

STATE OF NEW YORK
DEPARTMENT OF STATE
 ONE COMMERCE PLAZA
 99 WASHINGTON AVENUE
 ALBANY, NY 12231-0001
 WWW.DOS.NY.GOV

ANDREW M. CUOMO
 GOVERNOR

CESAR A. PERALES
 SECRETARY OF STATE

JEFF IRWIN
 SURFACE TRANSPORTATION BOARD
 WASHINGTON, D.C. 20423-0001

DATE: 6/8/2015

**Notice of Incomplete Coastal Consistency Submission
 for a Federal Authorization**

The Division of Coastal Resources received correspondence regarding your application for a federal permit or other authorization and the proposal's consistency with the New York Coastal Management Program. Unfortunately, your correspondence did not include all the necessary information and data required for us to begin our review of your proposal. Please provide us with the following necessary information and data. Please refer to the file number identified below when submitting the required information. Once the required information has been received and our review has begun additional information needs may be identified.

FILE #: DOS # F-2015-0382 **APPLICANT:** CSX TRANSPORTATION, INC.
DOCKET #AB-55 (SUB 740X)

- X A copy of a completed and a signed Federal Consistency Assessment Form (FCAF) including the required written analysis (cf. D.2) of the proposed activity's consistency with the relevant enforceable policies of the State's Coastal Management Program. (Enclosed - Please Sign)
- X A copy of your application for federal agency authorization (e.g. a Joint U.S. Army Corps of Engineers & NYS Department of Environmental Conservation permit application). (Enclosed)
- X A copy of all supporting documentation submitted with the federal application and the following information if it is not included in the above:
- a detailed description of the proposed activity including its associated facilities and coastal effects
 - location map showing where the activity will be conducted
 - site map drawn to scale and showing all components of the activity
 - recent color photographs of the project site
 - statement of the purpose of, and need for, the activity
 - identification of the owner(s) of all properties on which the activity will be conducted and of abutting property owners, both upland and underwater
 - written analysis of alternatives to the proposed activity considered by the applicant
 - A copy of the Final Environmental Impact Statement, if one is required by an involved federal or state agency
 - Copies of any applications for permits or other authorizations, and related correspondence, submitted to involved State agencies (e.g. DEC, OGS, SHPO, PSC).

Please submit the above checked information to: NYS Department of State
 Office of Planning and Development
 Attn: Consistency Review Unit
 One Commerce Plaza - Suite 1010
 99 Washington Avenue
 Albany, New York 12231

If you have any questions regarding this matter, you may contact us by telephone at (518) 474-6000. (Additional information is available on our website, www.dos.state.ny.us.)



**Department
 of State**



JOINT APPLICATION FORM - INSTRUCTIONS



US Army Corps of Engineers (USACE)
New York District
Buffalo District

Use this application to apply for Permits and Determinations from all of the listed state and federal agencies. This form is for all projects that affect streams, waterways, waterbodies, wetlands, coastal areas and sources of water supply.

New York State
Department of Environmental Conservation (DEC)
Office of General Services (OGS)
Department of State (DOS)

Type or print clearly in ink. This Form has 2 pages. Incomplete, illegible or inaccurate information may delay processing and a final decision on your application. Individual Agencies may request that you submit additional information to complete your application. If you have any questions, contact the Agencies or check the Agency websites listed on Page 2 for further information.

PERMITS REQUESTED: You are responsible for obtaining all federal, state or local permits or other approvals. Check all Permits/Determinations you are applying for from the listed Agencies.

You must obtain separate authorizations or determinations of no permit required from each Agency in accordance with their jurisdiction prior to initiation of work.

APPLICANT / OWNER / CONTACT INFORMATION AND SIGNATURES: Signatures of the Applicant, Owner and Agent, where applicable, are required.

Applications by a Corporation must be signed by a member of the board of directors or a "high managerial agent" of the corporation as that term is defined in the § 20.20 of the Penal Law; a Partnership by a general partner; a Sole Proprietorship by the proprietor; a Limited Liability Company by member or manager in accordance with the LLC's articles of organization as filed with the Secretary of State.

