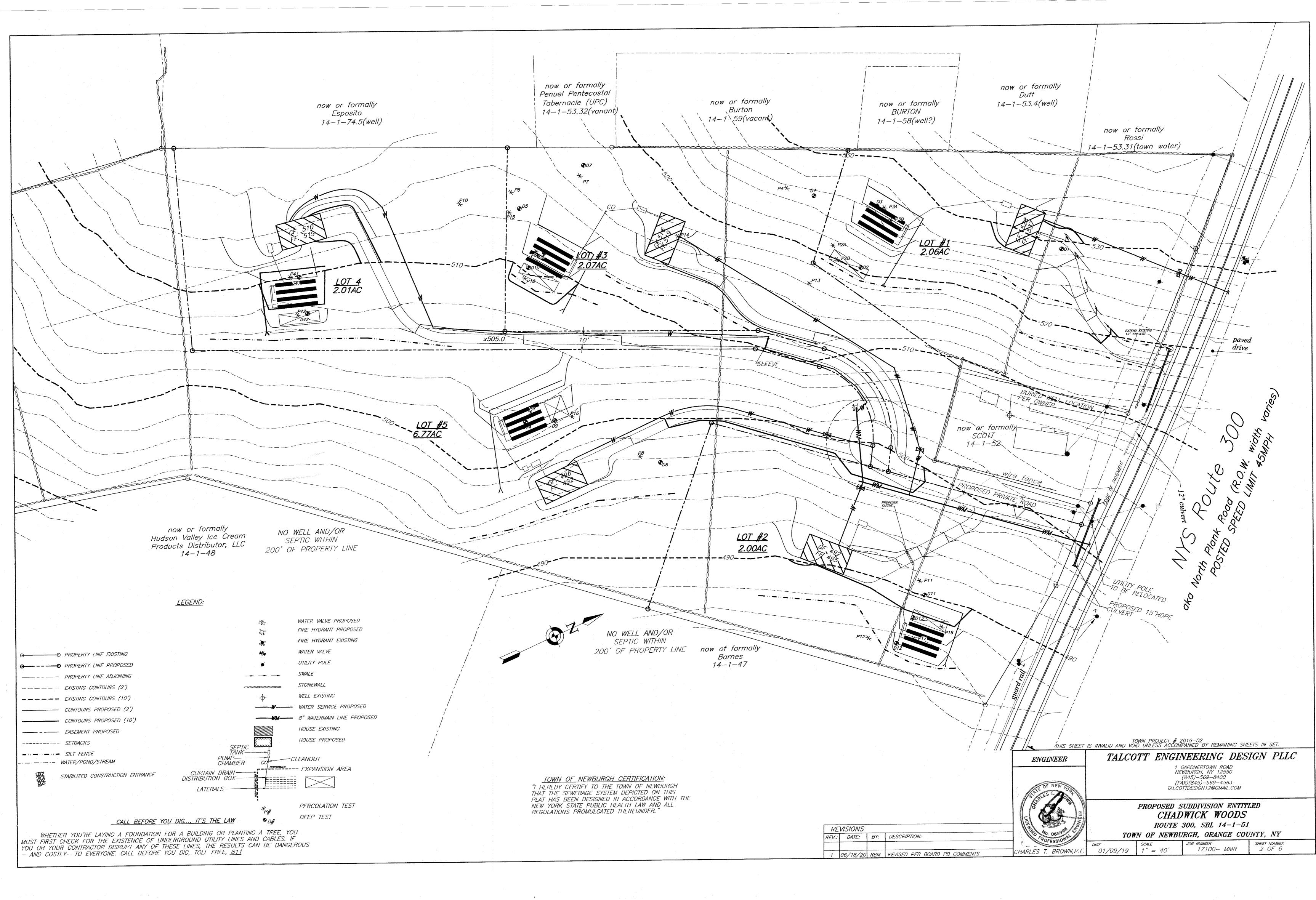
Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.



| B.i.i [Coastal or Waterfront Area] | No |
|---|---|
| B.i.ii [Local Waterfront Revitalization Area] | No |
| C.2.b. [Special Planning District] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h [DEC Spills or Remediation Site - Potential Contamination History] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.I [DEC Spills or Remediation Site - Listed] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.iii [Within 2,000' of DEC Remediation Site] | No |
| E.2.g [Unique Geologic Features] | No |
| E.2.h.i [Surface Water Features] | Yes |
| E.2.h.ii [Surface Water Features] | Yes |
| E.2.h.iii [Surface Water Features] | Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook. |
| E.2.h.iv [Surface Water Features - Wetlands Name] | NYS Wetland, Federal Waters |
| E.2.h.iv [Surface Water Features - Wetlands Size] | NYS Wetland (in acres):15.5 |
| E.2.h.iv [Surface Water Features - DEC Wetlands Number] | NB-16 |
| E.2.h.v [Impaired Water Bodies] | Νο |
| E.2.i. [Floodway] | No |
| E.2.j. [100 Year Floodplain] | |
| E.2.k. [500 Year Floodplain] | No |
| anna 19 a' fa air a' ann ann ann an ann ann ann ann ann a | |

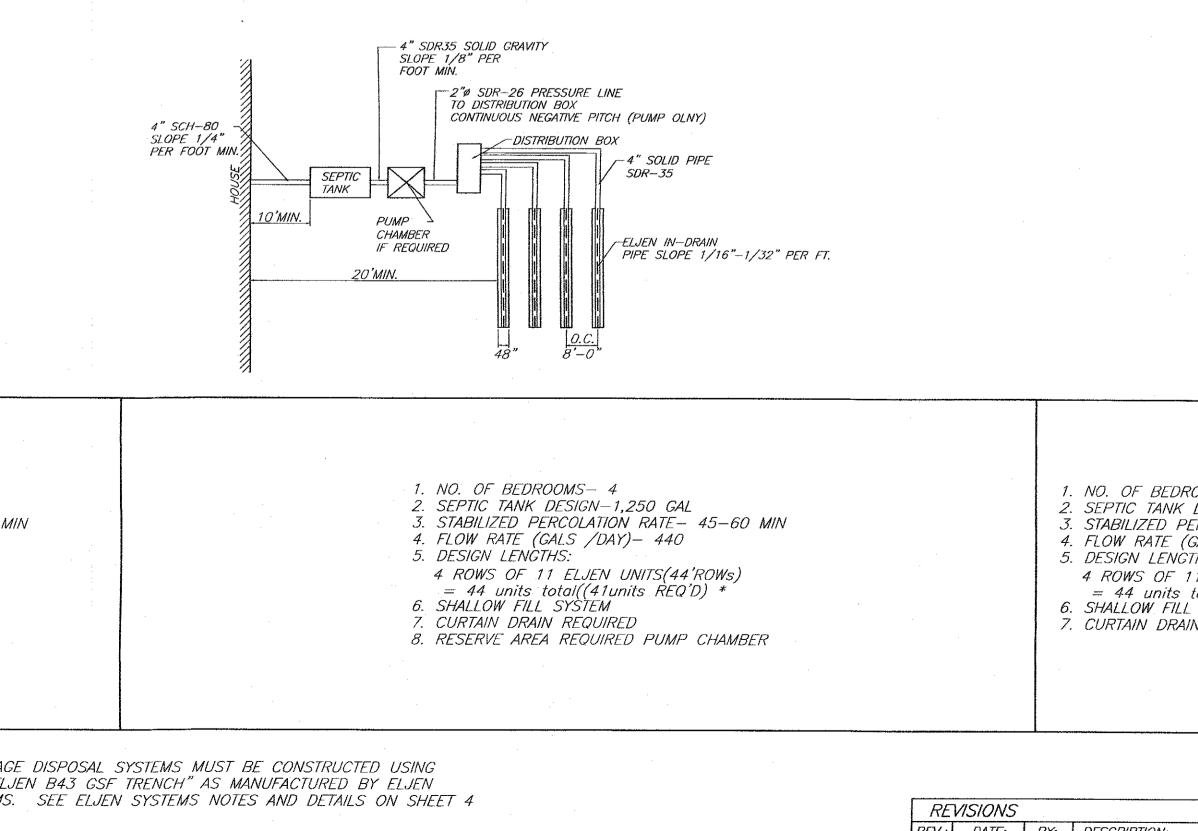
| <u>ี</u> | |
|---|--|
| E.2.n. [Natural Communities] | No |
| E.2.o. [Endangered or Threatened Species] | No |
| E.2.p. [Rare Plants or Animals] | No |
| E.3.a. [Agricultural District] | No |
| E.3.c. [National Natural Landmark] | No |
| E.3.d [Critical Environmental Area] | Yes |
| E.3.d [Critical Environmental Area - Name] | Chadwick Lake Reservoir |
| E.3.d.ii [Critical Environmental Area - Reason] | Development threat to public health |
| E.3.d.iii [Critical Environmental Area – Date and Agency] | Agency:Newburgh, Town of, Date:5-21-87 |
| E.3.e. [National Register of Historic Places] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.3.f. [Archeological Sites] | No |
| E.3.i. [Designated River Corridor] | |





