

# NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Environmental Permits, Region 3

21 South Platt Corners Road, New Paltz, NY 12561-1620

P: (845) 256-3054 | F: (845) 255-4659

www.dec.ny.gov

## REQUEST FOR AUTHORIZATION UNDER THE GENERAL PERMIT FOR GREENWOOD LAKE WORK DURING THE 2021/2022 DRAWDOWN (GP-3-21-002)

### INSTRUCTIONS TO APPLICANTS

Authorization will be required under the DEC General Permit (GP) for various work activities during the 2021/2022 drawdown of Greenwood Lake, Orange County, New York.

The following permit authorizations apply;

Article 15- Excavation & Fill in Navigable Waters

Article 15- Docks, Platforms and Moorings

Section 401 Water Quality Certificate

The General Permit authorizes specific types of repair and maintenance work, including:

- Maintenance dredging (excluding commercial or public marinas)
- Repair or in-kind replacement of existing bulkheads, retaining walls, docks, boathouses, platforms or other existing structures, including the use of new support structures/pilings.
- Debris removal.
- Replenishment of existing beach areas on the shoreline and exposed lake bottom.

To obtain the required authorization under this General Permit:

1. Read the General Permit to ensure that you understand all terms and conditions.
2. Determine whether or not the work you propose to do is within the scope of the General Permit. (Refer to Description of Authorized Activities on page 1 of the General Permit). If the proposed work is within the scope, proceed to step 3 below. If it is not within the scope, contact the Regional Permit Administrator to apply for an individual permit.
3. Fill out the "Joint Application Form"  
([http://www.dec.ny.gov/docs/permits\\_ej\\_operations\\_pdf/jointapp.pdf](http://www.dec.ny.gov/docs/permits_ej_operations_pdf/jointapp.pdf)) to request authorization under the General Permit. Make sure all entries are complete and legible. Under section No. 9 "Project Description and Purpose" of the Joint Application Form, include that you are applying for coverage under General Permit GP-3-21-002 – Greenwood Lake.
4. Submit a completed, signed and dated copy of the Joint Application to the Regional Permit Administrator (RPA), and attach one copy of the following items:
  - a site location map;
  - project plans or sketch drawings showing all applicable details and measurements to clearly define the extent and nature of your work;

REQUEST FOR AUTHORIZATION UNDER THE GENERAL PERMIT  
FOR GREENWOOD LAKE 2021/2022 DRAWDOWN

- 3 representative color photographs which clearly depict the site of the proposed activity; include the time and date when taken; and
- the Permission to Inspect Property Form.

5. Submit the completed application by email to: [r3dep@dec.ny.gov](mailto:r3dep@dec.ny.gov)

If email is not available, please send two (2) hard copies to the following address:  
NYSDEC, Regional Permit Administrator, 21 South Putt Corners Road  
New Paltz, NY 12561-1696

If the project is approved, the authorized DEC representative will then countersign and/or issue the General Permit and a copy will be returned to you via mail or email. This is your authorization to undertake the work applied for. Note: A DEC representative may contact you to review your project plans at the proposed work site location before making a decision on this authorization.

6. Ensure that those doing the actual work understand and comply with all terms and conditions of the General Permit.
7. Proposed changes to the scope of authorized work must be submitted to the RPA or authorized DEC representative for approval. Contact the RPA if you have questions or encounter unforeseen problems during the course of the work.
8. Most activities authorized by this permit are also authorized by U.S. Army Corps of Engineers under the Nationwide General Permit Regulations. The current nationwide permits can be found at the U.S. Army Corps of Engineers web site at:  
<https://www.usace.army.mil/Missions/Civil-Works/Regulatory-Program-and-Permits/Nationwide-Permits/>

Any proposed work that does not comply with the terms and conditions of the nationwide permits, will require an individual permit from the New York District U.S. Army Corps of Engineers.



### JOINT APPLICATION FORM

For Permits for 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.