Applications by a State Agency must be signed by a person duly designated by the commissioner or other agency head. Applications by Municipalities (counties, cities, towns and villages) and Public Corporations must be signed by the chief executive officer, the head of a subordinate agency or department, or a person duly designated by the chief executive officer.

Construction or work contractors may serve as a contact/agent on behalf of the applicant, but cannot be identified as the applicant or prospective permittee should a permit be issued.

PROJECT / FACILITY LOCATION INFORMATION: If you are able to supply accurate project location coordinates, please do so. Location Coordinates are expressed in New York Transverse Mercator (NYTM) units (i.e., UTM Zone 18 expanded to encompass the entire state) based on the North American Datum 1983, or Latitude and Longitude. Coordinates may be obtained from DEC's online Environmental Resource Mapper (www.dec.ny.gov/animals/38801.html), using the Identify  tool.

PROJECT DESCRIPTION AND PURPOSE: Provide a complete narrative description of the proposed work and its purpose. Attach additional page(s) if necessary.

REQUIRED APPLICATION ATTACHMENTS

Attach and submit the following to each involved Agency:

- 1) LOCATION MAP** - A US Geological Survey (USGS) Quadrangle Map, or equivalent identifying the project location. The map should include wetlands, seasonally wet streams and ditches. An acceptable location map may be obtained from DEC's online Environmental Resource Mapper (<http://www.dec.ny.gov/animals/38801.html>), using the Printer  tool.
- 2) PROJECT PLANS** - A sketch plan view and cross-section drawn to scale with dimensions given, or engineering drawings showing location and extent of work. Note from which direction the photographs required in (3) are taken.

- 3) PHOTOGRAPHS** - At least 3 color photographs, taken from multiple directions, which clearly depict the site of the proposed activity without snow cover. Include any existing structures on the site and the area surrounding the site. Indicate the time and date when taken.

OTHER REQUIREMENTS

If applying to State Agencies: State Environmental Quality Review Act regulation (SEQR), 6 NYCRR Part 617) is applicable (see www.dec.ny.gov/regs/4490.html) -

- If the project is an Unlisted Action, submit a completed Part 1 of a Short Environmental Assessment Form. *
- If the project is a Type I Action, submit a completed Part 1 of a Full Environmental Assessment Form. *

If applying to NYS DEC - Complete the **Permission to Inspect Property Supplement *** to provide consent for DEC inspection. Failure to grant consent can be grounds for, and may result in, permit denial.

If applying to USACE/NYS DOS - If the project requires a federal permit and lies within or affects the Coastal Zone (see the DOS Coastal Area Maps at http://www.nyswaterfronts.com/maps_regions.asp) submit a completed Federal Consistency Assessment Form (available at www.nyswaterfronts.com/consistency_federal.asp) to NYS DOS with a copy to USACE.

For USACE Section 404 Clean Water Act permits and specific Nationwide permits - a 401 Water Quality Certification must be obtained from NYS DEC.

For projects within the Adirondack Park - To determine permitting applicability, contact -
NYS Adirondack Park Agency, 1133 NYS Rte 86, PO Box 99, Ray Brook, NY 12977 (518) 891-4050 www.apa.state.ny.us

SPECIAL SUPPLEMENTS AND REQUIREMENTS FOR SPECIFIC PERMIT APPLICATIONS

Applications for ... must be accompanied by ...

- **Dams and Impoundment Structures** Supplement D-1 *
- **Docks and Moorings**..... Supplement D-2 *
- **Water Supply** Supplement W-1 *
- **Long Island Well**..... Regional specific supplement *
- **Wild, Scenic and Recreational River Systems** Supplement WSR-1 *
- **Incidental Take**..... Supplement IT-1 *
- **Aquatic Vegetation, Aquatic Insect, and Fish Control** ... Category specific form available at NYS DEC offices and www.dec.ny.gov/chemical/8530.html . Submit applications to the NYS DEC regional office, Attn: Bureau of Pesticides.
- **USACE Section 404 Clean Water Act and DEC Freshwater Wetlands and DEC Tidal Wetlands** ... Applications to disturb a wetland or waterway by placing fill or performing mechanized land clearing, ditching, channelization, dredging, or excavation activities should provide a discussion of practicable alternatives considered to avoid, minimize and/or mitigate the proposed project impacts. Particular justification should be given as to why the alternatives are not suitable.
- **DEC Freshwater and Tidal Wetlands** ... Applications fees are required. Refer to: www.dec.ny.gov/permits/65153.html