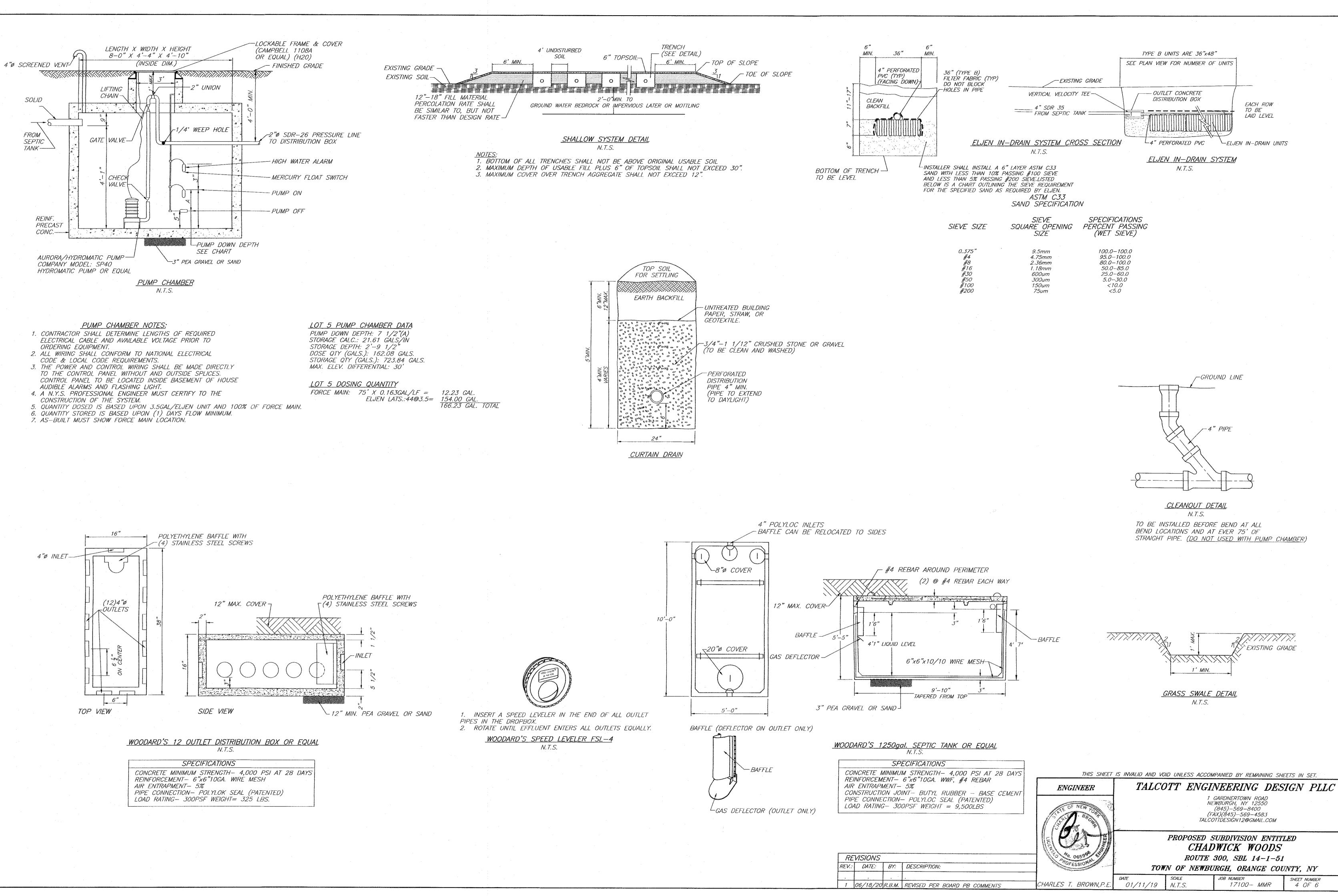
| <u>LOT #</u> | <u>LOT 1</u> | | <u>LOT_2</u> |
|---|--|--|---|
| <u>DEEP TEST DATA</u> : | D1 60" DEEP 04/24/17 0-6" TOP SOIL 6"-28" CLAY LOAM W/GRAVEL 28"-60" CLAY LOAM W/GRAVEL "DAMP" NO ROCK, WATER, OR MOTTLING D2 78" DEEP 04/24/17 0-6" TOP SOIL 6-32" CLAY LOAM 32-78" CLAY LOAM "DAMP" NO ROCK, WATER, OR MOTTLING D3 88" DEEP 04/24/17 0-6" TOP SOIL 6"-55" CLAY LOAM 55"-88" CLAY LOAM "DAMP" NO ROCK, NO WATER, MOTTLING © 55" | | D11 72" DEEP 04/24/17, 0-6" TOP SOIL 6"-72" CLAY LOAM NO ROCK, WATER @ 50", NO MOTTLIN D12 72" DEEP 04/24/17, 0-6" TOP SOIL 6"-72" CLAY LOAM NO ROCK, WATER @ BOTTOM, MOTTLIN D13 30" DEEP 07/01/19, 0-6" TOP SOIL 6"-30" CLAY LOAM NO ROCK, WATER @ BOTTOM, NO MO |
| PERCOLATION DATA: | ★ P1 15" DEEP 04/24/17 1 2 3 FINISH 3:55 4:22 4:50 START 3:11 3:55 4:23 TIME :24 :27 :27 STABILIZED PERCOLATION RATE: 27 MINUTES /INCH ★ P2A 12" DEEP 06/15/17 1 2 2:38 3:20 4:05 START 2:12 2:21 2:39 3:22 TIME :08 :17 41 4:3 STABILIZED PERCOLATION RATE: 43 MINUTES /INCH ★ P2B 24" DEEP 06/15/17 1 2 3 4 FINISH 1:10 1:47 2:32 3:29 START 12:52 1:11 1:48 2:35 TIME :18 :36 :44 :54 STABILIZED PERCOLATION RATE: 54 MINUTES /INCH ★ P3A 12" DEEP 06/15/17 1 2 3 4 FINISH 1:10 1:47 2:32 3:29 START 12:52 1:11 1:48 2:35 TIME :18 :36 :44 :54 STABILIZED PERCOLATION RATE: 54 MINUTES /INCH ★ P3A 12" DEEP 06/15/17 1 2 3 FINISH 2:11 2:30 2:39 START 2:14 2:22 2:31 TIME :07 :08 :08 STABILIZED PERCOLATION RATE: 8 MINUTES /INCH ★ P3B 24" DEEP 06/15/17 1 2 3 4 FINISH 1:24 2:03 2:44 3:27 START 12:55 1:25 2:04 2:38 TIME :29 :38 :40 :49 STABILIZED PERCOLATION RATE: 49 MINUTES /INCH | 5 4:09 4:06 :43 5 4:49 3:30 :54 3 3:29 :49 | * P11 12" DEEP 11/08/17 1 2 3 FINISH 2:39 3:45 START 1:52 2:39 3:45 TIME :47 :66 :66 STABILIZED PERCOLATION RATE: 66 MINUTES /INCH * P12 12" DEEP 11/08/17 1 2 3 FINISH 1:45 3:40 START 2:40 3:40 TIME :55 :60 :60 STABILIZED PERCOLATION RATE: 60 MINUTES /INCH * P17 12" DEEP 07/03/18 1 2 3 FINISH 3:41 3:47 STABILIZED PERCOLATION RATE: 60 MINUTES /INCH * P17 12" DEEP 07/03/18 1 2 3 STABILIZED PERCOLATION RATE: 6 MINUTES /INCH * P19 12" DEEP 07/01/19 1 2 3 STABILIZED PERCOLATION RATE: 6 MINUTES /INCH * P19 12" DEEP 07/01/19 1 2 3 |
| <u>TYPICAL FIELD LAYOUT:</u> SEE DESIGN CRITERIA & GRADING PLAN) | 1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 45-60 MIN 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 4 ROWS OF 11 ELJEN UNITS(44'ROWS) = 44 units total((41units REQU) * 6. SHALLOW FILL SYSTEM(18") 7. CURTAIN DRAIN REQUIRED | | 1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 31-45 M 4. FLOW RATE (GALS /DAY)- 440 5. DESIGN LENGTHS: 4 ROWS OF 10 ELJEN UNITS(40'ROWs) = 40 units total((37units REQ'D) * 6. SHALLOW FILL SYSTEM(18") 7. CURTAIN DRAIN REQUIRED |
| L | | I | * SEWAG THE "EL SYSTEMS |

