

PROJECT ID NUMBER

SEQR

617.20
APPENDIX C
STATE ENVIRONMENTAL QUALITY REVIEW

SHORT ENVIRONMENTAL ASSESSMENT FORM
for UNLISTED ACTIONS Only

PART 1 - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT / SPONSOR		2. PROJECT NAME	
3. PROJECT LOCATION: Municipality		County	
4. PRECISE LOCATION: Street Address and Road Intersections, Prominent landmarks etc - or provide map			
5. IS PROPOSED ACTION : New Expansion Modification / alteration			
6. DESCRIBE PROJECT BRIEFLY:			
7. AMOUNT OF LAND AFFECTED: Initially acres Ultimately acres			
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER RESTRICTIONS? Yes No If no, describe briefly:			
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? (Choose as many as apply.) Residential Industrial Commercial Agriculture Park / Forest / Open Space Other (describe)			
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (Federal, State or Local) Yes No If yes, list agency name and permit / approval:			
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? Yes No If yes, list agency name and permit / approval:			
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT / APPROVAL REQUIRE MODIFICATION? Yes No			
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE			
Applicant / Sponsor Name		Date:	
Signature_____			

**If the action is a Coastal Area, and you are a state agency,
complete the Coastal Assessment Form before proceeding with this assessment**