* Forms are available at NYS DEC offices and at www.dec.ny.gov/permits/6222.html

JOINT APPLICATION FORM INSTRUCTIONS - PAGE 2 OF 2

SUBMISSION OF APPLICATION FORMS AND ATTACHMENTS

Separately mail the completed application to each involved Agency based on project location and permit(s) requested.

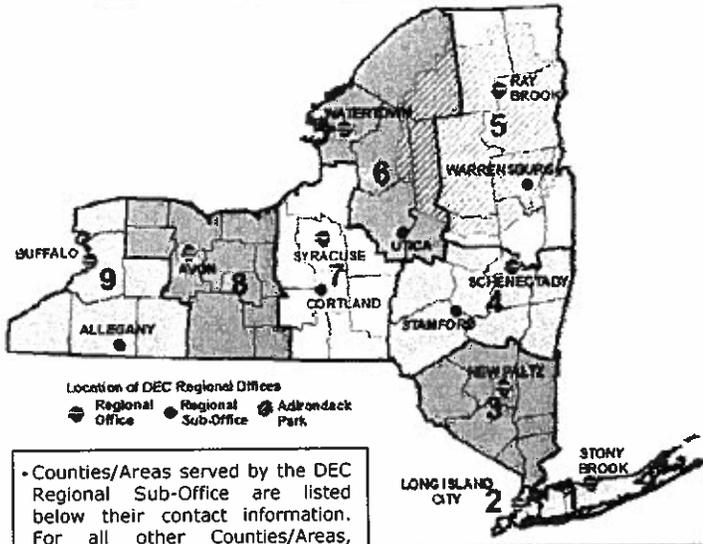
For DEC - Mail 3 copies of: this Application, any supplemental forms, and all required attachments.

For Other Agencies - Mail 1 copy of: this Application, any supplemental forms, and all required attachments.

Refer to each Agency's website for specifications on submitting documents on electronic media or via email.

AGENCY CONTACT INFORMATION

NYS Department of Environmental Conservation
www.dec.ny.gov



NYS DEC REGION 4 Sub-Office
Regional Permit Administrator
65561 State Hwy 10
Stamford, NY 12167-9503
(607) 652-7741
email: r4dep@gw.dec.state.ny.us

NYS DEC REGION 7
Regional Permit Administrator
615 Erie Blvd West
Syracuse, NY 13204-2400
(315) 426-7438
email: r7dep@gw.dec.state.ny.us

• For Schoharie, Otsego, Delaware, Counties, and Greene County towns within the NYC watershed

NYS DEC REGION 5
Regional Permit Administrator
PO Box 296
1115 Route 86
Ray Brook, NY 12977-0296
(518) 897-1234
email: r5dep@gw.dec.state.ny.us

NYS DEC REGION 7 Sub-Office
Regional Permit Administrator
1285 Fisher Avenue
Cortland, NY 13045-1090
(607) 753-3095
email: r7dep@gw.dec.state.ny.us
• For Tompkins, Cortland, Broome, Chenango, Tioga Counties

NYS DEC REGION 5 Sub-Office
Regional Permit Administrator
232 Golf Course Rd
Warrensburg, NY 12885-1172
(518) 623-1281
email: r5dep@gw.dec.state.ny.us

NYS DEC REGION 8
Regional Permit Administrator
6274 E. Avon - Lima Road
Avon, NY 14414-9519
(585) 226-5400
email: r8dep@gw.dec.state.ny.us