<u>LOT 3</u> <u>LOT 4</u> <u>LOT 5</u> •<u>D41</u> /17 84" DEEP 04/24/17 ● D10 30" DEEP ●<u>D9</u> 0=6 🗣 D4 72" DEEP 07/01/19 04/24/17 04/24/17 60" DEEP 0-6" TOP SOIL TOP SOIL 0-6" TOP SOIL 6"-42" CLAY LOAM 0-6" TOP SOIL 6"-60" CLAY LOAM W/STONES 6"-30" CLAY LOAM 6"-24" CLAY LOAM W/GRAVEL LING 42"-84" CLAY LOAM W/SMALL STONES "DAMP" NO ROCK, WATER @ 40", NO MOTTLING NO ROCK, WATER, OR MOTTLING 24"-72" CLAY LOAM NO ROCK, WATER, OR MOTTLING NO ROCK, WATER SEEAGE @ 30" 60" DEEP 04/24/17 17 🕀 D8 60" DEEP 04/24/17 🗣 D5 0–6" TOP SOIL • D42 72" DEEP 04/24/17 0-6" TOP SOIL 6"-60" WET CLAY LOAM 6"-60" CLAY LOAM 0-6" TOP SOIL LING @ 46" NO ROCK, WATER @ 28", MOTTLING @ 28" NO ROCK, WATER @ 12", MOTTLING @ 12" 6"-24" CLAY LOAM W/GRAVEL 24"—72" CLAY LOAM ● D14______ 30" DEEP 04/24/17 NO ROCK, WATER SEEAGE @ 30" 60" DEEP 4/24/17 ●<u>___6</u> /19 TOP SOIL 0-6" TOP SOIL 6"-30" CLAY LOAM 6–40" CLAY LOAM 40–60" WET CLAY LOAM W/GRAVEL NO ROCK, WATER, OR MOTTLING MOTTLING NO ROCK, WATER @ 40". MOTTLING @ 40" • D7 60" DEEP 4/24/17 0-12" TOP SOIL 12-60" WET CLAY LOAM NO ROCK, WATER @ 24", MOTTLING @ 24" * P13 12" DEEP 07/03/18 * P10 12" DEEP 11/08/17 * P4 16" DEEP 06/15/17 07/20/17 12" DEEP * P8 2 FINISH 3:42 4:10 4:40 FINISH 11:26 11:30 11:35 1:57 1:05 3:12 FINISH 12:34 12:44 4:07 FINISH 12:41 START TIME 3:07 4:13 11:24 :02 11:26 :04 1:03 :22 START 3:43 11:31 2:57 3:29 START 11:40 1:40 1:50 3:57 START :13 :27 :04 TIME :60 TIME :27 :60 :54 :56 :45 TIME :45 STABILIZED PERCOLATION RATE: 27 MINUTES /INCH STABILIZED PERCOLATION RATE: 4 MINUTES /INCH STABILIZED PERCOLATION RATE: 60 MINUTES /INCH H STABILIZED PERCOLATION RATE: 45 MINUTES /INCH 12" DEEP 06/16/17 * P14 12" DEEP 07/03/18 * P5 - 3 2:27 3:53 FINISH 3:05 4:40 12:30 12:02 12:57 12" DEEP 12/20/18 FINISH * <u>P41</u> 12" DEEP 07/120/17 * <u>P9</u> START 2.20 2:30 3:08 3:55 START TIME 11:51 12:04 12:31 2 TIME :07 :35 :45 :45 4 :11 :26 :26 FINISH 2:29 1:32 :57 3:27 1:31 FINISH 1:48 12:05 12:57 2:39 STABILIZED PERCOLATION RATE: 45 MINUTES /INCH STABILIZED PERCOLATION RATE: 26 MINUTES /INCH START TIME 2:30 :57 12:48 12:47 START 11:30 12:11 1:49 :44 TIME :35 :46 :50 :50 CH. STABILIZED PERCOLATION RATE: 57 MINUTES /INCH STABILIZED PERCOLATION RATE: 50 MINUTES /INCH * P15 12" DEEP 07/03/18 * <u>P6</u> 12" DEEP 06/16/18 FINISH 1:35 1:49 2:02 1:24 :11 FINISH 12:40 1:30 2:18 * <u>P16</u> START 1:37 1:50 12" DEEP 07/03/18 * <u>P42</u> 12" DEEP 12/20/18 START 12:20 12:43 1:31 TIME :12 :12 TIME :20 :47 :47 STABILIZED PERCOLATION RATE: 12 MINUTES /INCH 2:36 2:33 :03 2:44 2:37 :07 2:53 2:46 :07 FINISH 2 STABILIZED PERCOLATION RATE: 47 MINUTES /INCH START 2:02 1:38 :24 2:49 FINISH 1:38 1:12 1:20 TIME 1:21 :17 START 1:12 2:14 1:05 STABILIZED PERCOLATION RATE: 7 MINUTES /INCH * <u>P18</u> 12" DEEP 07/01/19 :25 * P7 12" DEEP 06/16/18 TIME :07 :08 STABILIZED PERCOLATION RATE: 25 MINUTES /INCH 12:15 3:00 3:17 FINISH FINISH 3:34 10:28 11:21 3:01 :16 START 10:17 11:25 START 2:45 3:18 10:29 TIME :50 :50 TIME :15 :11 :16 STABILIZED PERCOLATION RATE: 50 MINUTES /INCH STABILIZED PERCOLATION RATE: 16 MINUTES /INCH CH^{-} **USED FOR DESIGN **USED FOR DESIGN **USED FOR DESIGN - 4" SDR35 SOLID GRAVITY SLOPE 1/8" PER FOOT MIN. -2"ø SDR-26 PRESSURE LINE TO DISTRIBUTION BOX CONTINUOUS NEGATIVE PITCH (PUMP OLNY) 4" SCH-80 SLOPE 1/4" PER FOOT MIN.// DISTRIBUTION BOX -4" SOLID PIPE SDR--35 SEPTIC TANK 10'MIN. PUMP CHAMBER -ELJEN IN-DRAIN IF REQUIRED PIPE SLOPE 1/16"-1/32" PER FT. <u>20'MIN</u> 1. NO. OF BEDROOMS- 4 2. SEPTIC TANK DESIGN-1,250 GAL 3. STABILIZED PERCOLATION RATE- 46-60 MIN 4. FLOW RATE (GALS /DAY)- 440 1. NO. OF BEDROOMS- 4 1. NO. OF BEDROOMS- 4 5. DESIGN LENGTHS: SEPTIC TANK DESIGN-1,250 GAL 2. SEPTIC TANK DESIGN-1,250 GAL 4 ROWS OF 11 ELJEN UNITS(44'ROWs) 3. STABILIZED PERCOLATION RATE- 45-60 MIN MIN 3. STABILIZED PERCOLATION RATE- 46-60 MIN = 44 units total((41units REQ'D) * 4. FLOW RATE (GALS /DAY)- 440 4. FLOW RATE (GALS /DAY)- 440 6. SHALLOW FILL SYSTEM(18") 5. DESIGN LENGTHS: 5. DESIGN LENGTHS: 7. CURTAIN DRAIN REQUIRED 4 ROWS OF 11 ELJEN UNITS(44'ROWs) 4 ROWS OF 11 ELJEN UNITS(44'ROWs) 8.PUMP CHAMBER REQUIRED = 44 units total((41units REQ'D) * 6. SHALLOW FILL SYSTEM (18") = 44 units total((41units REQ'D) * THIS SHEET IS INVALID AND VOID UNLESS ACCOMPANIED BY REMAINING SHEETS IN SET. 6. SHALLOW FILL SYSTEM 7. CURTAIN DRAIN REQUIRED 7. CURTAIN DRAIN REQUIRED TALCOTT ENGINEERING DESIGN PLLC ENGINEER 8. RESERVE AREA REQUIRED PUMP CHAMBER 1 GARDNERTOWN ROAD NEWBURGH, NY 12550 (845)-569-8400 (FAX)(845)-569-4583 TALCOTTDESIGN12@GMAIL.COM PROPOSED SUBDIVISION ENTITLED VAGE DISPOSAL SYSTEMS MUST BE CONSTRUCTED USING CHADWICK WOODS "ELJEN B43 GSF TRENCH" AS MANUFACTURED BY ELJEN SYSTEMS. SEE ELJEN SYSTEMS NOTES AND DETAILS ON SHEET 4 ROUTE 300, SBL 14-1-51 TOWN OF NEWBURGH. ORANGE COUNTY. NY SCALE JOB NUMBER SHEET NUMBER DATE 17100- MMR CHARLES T. BROWN, P.E. 01/11/19 N.T.S. 3 OF 6 DARD PB COMMENTS



