ENIRONMENTAL REVIEW FORM
Applications Sponsored by Not-for-Profit Organizations

PROJECT NAME:________________________________________________________

PROJECT SPONSOR:______________________________________________________

INSTRUCTIONS: For all projects sponsored by not-for-profit organizations, the funding agency will serve as lead agency for the purposes of complying with the State Environmental Quality Review Act (SEQR). This form has been designed to help the agency identify the type and extent of SEQR review required. Please complete Part A and Part B.

If your project contains only items in Part B, your project is probably not subject to SEQR and no further information is required at this time. Please SIGN AND DATE in the space provided at the end of the form and include this with your application. If you have NOT checked any of the items in Part B, or there are aspects of your project scope that are not contained in the Part B list, continue on and complete Part C.

Part A. - ENVIRONMENTAL REVIEW COORDINATION

DOES THE PROJECT REQUIRE A PERMIT APPROVAL OR FUNDING FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?

☐ Yes ☐ No If Yes, list the agency(s) and permit/approvals:

Part B. - IS THE PROJECT SUBJECT TO SEQR?

Part 617 of the Environmental Conservation Law (the rules and regulations implementing SEQR) identifies certain types of projects or actions not subject to SEQR review. These are called Type II actions. The list of Type II actions under SEQR has been reviewed by OPRHP and a determination made as to which are more likely to apply to grant projects.

PLEASE REVIEW THE FOLLOWING LIST OF TYPE II ACTIONS AND CHECK ANY WHICH APPLY TO YOUR PROJECT:

☐ The project is maintenance or repair involving no substantial changes to an existing structure or facility.

☐ The project is replacement of a facility in-kind on the same site.

☐ The project is the repair or construction of a minor accessory structure, such as sheds or fencing, not changing land use or density.

☐ The project is maintenance of existing landscaping or natural growth.

☐ The project involves information and data collection, surveys or other studies.

☐ The project involves administrative components.

☐ The project involves purchase of equipment.

Updated 2-2021
Part C. - ASSESSMENT OF ENVIRONMENTAL EFFECTS AND MITIGATION

If your project is not Type II, it is subject to environmental review. Please complete Part 1 of a Short Environmental Assessment Form (EAF), using the EAF Mapper to locate your project. The EAF mapper*, short EAF, and associated workbooks and instructions can be found at https://www.dec.ny.gov/permits/6191.html or by going directly to the DEC website and searching for EAF mapper. Please include the EAF Mapper Summary Report with your Short EAF Part 1 submittal. This information, along with other parts of the application, will be used by OPRHP staff in determining the type and extent of environmental review required. Additional information may be required upon review of submitted documentation.

* The EAF Mapper is a program designed to facilitate the SEQR process by answering some of the geographic or place-based questions on the Short EAF. Start with the EAF Mapper, locate your project area on the map, draw your project site, and select "Create Report – Short Form Part 1", and then save the document to your computer. You can then continue completing the Short EAF from there. If you start completing the form while in the web browser, all the information you entered will be lost. Help with using the EAF Mapper can be found on the EAF Mapper Application’s main page next to "Feedback" in the lower right corner of the screen. Additional guidance can be found in the EAF Workbook, under the subsection "Using the EAF Mapper".

Additional information about project impacts and mitigation: Please include any additional known information regarding potential environmental impacts of the project and mitigation measures being proposed, e.g. indicate results of any preliminary discussions with regulatory agencies.

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE.

Applicant/Sponsor Name: ___________________________ Date_________________

Signature of Preparer: ____________________________________________________________________________