• For Washington, Warren, Saratoga, Fulton Counties

NYS DEC REGION 1
Regional Permit Administrator
SUNY @ Stony Brook
50 Circle Road
Stony Brook, NY 11790-3409
(631) 444-0365
email: r1dep@gw.dec.state.ny.us

NYS DEC REGION 3
Regional Permit Administrator
21 South Putt Corners Road
New Paltz, NY 12561-1696
(845) 256-3054
email: r3dep@gw.dec.state.ny.us

NYS DEC REGION 6
Regional Permit Administrator
317 Washington Street
Watertown, NY 13601-3787
(315) 785-2245
email: r6dep@gw.dec.state.ny.us

NYS DEC REGION 9
Regional Permit Administrator
270 Michigan Avenue
Buffalo, NY 14203-2915
(716) 851-7165
email: r9dep@gw.dec.state.ny.us

NYS DEC REGION 2
Regional Permit Administrator
1 Hunter's Point Plaza
47-40 21st Street
Long Island City, NY 11101-5407
(718) 482-4997
email: r2dep@gw.dec.state.ny.us

NYS DEC REGION 4
Regional Permit Administrator
1130 North Westcott Road
Schenectady, NY 12306-2014
(518) 357-2069
email: r4dep@gw.dec.state.ny.us

NYS DEC REGION 6 Sub-Office
Regional Permit Administrator
207 Genesee Street
Utica, NY 13501-3787
(315) 793-2555
email: r6dep@gw.dec.state.ny.us

NYS DEC REGION 9 Sub-Office
Regional Permit Administrator
182 East Union, Suite 3
Allegany, NY 14706-1328
(716) 372-0645
email: r9dep@gw.dec.state.ny.us

• For Herkimer, Oneida Counties

• For Allegany, Cattaraugus, Chautauqua Counties

US Army Corps of Engineers www.usace.army.mil

For DEC Regions 1, 2 and 3
US Army Corps of Engineers NY District
ATTN: Regulatory Branch
26 Federal Plaza, Room 1937
New York, NY 10278-0090
email: CENAN.PublicNotice@usace.army.mil

For DEC Regions 4, 5
Department of the Army
ATTN: CENAN-OP-R
NY District, Corps of Engineers
1 Buffington Street
Building 10, 3rd Floor
Watervliet, NY 12189-4000
(518) 266-6350 - Permits team
(518) 266-6360 - Compliance Team
email: cenan.rfo@usace.army.mil

For DEC Regions 6, 7, 8, 9
US Army Corps of Engineers Buffalo District
ATTN: Regulatory Branch
1776 Niagara Street
Buffalo, NY 14207-3199
(716) 879-4330
email: LRB.Regulatory@usace.army.mil

For DEC Regions 1, 2, Westchester County and Rockland County - (917) 790-8511
For the other counties of DEC Region 3 - (917) 790-8411

Statewide **NYS Department of State**
Division of Coastal Resources
Consistency Review Unit
One Commerce Plaza
99 Washington Ave, Suite 1010
Albany, NY 12231-0001
(518) 474-6000
www.nyswaterfronts.com

Statewide **NYS Office of General Services**
Real Estate Development - Land Management
Corning Tower, 26th Floor
Empire State Plaza
Albany, NY 12242-0001
(518) 474-2195
www.ogs.state.ny.us



JOINT APPLICATION FORM



For Permits/Determinations to undertake activities affecting streams, waterways, waterbodies, wetlands, coastal areas and sources of water supply.

New York State

You must separately apply for and obtain separate Permits/Determinations from each involved agency prior to proceeding with work. Please read all instructions.