| | | |
|--|-------------|--|
| | | |

| RE | VISIONS | | |
|-------|----------|-----|-----------------|
| REV.: | DATE: | BY: | DESCRIPTION: |
| | | | |
| 1 | 06/18/20 | RBM | REVISED PER BOA |



CONSTRUCTION SCHEDULE FOR EACH LOT

1. OBTAIN PLAN APPROVAL AND OTHER APPLICABLE PERMITS. 2. FLAG THE WORK LIMITS

- 3. HOLD PRE-CONSTRUCTION CONFERENCE AT LEAST ONE WEEK PRIOR TO STARTING CONSTRUCTION.
- 4. INSTALL TEMPORARY GRAVEL CONSTRUCTION ENTRANCE/EXIT.

5. INSTALL SILT FENCE

- 6. COMPLETE SITE CLEARING 7. ROUGH GRADE SITE, STOCKPILE TOPSOIL, INSTALL DRIVEWAY CULVERT
- 8. EXCAVATE FOR FOUNDATION
- 9. BUILD FOUNDATION
- 10. FRAME HOUSE
- 11. BACKFILL FOUNDATION 12. FINISH THE SLOPES AROUND BUILDINGS AS SOON AS ROUGH GRADING IS COMPLETE. LEAVE THE SURFACE SLIGHTLY ROUGHENED AND VEGETATE AND MULCH IMMEDIATELY.
- 13. COMPLETE FINAL GRADING FOR DRIVEWAY AND BUILDING.
- 14. AFTER THE SITE IS STABILIZED, REMOVE ALL TEMPORARY MEASURES AND INSTALL PERMANENT VEGETATION ON THE DISTURBED AREAS. 15. ESTIMATED TIME BEFORE FINAL STABILIZATION--9 MONTHS.

<u>SEPTIC SYSTEM GENERAL NOTES:</u>

- 1. ALL PORTIONS OF THE SEPTIC FIELD WILL BE A MINIMUM DISTANCE OF
- 200 FEET UP SLOPE AND 100 FEET DOWN SLOPE FROM ANY WELL. SEPTIC TANK TO BE LOCATED A MINIMUM DISTANCE OF 10 FEET FROM
- ANY BUILDING OR PROPERTY LINE AND 50' FROM WELL. CELLAR DRAINS, ROOF DRAINS OR FOOTING DRAINS SHALL NOT BE
- DISCHARGED IN OR INTO THE VICINITY OF ABSORPTION FIELD.
- 4. NO SWIMMING POOLS, DRIVEWAYS, OR STRUCTURES THAT MAY COMPACT THE SOIL SHALL BE CONSTRUCTED OVER ANY PORTION OF THE ABSORPTION FIELD.
- 5. NO TRENCHES TO BE INSTALLED IN WET SOIL.
- 6. RAKE SIDES AND BOTTOM OF TRENCH PRIOR TO PLACING GRAVEL IN ABSORPTION TRENCH.
- 7. GROUT ALL PIPE PENETRATIONS TO CONC. SEPTIC TANK & DISTRIBUTION BOX. 8. DISTRIBUTION LINES ARE TO BE CAPPED.
- 9. THE PERIMETER OF THE ABSORPTION FIELD SHOULD BE GRADED TO DIVERT
- SURFACE WATER. 10. ALL NEWLY DISTURBED AREAS SHALL BE IMMEDIATELY STABILIZED UPON
- CONSTRUCTION COMPLETION USING GRASS SEED & MULCH.
- 11. NO SEWAGE SYSTEM SHALL BE PLACED WITHIN 100' OF ANY WATER COURSE OR 35' DRAINAGE DITCH. 12. ALL LAUNDRY AND KITCHEN WASTES SHALL BE DISCHARGED INTO SEWAGE
- SYSTEM. 13. BENDS SHALL BE USED WHEN ENTRANCE OR EXIT FROM SEPTIC TANK IS
- NOT APPROXIMATELY STRAIGHT. IF BENDS ARE USED AT POINTS OTHER THAN ENTRANCE OR EXIT POINTS, THEN A CLEANOUT IS REQUIRED. 14. THE DESIGN AND LOCATION OF THE SANITARY FACILITIES SHALL NOT BE CHANGED WITHOUT RESUBMISSION FOR APPROVAL
- 15. HEAVY EQUIPMENT SHALL BE KEPT OFF THE AREA OF THE ABSORPTION FIELDS EXCEPT DURING THE ACTUAL CONSTRUCTION. THERE SHALL BE NO UNNECESSARY MOVEMENT OF CONSTRUCTION EQUIPMENT IN THE
- ABSORPTION FIELD AREA BEFORE, DURING, OR AFTER CONSTRUCTION. 16. THIS SYSTEM WAS NOT DESIGNED TO ACCOMMODATE GARBAGE GRINDERS JACUZZI TYPE SPA TUBS OVER 100 GALLONS, OR WATER CONDITIONERS AS SUCH, THESE ITEMS SHALL NOT BE INSTALLED UNLESS THE SYSTEM IS REDESIGNED TO ACCOUNT FOR THESE.
- 17. THERE MUST BE AN UNINTERRUPTED POSITIVE SLOPE FROM THE SEPTIC TANK (OR ANY PUMPING OR DOSING CHAMBER) TO THE HOUSE, ALLOWING SEPTIC GASES TO DISCHARGE THROUGH THE STACK VENT.
- 18. THE PURCHASER OF THIS LOT SHALL BE PROVIDED WITH A COPY OF THE APPROVED PLANS AND AN ACCURATE AS-BUILT DRAWING OF ANY EXISTING SANITARY FACILITIES.
- 19. THE DESIGN ENGINEER WILL BE REQUIRED TO CERTIFY THE COMPLETED DISPOSAL FACILITY. 20. AN ASBUILT SURVEY AND CERTIFICATION SHALL BE PROVIDED TO THE TOWN OF NEWBURGH CODE ENFORCEMENT DEPARTMENT PRIOR TO ISSUANCE OF A CERTIFICATION OF OCCUPANCY.

