



**Tim Stahl**  
Director

**OSWEGO COUNTY DEPARTMENT OF COMMUNITY  
DEVELOPMENT, TOURISM AND PLANNING**

COUNTY BUILDING  
46 EAST BRIDGE STREET  
OSWEGO, NEW YORK 13126

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**239 REVIEW SUBMISSION FORM**

**Submitted to:** Oswego County Department of Community Development, Tourism, and Planning  
46 East Bridge Street  
Oswego, NY 13126

**Submitted by:**

Review Agency: \_\_\_\_\_ Contact Person/Title: \_\_\_\_\_

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

Contact Email: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Public Hearing/ Meeting Date(s): \_\_\_\_\_

**Project details:**

Applicant: \_\_\_\_\_

Site Address: \_\_\_\_\_ Municipality: \_\_\_\_\_

Tax Parcel Number(s): \_\_\_\_\_ Zoning District: \_\_\_\_\_

**Pursuant to §239-f, -l & -m of General Municipal Law enclosed for review and recommendation from the Oswego County Department of Community Development, Tourism, and Planning is an application for (check all applicable):**

- |   |  |
|---|--|
| <input type="checkbox"/> Site Plan Review   | <input type="checkbox"/> Comprehensive Plan Adoption/Amendment |
| <input type="checkbox"/> Special Use Permit | <input type="checkbox"/> Zoning Law Adoption/ Amendment        |
| <input type="checkbox"/> Area Variance      | <input type="checkbox"/> Other Local Law Adoption/Amendment    |
| <input type="checkbox"/> Use Variance       | <input type="checkbox"/> Other: _____                          |
| <input type="checkbox"/> Rezoning           |  |

**The application qualifies for review because the project tax map parcel is located within 500 feet of the following (check all applicable):**

- ☐ Municipal Boundary\*
- ☐ State/County Park or Other Recreation Area: \_\_\_\_\_
- ☐ State/County Road(s): \_\_\_\_\_
- ☐ State/County Drainageway/Watercourse: \_\_\_\_\_
- ☐ Farm located in an Agricultural District (*please complete Ag. Data Statement*)
- ☐ State/County-owned land on which a public building/institution is located: \_\_\_\_\_

*\*Pursuant to General Municipal Law §239-nn, the legislative body or reviewing board of a municipality shall give notice of a public hearing for a proposed Special Use Permit, Use Variance, Site Plan Review or Subdivision Review to the Clerk of an adjacent municipality at least 10 days prior to the public hearing when the subject property is located within 500 feet of the adjacent municipality.*

The Clerk(s) of \_\_\_\_\_ were notified on \_\_\_\_\_.  
(city/ town/ village) (date)

## PROJECT-SPECIFIC QUESTIONS

*In addition to the information required on page 1 of this form, please answer the following questions:*

**1. Describe public facilities available in the area to be affected:**

Water: \_\_\_\_\_

Sewer: \_\_\_\_\_

**2. Will this action impact water or sewer facilities?**

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

**3. Describe any public services available in the area to be affected (jurisdiction or district):**

Police: \_\_\_\_\_

Fire: \_\_\_\_\_

Refuse: \_\_\_\_\_

School: \_\_\_\_\_

Other: \_\_\_\_\_

**4. Will this action impact services listed above? Describe:**

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

**5. Will traffic be affected/ generated by the action? Describe:**

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

**6. Is this action in compliance with the following?**

Existing municipal plans: ☐ Yes ☐ No ☐ n/a

Local or State Subdivision Regulations: ☐ Yes ☐ No ☐ n/a

NYS Building & Fire Code: ☐ Yes ☐ No ☐ n/a

NYS Freshwater Wetlands Act: ☐ Yes ☐ No ☐ n/a

Federal Flood Insurance Program: ☐ Yes ☐ No ☐ n/a

Other Federal/State/County/Local laws: ☐ Yes ☐ No ☐ n/a

If the action is non-compliant, please describe: \_\_\_\_\_

**7. Describe existing land use of areas to the north, south, east and west of the site/action:**

North: \_\_\_\_\_

South: \_\_\_\_\_

East: \_\_\_\_\_

West: \_\_\_\_\_

**8. Identify any State or County Facilities in the area (Roads, Parks, Buildings):**

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

**9. Identify any nearby water bodies, streams, wetlands, or flood-hazard zones in the area:**

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

**10. Describe any unique physical/ natural features or socio-economic conditions in the area:**

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

## **ADDITIONAL DOCUMENTATION CHECKLIST**

*In addition to the information provided on pages 1-2, please submit the following documentation:*

### **All Actions Require the Following:**

- ☐ 239 Review Form (Page 1)
- ☐ Full statement as required by local law or ordinance (all application materials)
- ☐ Agricultural Data Statement, if applicable.
- ☐ EAF or EIS for State Environmental Quality Review (SEQR)

### **Proposed or Amending Zoning Ordinances or Local Laws:**

- ☐ Report from Planning Board or Zoning Board, if applicable.
- ☐ Zoning map to be adopted with new law, or existing map illustrating areas to be affected.
- ☐ Zoning text: language of the proposed ordinance, law, or amendment.

### **Site Plan Reviews, Special Use Permits, Area Variances, and Use Variances:**

- ☐ Site Plan(s) showing:
  - Scale (suggested 1 inch: 20 feet if site <1 acre or appropriate scale for larger sites)
  - North arrow
  - Bulk table
  - Adjacent tax parcel information
  - Location of streets and highways
  - Location of natural features
  - Physical characteristics of the site
  - Existing/ proposed septic system and well
  - Layout plan showing buildings, parking, and utilities
  - Surface and subsurface drainage plan
  - Area map at 1:200' noting zoning in the area
  - Location map
- ☐ Floor plan(s), if available/ relevant