<b>1. Applications To:</b>	
<b>&gt;NYS Department of Environmental Conservation</b>	<input checked="" type="checkbox"/> Check here to confirm you sent this form to NYSDDEC
Check all permits that apply:	
<input type="checkbox"/> Stream Disturbance	<input type="checkbox"/> Dams and Impoundment Structures
<input type="checkbox"/> Excavation and Fill in Navigable Waters	<input type="checkbox"/> 401 Water Quality Certification *
<input type="checkbox"/> Docks, Moorings or Platforms	<input type="checkbox"/> Freshwater Wetlands
	<input type="checkbox"/> Tidal Wetlands
	<input type="checkbox"/> Wild, Scenic and Recreational Rivers
	<input type="checkbox"/> Coastal Erosion Management
	<input type="checkbox"/> Water Withdrawal
	<input type="checkbox"/> Long Island Well
	<input type="checkbox"/> Incidental Take of Endangered / Threatened Species
	* See Instructions Page 3
<b>&gt;US Army Corps of Engineers</b>	<input checked="" type="checkbox"/> Check here to confirm you sent this form to USACE
Check all permits that apply:	
<input type="checkbox"/> Section 404 Clean Water Act	<input type="checkbox"/> Section 10 Rivers and Harbors Act
Is the project Federally funded? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of Federal Agency:	
General Permit Type(s), if known:	
Preconstruction Notification: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>&gt;NYS Office of General Services</b>	<input checked="" type="checkbox"/> Check here to confirm you sent this form to NY SOGS
Check all permits that apply:	
<input type="checkbox"/> State Owned Lands Under Water	
<input type="checkbox"/> Utility Easement (pipelines, conduits, cables, etc.)	<input type="checkbox"/> Docks, Moorings or Platforms
<b>&gt;NYS Department of State</b>	<input checked="" type="checkbox"/> Check here to confirm you sent this form to NYSDOS
Check if this applies: <input type="checkbox"/> Coastal Consistency Concurrence	

<b>2. Name of Applicant</b>		Taxpayer ID (if applicant is NOT an individual)	
Mailing Address		Post Office / City	State Zip
Telephone		Email	
Applicant Must be (check all that apply): <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Lessee			

<b>3. Name of Property Owner (if different than Applicant)</b>			
Mailing Address		Post Office / City	State Zip
Telephone		Email	

For Agency Use Only	Agency Application Number
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**4. Name of Contact / Agent**

Mailing Address

Post Office / City

State Zip

Telephone

Email

**5. Project / Facility Name**

Property Tax Map Section / Block / Lot Number:

Project Street Address, if applicable

Post Office / City

State Zip

NY

Provide directions and distances to roads, intersections, bridges and bodies of water

Town

Village

City

County

Stream/Waterbody Name

Project Location Coordinates: Enter Latitude and Longitude in degrees, minutes, seconds:

Latitude:

°

Longitude:

°

**6. Project Description:** Provide the following information about your project. Continue each response and provide any additional information on other pages. Attach plans on separate pages.

a. Purpose of the proposed project:

b. Description of current site conditions:

c. Proposed site changes:

d. Type of structures and fill materials to be installed, and quantity of materials to be used (e.g., square feet of coverage, cubic yards of fill material, structures below ordinary/mean high water, etc.):

e. Area of excavation or dredging, volume of material to be removed, location of dredged material placement:

f. Is tree cutting or clearing proposed?

Yes If Yes, explain below.

No

Timing of the proposed cutting or clearing (month/year):

Number of trees to be cut:

Acreage of trees to be cleared:

g. Work methods and type of equipment to be used:

h. Describe the planned sequence of activities:

i. Pollution control methods and other actions proposed to mitigate environmental impacts:

j. Erosion and silt control methods that will be used to prevent water quality impacts:

k. Alternatives considered to avoid regulated areas. If no feasible alternatives exist, explain how the project will minimize impacts:

l. Proposed use: ☐ Private ☐ Public ☐ Commercial

m. Proposed Start Date:  Estimated Completion Date:

n. Has work begun on project? ☐ Yes If Yes, explain below. ☐ No

o. Will project occupy Federal, State, or Municipal Land? ☐ Yes If Yes, explain below. ☐ No

p. List any previous DEC, USACE, OGS or DOS Permit / Application numbers for activities at this location:

q. Will this project require additional Federal, State, or Local authorizations, including zoning changes?

☐ Yes If Yes, list below. ☐ No

### 7. Signatures.

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.

#### Signature of Applicant

Date

Applicant Must be (check all that apply): ☐ Owner ☐ Operator ☐ Lessee

Printed Name

Title

#### Signature of Owner (if different than Applicant)

Date

Printed Name

Title

#### Signature of Contact / Agent

Date

Printed Name

Title

For Agency Use Only		DETERMINATION OF NO PERMIT REQUIRED	
Agency Application Number			
Agency Name			
Agency Address			
Agency Phone			
Agency Fax			
Agency E-mail			
Agency Representative			
Printed Name		Title	
Signature		Date	

**RESIDENTS, PLEASE NOTE \*ANYTHING LISTED BELOW THAT PERTAINS  
TO YOUR PURPOSED JOB, MUST BE HANDED IN ALL AT ONCE.  
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