STANDARD NOTES:

INSTALLATION AND PLACEMENT.

THE DESIGN, CONSTRUCTION AND INSTALLATION SHALL BE IN ACCORDANCE WITH THIS PLAN AND GENERALLY ACCEPTED STANDARDS IN EFFECT AT THE TIME OF CONSTRUCTION WHICH INCLUDE:

"APPENDIX 75-A, WASTE TREATMENT - INDIVIDUAL HOUSEHOLD SYSTEMS, NEW YORK STATE SANITARY CODE. "WASTE TREATMENT HANDBOOK, INDIVIDUAL HOUSEHOLD SYSTEMS, NEW YORK STATE DEPARTMENT OF HEALTH. "RURAL WATER SUPPLY, NEW YORK STATE DEPARTMENT OF HEALTH." "PLANNING THE SUBDIVISION AS PART OF THE TOTAL ENVIRONMENT, NEW YORK STATE DEPARTMENT OF HEALTH."

"THIS PLAN IS APPROVED AS MEETING THE APPROPRIATE AND APPLIED TECHNICAL STANDARDS, GUIDELINES, POLICIES AND PROCEDURES FOR ARRANGEMENT OF SEWAGE DISPOSAL AND TREATMENT AND WATER SUPPLY FACILITIES.

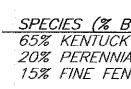
ALL WELLS AND S.D.S. EXISTING OR APPROVED WITHIN 200' OF THE PROPOSED WELLS AND S.D.S. ARE SHOWN ON THIS PLAN ALONG WITH ANY OTHER ENVIRONMENTAL HAZARDS IN THE AREA THAT MAY AFFECT THE DESIGN AND FUNCTIONAL ABILITY OF THE S.D.S. AND WELL. IT SHALL BE DEMONSTRATED BY THE CONTRACTOR TO THE CERTIFYING ENGINEER THAT THE SEPTIC TANK IS SEALED, WATER TIGHT AND ACCEPTABLE FOR USE. THIS SHALL REQUIRE, AS A MINIMUM, THE FILLING OF THE TANK WITH WATER TO OBSERVE IF IT IS IN FACT SEALED, WATERTIGHT AND ACCEPTABLE FOR USE. ALL PROPOSED WELLS AND SERVICE LINES ON THIS PLAN ARE ACCESSIBLE FOR

TRENCH BOTTOMS TO BE SET LEVEL AND PARALLEL TO EXISTING CONTOURS. MAXIMUM DEPTH OF USABLE FILL PLUS 6" OF TOPSOIL SHALL NOT EXCEED 30".

VEGETATION REQUIREMENTS 1.) SITE PREPARATION MINIMUM OF 4 IN. TOPSOIL. C. LIME TO A PH OF 6.5 POUNDS OF 5-10-10 OR EQUIVALENT PER ACRE (20 LBS/1,000 SQ. FT.)

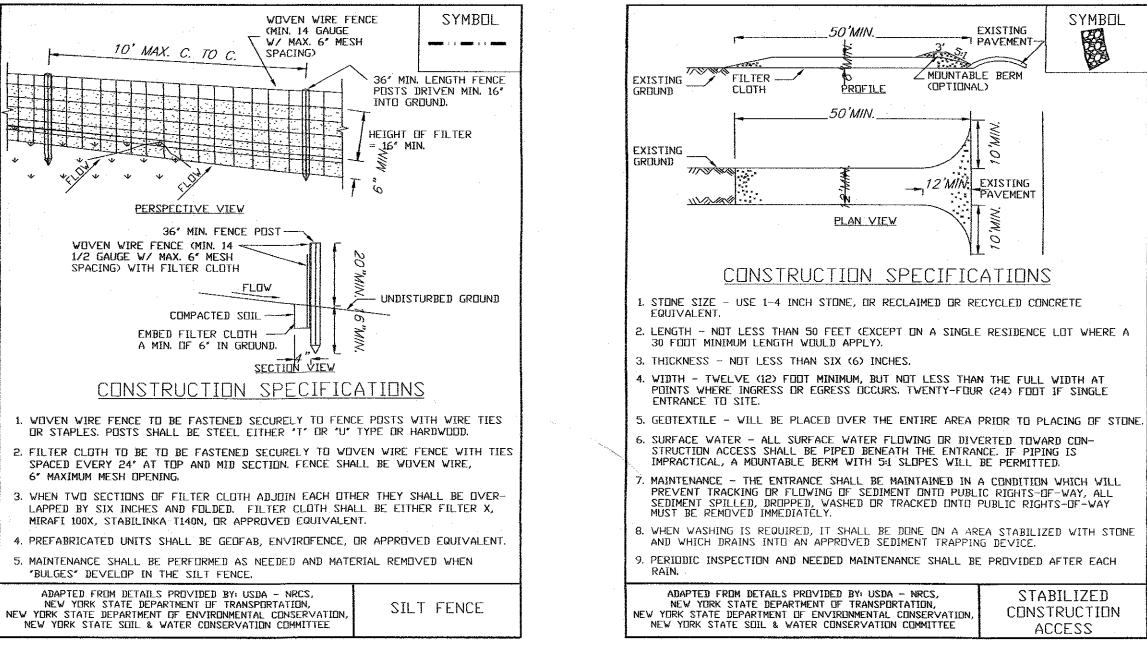
2.) PLANTING--SUNNY LOCATION. CULTIPACK OR ROLL AFTER SEEDING. IF FOLLOWING MIX AND RATES

SEEDBED.