US Army Corps of Engineers (USACE)

<p>APPLICATIONS TO 1. NYS Department of Environmental Conservation</p> <p>Check all permits that apply:</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Stream Disturbance</td> <td><input type="checkbox"/> Coastal Erosion Management</td> </tr> <tr> <td><input type="checkbox"/> Excavation and Fill in Navigable Waters</td> <td><input type="checkbox"/> Wild, Scenic and Recreational Rivers</td> </tr> <tr> <td><input type="checkbox"/> Docks, Moorings or Platforms</td> <td><input type="checkbox"/> Water Supply</td> </tr> <tr> <td><input type="checkbox"/> Dams and Impoundment Structures</td> <td><input type="checkbox"/> Long Island Well</td> </tr> <tr> <td><input type="checkbox"/> 401 Water Quality Certification</td> <td><input type="checkbox"/> Aquatic Vegetation Control</td> </tr> <tr> <td><input type="checkbox"/> Freshwater Wetlands</td> <td><input type="checkbox"/> Aquatic Insect Control</td> </tr> <tr> <td><input type="checkbox"/> Tidal Wetlands</td> <td><input type="checkbox"/> Fish Control</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Incidental Take of Endangered/Threatened Species</td> </tr> </table> <p><input type="checkbox"/> I am sending this application to this agency.</p>	<input type="checkbox"/> Stream Disturbance	<input type="checkbox"/> Coastal Erosion Management	<input type="checkbox"/> Excavation and Fill in Navigable Waters	<input type="checkbox"/> Wild, Scenic and Recreational Rivers	<input type="checkbox"/> Docks, Moorings or Platforms	<input type="checkbox"/> Water Supply	<input type="checkbox"/> Dams and Impoundment Structures	<input type="checkbox"/> Long Island Well	<input type="checkbox"/> 401 Water Quality Certification	<input type="checkbox"/> Aquatic Vegetation Control	<input type="checkbox"/> Freshwater Wetlands	<input type="checkbox"/> Aquatic Insect Control	<input type="checkbox"/> Tidal Wetlands	<input type="checkbox"/> Fish Control		<input type="checkbox"/> Incidental Take of Endangered/Threatened Species	<p>2. US Army Corps of Engineers</p> <p>Check all permits that apply:</p> <p><input type="checkbox"/> Section 404 Clean Water Act</p> <p><input type="checkbox"/> Section 10 Rivers and Harbors Act</p> <p><input type="checkbox"/> Nationwide Permit(s) - Identify Number(s): _____ _____</p> <p>Preconstruction Notification - <input type="checkbox"/> Y / <input type="checkbox"/> N</p> <p><input type="checkbox"/> I am sending this application to this agency.</p>	<p>3. NYS Office of General Services</p> <p>Check all permits that apply:</p> <p><input type="checkbox"/> State Owned Lands Under Water</p> <p><input type="checkbox"/> Utility Easement (pipelines, conduits, cables, etc.)</p> <p><input type="checkbox"/> Docks, Moorings or Platforms</p> <p><input type="checkbox"/> I am sending this application to this agency.</p>	<p>4. NYS Department of State</p> <p>Check if this applies:</p> <p><input type="checkbox"/> Coastal Consistency Concurrence</p> <p><input type="checkbox"/> I am sending this application to this agency.</p>
<input type="checkbox"/> Stream Disturbance	<input type="checkbox"/> Coastal Erosion Management																		
<input type="checkbox"/> Excavation and Fill in Navigable Waters	<input type="checkbox"/> Wild, Scenic and Recreational Rivers																		
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<input type="checkbox"/> Tidal Wetlands	<input type="checkbox"/> Fish Control																		
	<input type="checkbox"/> Incidental Take of Endangered/Threatened Species																		

5. Name of Applicant (use full name)		Applicant must be: <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Lessee (check all that apply)
Mailing Address		
Post Office City		Taxpayer ID (If applicant is NOT an individual):
State	Zip Code	
Telephone (daytime)	Email	

6. Name of Facility or Property Owner (if different than Applicant)	
Mailing Address	
Post Office City	
State	Zip Code
Telephone (daytime)	Email

7. Contact/Agent Name	
Company Name	
Mailing Address	
Post Office City	
State	Zip Code
Telephone (daytime)	
Email	

8. Project / Facility Name		Property Tax Map Section / Block / Lot Number	
Project Location - Provide directions and distances to roads, bridges and bodies of waters:			
Street Address, if applicable		Post Office City	State NY Zip Code
Town / Village / City		County	
Name of USGS Quadrangle Map		Stream/Water Body Name	
Location Coordinates: Enter NYTMs in kilometers, OR Latitude/Longitude			
NYTM-E	NYTM-N	Latitude	Longitude

For Agency Use Only	DEC Application Number: _____	USACE Number: _____
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JOINT APPLICATION FORM - PAGE 2 OF 2
Submit this completed page as part of your Application.