1. Completed Application & Fee
2. Supporting Documentation:

**For ALL Permits:**

**Insurance Certificates**

- (a) Professional Liability w/Village As Certificate Holder
- (b) Proof of Worker's Comp by way of by any of these:
  - C-105.2
  - NYSIF Certificate
  - Waiver (For Small Job Only)

**For Any Permit That Modifies The Yard , i.e. Decks, Additions, Fences, Pools, Driveways, Retaining Walls, etc.**

**A Survey or Plot Plan Showing The New Work and It's Relation To the Property Lines**

**For Any Permit (Estimated Value > \$20,000)**

**Sealed Plans Prepared By A Design Professional**

**For Any Construction Permit (Estimated Value < \$20,000)**

**Plans Prepared By Applicant Including:**

**Plot Plan  
Side View  
Front View  
Typical Section  
Riser Diagram or Electrical Plan (When Applicable)**

# Village of Greenwood Lake

## Building Permit Application

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the Code of the Village of Greenwood Lake and the State of New York. The applicant agrees to comply with all applicable laws, ordinances and regulations.

### Site Data

Residential Property ☐ Commercial Property ☐

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_ Acreage: \_\_\_\_\_ Single family: \_\_\_\_\_ Multifamily: \_\_\_\_\_

# Existing bedrooms: \_\_\_\_\_ # Proposed bedrooms: \_\_\_\_\_ # Existing Bathrooms: \_\_\_\_\_ # Proposed Bathrooms: \_\_\_\_\_

Site Location: \_\_\_\_\_

Project Description: New construction ☐ Addition ☐ Renovation ☐ Renewal of existing permit ☐

Intended Use and Occupancy: \_\_\_\_\_

### Owners Information

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_

Mobil Number: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

### Contractors Information

Business Name: \_\_\_\_\_

Contractors Name: \_\_\_\_\_

Address: \_\_\_\_\_

### Architect/Engineer Information

Business name: \_\_\_\_\_

Architect/Engineer name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Mobil: (\_\_\_\_) \_\_\_\_\_

Survey YES NO Estimated cost of Job: \$ \_\_\_\_\_

Stamped plans for projects over 20,000.00 YES NO

Plans for ALL other projects YES NO

Workers compensation waiver YES NO

Workers compensation C-105.20 form YES NO

Zoning board variance needed YES NO

Planning board approval needed YES NO

Septic information current and in compliance YES NO

Any known violation on property YES NO

Permit Fee: \$ \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**\*NOTICE: All work must be inspected periodically throughout the job by the building inspector. Once all work is finished the permit must be properly closed out in order to receive a certificate of compliance or a certificate of occupancy. These certificates are for internal Code Enforcement and record keeping purposes only, pursuant to the Villages general duty to protect the public health safety and welfare. These certificates are issued solely with respect to the specific building permit application made said to the Village and does not imply compliance with all code. No person may rely on these certificates or any in acts or representations of the Village employees to establish any special relationship or duty with respect to the Village. Persons seeking to verify compliance with applicable laws and codes must independently establish such compliance certificates issued upon misinformation or mistake invalid.**

### Authorization:

State of \_\_\_\_\_ County of \_\_\_\_\_

Name, \_\_\_\_\_ being duly sworn deposes and says he/she is the owner and or contractor and is duly authorized to perform or have performed work and to make and file this application; that all statements are true to the best of his or her knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith

Sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ Notary

Public \_\_\_\_\_

Owner/ Contractor \_\_\_\_\_

Print Name: \_\_\_\_\_

### FOR VILLAGE USE ONLY

Fee Paid: YES/NO Permit Approved: YES/NO Permit #: \_\_\_\_\_ Date issued \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Expiration Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ZBA approval Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Planning Board approval date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Existing Use and Occupancy: \_\_\_\_\_

Building Inspector Signature: \_\_\_\_\_



**Coverage for a 1, 2, 3 or 4 family, Owner-occupied Residence**

**\*\*This form cannot be used to waive the workers' compensation rights or obligations of any party.\*\***

**Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box):**

- ☐ I am performing all the work for which the building permit was issued.
- ☐ I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work.
- ☐ I have a homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

**I also agree to either:**

- ◆ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a CE-200 exemption form; OR
- ◆ have the general contractor, performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

\_\_\_\_\_  
(Signature of Homeowner)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Homeowner's Name Printed)

Home Telephone Number \_\_\_\_\_

**Property Address that requires the building permit:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sworn to before me this _____ day of _____
_____ (County Clerk or Notary Public)

**Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.**