100% TALL FEI

3.) WHEN USING THE CULTIPACKER OR BROADCAST SEED METHOD, MULCH USING SMALL GRAIN STRAW, APPLIED AT A RATE OF 2 TONS PER ACRE: AND ANCHOR WITH A NETTING OR TACKIFIER. HYDROSEED APPLICATIONS SHOULD INCLUDE MULCH, FERTILIZER AND SEED. COMMON WHITE CLOVER CAN BE ADDED TO MIXTURES AT THE RATE OF 1-2 LBS/ACRE TO HELP MAINTAIN GREEN COLOR DURING THE DRY SUMMER PERIOD. HOWEVER, THEY WILL NOT WITHSTAND HEAVY TRAFFIC. FERTILIZING-FIRST YEAR, (SPRING SEEDLINGS) THREE TO FOUR WEEKS AFTER GERMINATION APPLY 1 POUND NITROGEN/1,000 SQUARE FEET USING A COMPLETE FERTILIZER WITH A 2-1-1 OR 4-1-3 RATIO OR AS RECOMMENDED BY SOIL TEST RESULTS. FOR SUMMER AND EARLY FALL SEEDINGS, APPLY AS ABOVE UNLESS AIR TEMPERATURES ARE ABOVE 85°F FOR EXTENDED PERIOD. WAIT UNTIL HEAT WAVE IS OVER TO FERTILIZE. FOR LATE FALL/ WINTER SEEDINGS, FERTILIZE IN SPRING. RESTRICT USE—NEW SEEDLINGS SHOULD BE PROTECTED FROM USE FOR ONE FULL YEAR TO ALLOW DEVELOPMENT OF A DENSE SOD WITH GOOD ROOT STRUCTURE



A. INSTALL NEEDED WATER AND EROSION CONTROL MEASURES AND BRING AREA TO BE SEEDED TO DESIRED GRADES USING A

B. PREPARE SEEDBED BY LOOSENING SOIL TO A DEPTH OF 4-6 INCHES.

E. FERTILIZE AS PER SOIL TEST OR, IF FERTILIZER MUST BE APPLIED BEFORE SOIL TEST RESULTS ARE RECEIVED, APPLY 850

F. INCORPORATE LIME AND FERTILIZER IN TOP 2-4 INCHES OF TOPSOIL. G. SMOOTH. REMOVE ALL STONES OVER 1 INCH IN DIAMETER, STICKS, AND FOREIGN MATTER FROM THE SURFACE. FIRM THE

USE A CULTIPACKER TYPE SEEDER IF POSSIBLE. SEED TO A DEPTH OF 1/8 TO 1/4 INCH. IF SEED IS TO BE BROADCAST, HYDROSEEDED, LIME AND FERTILIZER MAY BE APPLIED THROUGH THE SEEDER AND ROLLING IS NOT PRACTICAL. SEED USING THE

<u>GRASS SEEDING CHART</u>

| BY WEIGHT) | LBS./1,000SQ.FT | LBS./ACRE |
|---|-------------------------------|--------------------------|
| KY BLUEGRASS BLEND IAL RYEGRASS NSCUE | 2.0–2.6 0.6–0.8 0.4–0.6 | 85–114 26–35 19–26 |
| ENSCUE, TURF-TYPE, FINE LEAF | 3.0-4.0 3.4-4.6 | 130–175 150–200 |

| RE | VISIONS | | ······································ |
|-------|----------|-----|--|
| REV.: | DATE: | BY: | DESCRIPTION: |
| | | | |
| 1 | 06/18/20 | RBM | REVISED PER |

<u> PIPE.</u>

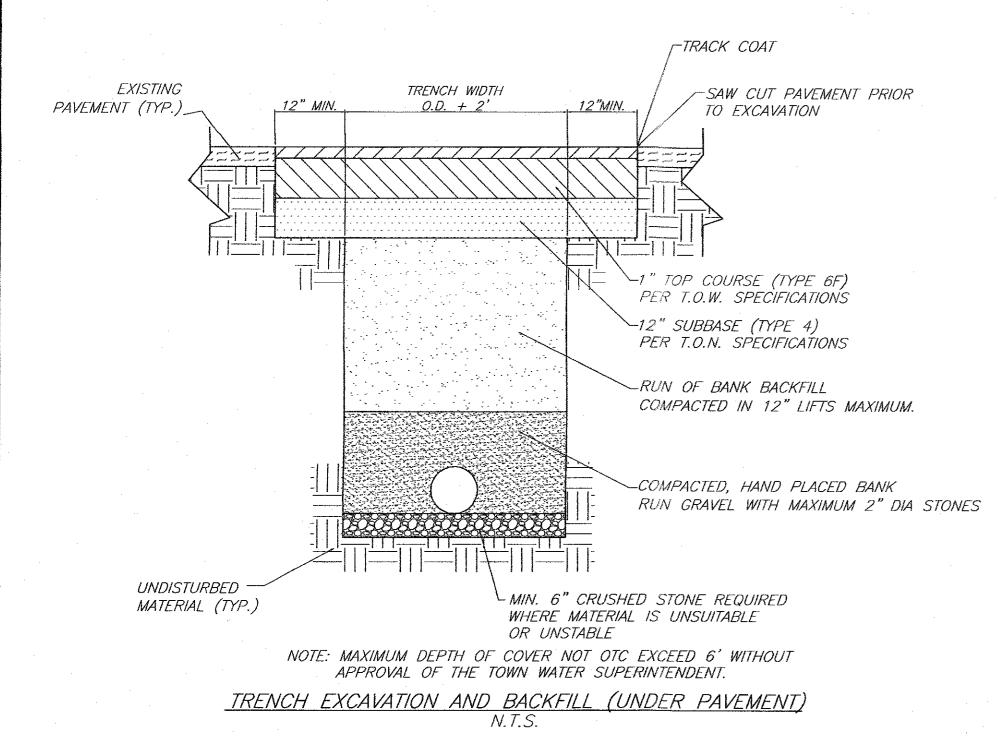
- A. DUCTILE IRON PIPE SHALL BE CLASS 52 WITH MECHANICAL-JOINT OR PUSH-ON JOINT CONNECTIONS. PIPE SHALL BE FURNISHED WITH A SEAL COATED CEMENT MORTAR LINING CONFORMING TO ANSI/AWWA C104/A21.4, LATEST VERSION. ALL BURIED PIPE SHALL BE FURNISHED WITH A STANDARD BITUMASTIC COATING CONFORMING TO A21.15, LATEST VERSION.
- B. PIPE SHALL BE MANUFACTURED IN ACCORDANCE WITH ANSI A21.50 AND AWWA C150/151, LATEST VERSION.
- C. FOR PUSH-ON JOINTS TWO(2) SILICON BRONZE WEDGES SHALL BE INSTALLED IN EACH JOINT AT THE 10 O'CLOCK AND 2 O'CLOCKPOSITIONS.
- 3. FITTINGS
- A. ALL FITTINGS SHALL BE CLASS 52 CAST IRON OR DUCTILE IRON AND MECHANICAL JOINT CONFORMING TO ANSI/AWWA C100/A21.10, LATEST EDITION FOR DUCTILE AND GRAY IRON FITTINGS OR
- ASI/AWWA C153/A21.53, LATEST EDITION FOR DUCTILE IRON COMPACT FITTINGS. B. FITTINGS SHALL HAVE A WORKING PRESSURE OF 250PSI FOR DUCTILE AND GRAY IRON FITTINGS AND 350PSI FOR DUCTILE IRON COMPACT FITTINGS.
- C. FITTINGS SHALL BE FURNISHED WITH A SEAL COATED CEMENT MORTAR LINING WITH THE SAME THICKNESS SPECIFIED FOR THE
- CORRESPONDING SIZE OF DUCTILE IRON PIPE.