9. Project Description and Purpose: Provide a complete narrative description of the proposed work and its purpose. Attach additional page(s) if necessary. Include: description of current site conditions and how the site will be modified by the proposed project; structures and fill materials to be installed; type and quantity of materials to be used (i.e., square ft of coverage and cubic yds of fill material and/or structures below ordinary/mean high water) area of excavation or dredging, volumes of material to be removed and location of dredged material disposal or use; work methods and type of equipment to be used; pollution control methods and mitigation activities proposed to compensate for resource impacts; and where applicable, the phasing of activities. **ATTACH PLANS ON SEPARATE PAGES.**

Proposed Use: <input type="checkbox"/> Private <input type="checkbox"/> Public <input type="checkbox"/> Commercial	Proposed Start Date: _____	Estimated Completion Date: _____
Has Work Begun on Project? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain.		
Will Project Occupy Federal, State or Municipal Land? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please specify.		

10. List Previous Permit / Application Numbers (if any) and Dates:

11. Will this project require additional Federal, State, or Local Permits including zoning changes? Yes No If yes, please list:

12. Signatures. If applicant is not the owner, both must sign the application.
I hereby affirm that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the 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 _____	Printed Name _____	Title _____	Date _____
Signature of Owner _____	Printed Name _____	Title _____	Date _____
Signature of Agent _____	Printed Name _____	Title _____	Date _____

For Agency Use Only	DETERMINATION OF NO PERMIT REQUIRED		
_____	Agency Project Number _____		
(Agency Name)	has determined that No Permit is required from this Agency for the project described in this application.		
Agency Representative: Name (printed) _____	Title _____		Date _____
Signature _____	Date _____		_____

NEW YORK STATE DEPARTMENT OF STATE
COASTAL MANAGEMENT PROGRAM

Federal Consistency Assessment Form

An applicant, seeking a permit, license, waiver, certification or similar type of approval from a federal agency which is subject to the New York State Coastal Management Program (CMP), shall complete this assessment form for any proposed activity that will occur within and/or directly affect the State's Coastal Area. This form is intended to assist an applicant in certifying that the proposed activity is consistent with New York State's CMP as required by U.S. Department of Commerce regulations (15 CFR 930.57). It should be completed at the time when the federal application is prepared. The Department of State will use the completed form and accompanying information in its review of the applicant's certification of consistency.

A. **APPLICANT** (please print)

1. Name: _____
2. Address: _____
3. Telephone: Area Code () _____

B. **PROPOSED ACTIVITY:**

1. Brief description of activity:

2. Purpose of activity:

3. Location of activity:

County	City, Town, or Village	Street or Site Description

4. Type of federal permit/license required: _____

5. Federal application number, if known: _____

6. If a state permit/license was issued or is required for the proposed activity, identify the state agency and provide the application or permit number, if known:

C. COASTAL ASSESSMENT Check either "YES" or "NO" for each of these questions. The numbers following each question refer to the policies described in the CMP document (see footnote on page 2) which may be affected by the proposed activity.