- 4. JOINT RESTRAINT A. THRUST RESTRAINT OF THE PIPE SHALL BE THROUGH THE USE OF JOINT RESTRAINT. THRUST BLOCK ARE NOT ACCEPTABLE. JOINT RESTRAINT SHALL BE THROUGH THE USE OF MECHANICAL JOINT PIPE WITH RETAINER GLANDS. ALL FITTINGS AND VALVES SHALL ALSO BE INSTALLED WITH RETAINER GLANDS FOR JOINT RESTRAINT. RETAINER GLAN SHALL BE EBAA IRON MEGALUG SERIES 1100 OR APPROVED EQUAL. THE USE OF A MANUFACTURED RESTRAINED JOINT PIPE IS ACCEPTABLE WITH PRIOR APPROVAL OF THE WATER DEPARTMENT.
- 5. VALVES & VALVE BOXS A. ALL VALVES FOUR (4) INCHES THROUGH TWELVE (12) INCHES IN DIAMETER SHALL BE IRON BODY, BRONZE MOUNTED RESILIENT WEDGE GATE VALVES WITH MECHANICAL-JOINT ENDS. VALVES SHALL BE IN ACCORDANCE WITH THE LATEST VERSION OF AWWA C509.
- B. VALVES SHALL HAVE A MINIMUM OPERATING PRESSURE OF 250PSI AND FACTORY TESTED AT 500PSI. C. VALVES SHALL OPEN LEFT (COUNTER CLOCKWISE) WITH A STANDARD
- 2INCH SQUARE OPERATING NUT WITH ARROW CAST ONTO IT SHOWING THE DIRECTION OF OPENING D. GATE VALVE SHALL MODEL A-2360-23 AS MANUFACTURED BY MUELLER Co
- OR EQUAL. E. VALVE BOXES SHALL BE INSTALLED WITH ALL VALVES.
- F. VALVE BOXES SHALL BE OF CAST-IRON, TELESCOPING, AT LEAST FIVE AND ONE-QUATER INCH (51/4") IN DIAMETER. VALVE BOXES SHALL BE TWO (2) PIECE AND OF THE LENGTH SO THAT WHEN THE TOP IS AT FINISHEL GRADE . THE BOX WILL HAVE A EXTENSION RESERVE OF AT LEAST FIVE(5) INCHES.
- G. ALL VALVE BOXES SHALL BE FURNISHED TO MATCH THE SPECIFIC VALVE DIMENSIONS AND TRENCH DEPTH. H. VALVE BOXES SHALL BE PLUMB AND CENTERED OVER THE OPERATING NUT OF
- THE VALVE. I. ALL VALVE BOXES SHALL BE FURNISHED WITH A CAST IRON DROP STYLE
- COVER WITH THE WORD "WATER" AND A ARROW INDICATING THE DIRECTION OF VALVE OPENING.
- 7. ALL WATER SERVICE LINES TWO (2) INCHES IN DIAMETER AND SMALLER SHALL BE TYPE K COPPER TUBING. CORPORATION STOPS SHALL BE MUELLER H-15020 FOR 3/4 AND 1 INCH, MUELLER H-15000 OR B-25000 FOR 1 1/2 AND 2 INCH SIZES. CURB VALVES SHALL BE MUELLER H-1502-2 FOR 3/4 AND 1 INCH AND MUELLER B-25204 FOR 1 1/2 AND 2 INCH SIZES. CURB BOXES SHALL BE MUELLER H-10314 FOR 3/4 AND 1 INCH AND MUELLER H-10310 FOR 1 1/2 AND 2 INCH SIZES. 8. ALL PIPE INSTALLATION SHALL BE SUBJECT TO INSPECTION BY THE T.O.N. WATER DEPARTMENT.
- THE CONTRACTOR SHALL BE RESPONSIBLE FOR COORDINATING ALL INSPECTIONS AS REQUIRED WITH THE T.O.N. WATER DEPARTMENT.
- 9. THE WATER MAIN SHALL BE TESTED, DISINFECTED AND FLUSHED IN ACCORDANCE WITH THE T.O.N. REQUIREMENTS. ALL TESTING, DISINFECT ION AND FLUSHING SHALL BE COORDINATED WITH THE T.O.N. WATER DEPARTMENT. PRIOR TO PUTTING THE WATER MAIN IN SERVICE SATISFACTORY SANITARY RESULTS FROM A CERTIFIED LAB MUST BE SUBMITTED TO THE T.O.N. WATER DEPARTMENT. THE TEST SAMPLES MUST BE COLLECTED BY A REPRESENTATIVE OF THE TESTING LABORATORY AND WITNESSED BY THE WATER DEPARTMENT.
- 10. CONTRACTOR SHALL DIG TEST HOLE PRIOR TO MAIN EXTENSION TO VERIFY EXISTING MAIN, VALVE AND FITTINGS. TOWN ENGINEER AND WATER DEPARTMENT SHALL BE NOTIFIED OF TEST HOLE SCHEDULE.
- 11. THE TOWN OF NEWBURGH WATER SYSTEM SERVING THIS AREA OF DEVELOPMENT, REQUIRED THAT EACH HOMEOWNER MAINTAIN AN INDIVIDUAL WATER BOOSTER SYSTEM. EACH INDIVIDUAL PUMP AND HYDROPENUMATIC SYSTEM SHALL PROVIDE WATER PRESSURES BETWEEN 30 AND 50psi WITHIN THE HOME.
- 12. THE DOUBLE CHECK VALVE BACKFLOW PREVENTOR MUST BE MAINTAINED BY THE HOMEOWNER AND INSPECTED ANNUALLY BY A NYS CERTIFIED TESTER, AND A COPY OF THE REPORT MUST BE SUBMITTED TO THE TOWN OF NEWBURGH WATER DEPARTMENT.
- 13. DUE TO EXISTING LIMITATIONS IN THE TOWN OF NEWBURGH WATER SUPPLY SYSTEM. FIRE FLOW IN THIS PROJECT WILL BE BELOW THE NEEDED FIRE FLOWS AS ESTABLISHED BY THE INSURANCE SERVICES OFFICE IN THEIR "FIRE SUPPRESSION RATING SCHEDULE"

| | THIS SHEET | IS INVALID AND VC | DID UNLESS ACCON | IPANIED BY REMAINING S | HEETS IN SET. | |
|---------------|------------------------|-------------------------------------|-------------------|--|------------------------|--|
| | ENGINEER | TALCO | OTT ENGL | NEERING DE | SIGN PLLC | |
| | STATE OF A 10 PA | | N <u>E</u> (F. | CARDNERTOWN ROAD WBURGH, NY 12550 (845)—569—8400 AX)(845)—569—4583 NTTDESIGN12@CMAIL.COM | | |
| | | | CHAL | SUBDIVISION ENTI DWICK WOODS 300, SBL 14–1–5 | 5 | |
| | APOFESSIONAL | TOWN OF NEWBURGH, ORANGE COUNTY, NY | | | | |
| | CHARLES T. BROWN, P.E. | DATE 01/11/18 | scale N.T.S. | JOB NUMBER 17100- MMR | sheet NUMBER 5 OF 6 | |
| D PB COMMENTS | UNANLES T. DAVMA, T.L. | 01/11/10 | 14.1.3. | | | |

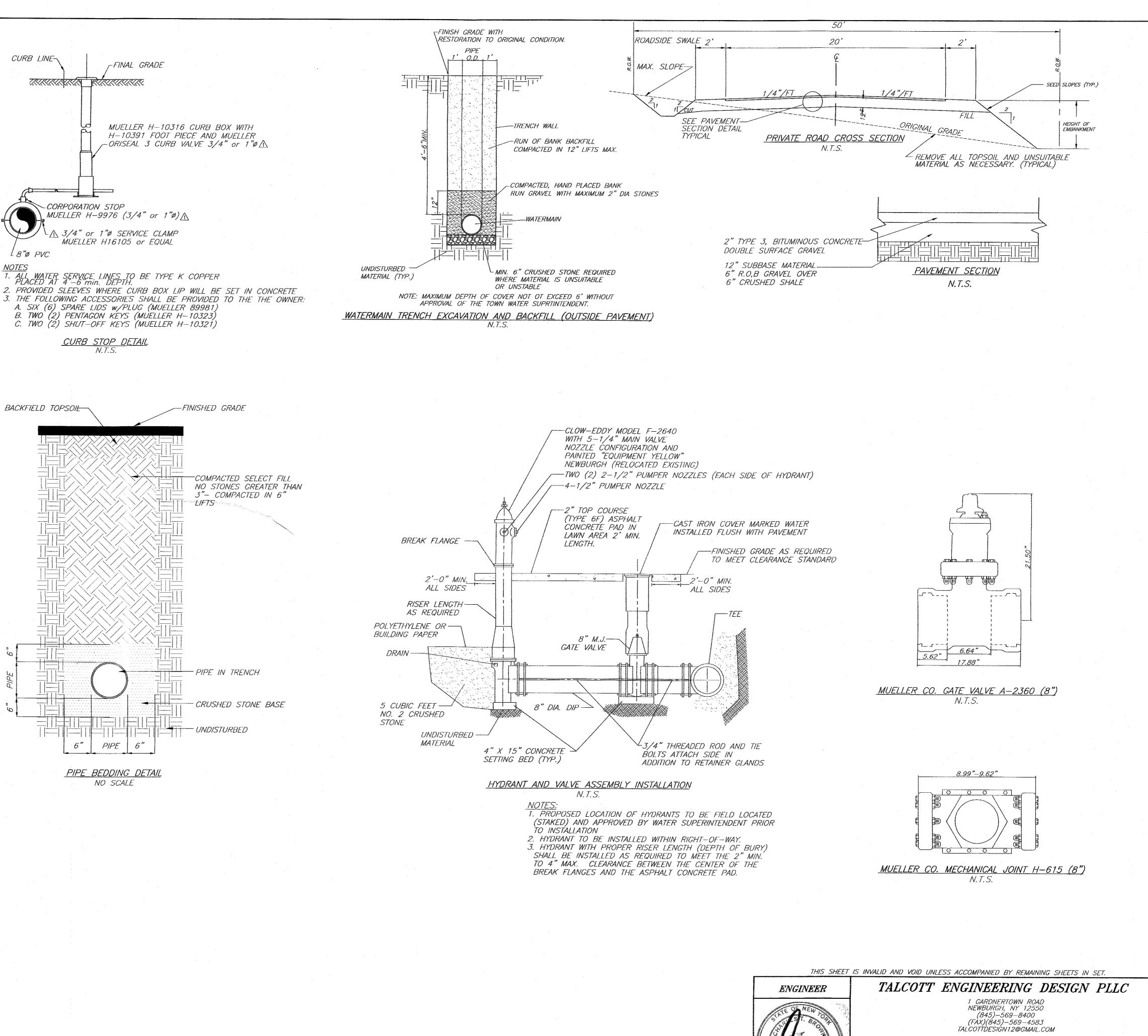
TOWN OF NEWBURGH WATER SERVICE NOTES

1. "CONSTRUCTION OF POTABLE WATER UTILITIES AND CONNECTION TO THE T.O.N. WATER SYSTEM REQUIRES A PERMIT FROM THE T.O.N. WATER DEPARTMENT. ALL

- WORK AND MATERIALS SHALL CONFORM TO THE REQUIREMENTS OF THE NYSDOH AND THE T.O.N." 2. ALL WATER SERVICE LINES FOUR (4) INCHES AND LARGER IN DIAMETER SHALL BE CEMENT LINED CLASS 52 DUCTILE IRON PIPE CONFORMING TO ANSI\AWWA C151\A21.51-91 FOR DUCTILE
- IRON PIPE. JOINTS SHALL BE EITHER PUSH-ON OR MECHANICAL JOINT AS REQUIRED. 3. THRUST RESTRAINT OF THE PIPE SHALL BE THROUGH THE USE OF JOINT RESTRAINT. THRUST BLOCKS ARE NOT ACCEPTABLE. JOINT RESTRAINT SHALL BE THROUGH THE USE OF MECHANICAL JOINT PIPE WITH RETAINER GLANDS. ALL FITTINGS AND VALVES SHALL BE INSTALLED WITH RETAINER GLANDS FOR JOINT RESTRAINT. RETAINER GLANDS SHALL BE EBBA IRON MEGALUG SERIES 1100 OR APPROVED EQUAL. THE USE OF A MANUFACTURED RESTRAINED JOINT PIPE IS ACCEPTABLE WITH
- PRIOR APPROVAL OF THE WATER DEPARTMENT. 4. ALL FITTINGS SHALL BE CAST IRON OR DUCTILE IRON, MECHANICAL JOINT, CLASS 250 AND CONFORM TO ANSI\AWWA C110\A21.10-87 FOR DUCTILE AND GRAY IRON FITTINGS OR
- ANSI\AWWA C153\A21.53-94 FOR DUCTILE IRON COMPACT FITTINGS. 5. ALL VALVES 4 TO 12 INCHES SHALL BE RESILIENT WEDGE GATE VALVES CONFORMING TO ANSI\AWWA C509 SUCH AS MUELLER MODEL A-2360-23 OR APPROVED EQUAL. ALL GATE
- VALVES SHALL OPEN LEFT (COUNTERCLOCKWISE). 6. TAPPING SLEEVE SHALL BE MECHANICAL JOINT SUCH AS MUELLER H-615 OR EQUAL. TAPPING VALVES 4 TO 12 INCHES SHALL BE RESILIENT WEDGE GATE VALVES CONFORMING TO ANSI\AWWA C509 SUCH AS MUELLER MODEL T-2360-19 OR APPROVED EQUAL. ALL TAPPING SLEEVES AND VALVES SHALL BE TESTED TO 150 PSI MINIMUM; TESTING OF THE TAPPING SLEEVE AND VALVE MUST BE WITNESSED AND ACCEPTED BY THE T.O.N. WATER DEPARTMENT
- PRIOR TO CUTTING INTO THE PIPE. 7. ALL WATER SERVICE LINES TWO (2) INCHES IN DIAMETER AND SMALLER SHALL BE TYPE K COPPER TUBING. CORPORATION STOPS SHALL BE MUELLER H–15020 FOR 3/4 AND 1 INCH, MUELLER H– 15000 OR B-25000 FOR 1 1/2 AND 2 INCH SIZES. CURB VALVES SHALL BE MUELLER H–1502–2 FOR 3/4 AND 1 INCH AND MUELLER B-25204 FOR 1 1/2 AND 2 INCH SIZES. CURB BOXES SHALL BE
- MUELLER H-10314 FOR 3/4 AND 1 INCH AND MUELLER H-10310 FOR 1 1/2 AND 2 INCH SIZES. 8. ALL PIPE INSTALLATION SHALL BE SUBJECT TO INSPECTION BY THE T.O.N. WATER DEPARTMENT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR COORDINATING ALL INSPECTIONS AS REQUIRED WITH THE T.O.N. WATER DEPARTMENT.
- 9. THE WATER MAIN SHALL BE TESTED, DISINFECTED AND FLUSHED IN ACCORDANCE WITH THE T.O.N. REQUIREMENTS. ALL TESTING, DISAFFECTION AND FLUSHING SHALL BE COORDINATED WITH THE T.O.N. WATER DEPARTMENT. PRIOR TO PUTTING THE WATER MAIN IN SERVICE SATISFACTORY SANITARY RESULTS FROM A CERTIFIED LAB MUST BE SUBMITTED TO THE T.O.N. WATER DEPARTMENT. THE TEST SAMPLES MUST BE COLLECTED BY A REPRESENTATIVE OF THE TESTING LABORATORY AND WITNESSED BY THE WATER DEPARTMENT.



· · · ·



REVISIONS REV.: DATE: BY: DESCRIPTION: 1 06/08/20 RBM REVISED PER BOARD PB COMMENTS

W: TO R BOARD PB COMMENTS CHARLES T. BROWN, P.E. 01/11/18

(FAX)(845)-569-4583 TALCOTTDESIGN12@GMAIL.COM PROPOSED SUBDIVISION ENTITLED CHADWICK WOODS ROUTE 300, SBL 14-1-51 TOWN OF NEWBURGH, ORANGE COUNTY, NY

SCALE

N.T.S.

JOB NUMBER

17100-- MMR 6 OF 6

SHEET NUMBER