1. Will the proposed activity result in any of the following: YES/NO
- a. Large physical change to a site within the coastal area which will require the preparation of an environmental impact statement? (11, 22, 25, 32, 37, 38, 41, 43)
 - b. Physical alteration of more than two acres of land along the shoreline, land under water or coastal waters? (2, 11, 12, 20, 28, 35, 44)
 - c. Revitalization/redevelopment of a deteriorated or underutilized waterfront site? (1)
 - d. Reduction of existing or potential public access to or along coastal waters? (19, 20)
 - e. Adverse effect upon the commercial or recreational use of coastal fish resources? (9,10)
 - f. Siting of a facility essential to the exploration, development and production of energy resources in coastal waters or on the Outer Continental Shelf? (29)
 - g. Siting of a facility essential to the generation or transmission of energy? (27)
 - h. Mining, excavation, or dredging activities, or the placement of dredged or fill material in coastal waters? (15, 35)
 - i. Discharge of toxics, hazardous substances or other pollutants into coastal waters? (8, 15, 35)
 - j. Draining of stormwater runoff or sewer overflows into coastal waters? (33)
 - k. Transport, storage, treatment, or disposal of solid wastes or hazardous materials? (36, 39)
 - l. Adverse effect upon land or water uses within the State's small harbors? (4)

2. Will the proposed activity affect or be located in, on, or adjacent to any of the following: YES/NO
- a. State designated freshwater or tidal wetland? (44)
 - b. Federally designated flood and/or state designated erosion hazard area? (11, 12, 17)
 - c. State designated significant fish and/or wildlife habitat? (7)
 - d. State designated significant scenic resource or area? (24)
 - e. State designated important agricultural lands? (26)
 - f. Beach, dune or Barrier Island? (12)
 - g. Major ports of Albany, Buffalo, Ogdensburg, Oswego or New York? (3)
 - h. State, county, or local park? (19, 20)
 - i. Historic resource listed on the National or State Register of Historic Places? (23)

3. Will the proposed activity require any of the following: YES/NO
- a. Waterfront site? (2, 21, 22)
 - b. Provision of new public services or infrastructure in undeveloped or sparsely populated sections of the coastal area? (5)
 - c. Construction or reconstruction of a flood or erosion control structure? (13, 14, 16)
 - d. State water quality permit or certification? (30, 38, 40)
 - e. State air quality permit or certification? (41, 43)

4. Will the proposed activity occur within and/or affect an area covered by a State-approved local waterfront revitalization program, or State-approved regional coastal management program? (see policies in program document*)

D. ADDITIONAL STEPS

1. If all of the questions in Section C are answered "NO", then the applicant or agency shall complete Section E and submit the documentation required by Section F.

2. If any of the questions in Section C are answered "YES", then the applicant or agent is advised to consult the CMP, or where appropriate, the local waterfront revitalization program document*. The proposed activity must be analyzed in more detail with respect to the applicable state or local coastal policies. On a separate page(s), the applicant or agent shall: (a) identify, by their policy numbers, which coastal policies are affected by the activity, (b) briefly assess the effects of the activity upon the policy; and, (c) state how the activity is consistent with each policy. Following the completion of this written assessment, the applicant or agency shall complete Section E and submit the documentation required by Section F.

E. CERTIFICATION

The applicant or agent must certify that the proposed activity is consistent with the State's CMP or the approved local waterfront revitalization program, as appropriate. If this certification cannot be made, the proposed activity shall not be undertaken. If this certification can be made, complete this Section.

"The proposed activity complies with New York State's approved Coastal Management Program, or with the applicable approved local waterfront revitalization program, and will be conducted in a manner consistent with such program."

Applicant/Agent's Name: _____

Address: _____

Telephone: Area Code () _____

Applicant/Agent's Signature: _____ Date: _____

F. SUBMISSION REQUIREMENTS

1. The applicant or agent shall submit the following documents to the **New York State Department of State, Office of Planning and Development, Attn: Consistency Review Unit, One Commerce Plaza-Suite 1010, 99 Washington Avenue, Albany, New York 12231.**
 - a. Copy of original signed form.
 - b. Copy of the completed federal agency application.
 - c. Other available information which would support the certification of consistency.

2. The applicant or agent shall also submit a copy of this completed form along with his/her application to the federal agency.

3. If there are any questions regarding the submission of this form, contact the Department of State at (518) 474-6000.

*These state and local documents are available for inspection at the offices of many federal agencies, Department of environmental Conservation and Department of State regional offices, and the appropriate regional and county planning agencies. Local program documents are also available for inspection at the offices of the appropriate local government.