

# REFERRAL FORM

## MONTGOMERY COUNTY PLANNING BOARD

Referral Number _____ assigned by the MCPB upon acceptance of referral for review
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This Referral must be received SEVEN CALENDAR DAYS prior to the MCPB meeting date in order for it to be placed on the agenda.

**TO:** Montgomery County Planning Board,  
Old County Courthouse,  
PO Box 1500, Fonda, New York 12068  
Phone: 518-853-8334  
Fax: 518-853-8336

**FROM:** Municipal Board: Town of Glen  
Referring Officer: Sandra Hemstreet  
Mail original resolution to: Town Hall, 7 Erie Street,  
Fultonville, NY 12072

1. **Applicant:** Borrego \_\_\_\_\_ 2. **Site Address:** 411 Reynolds Road, Fultonville, NY 12072
3. **Tax Map Number(s):** \_\_\_\_\_ 4. **Acres:** 5 +/- of 150 acre site
5. **Is the site currently serviced by public water?**  Yes       No
6. **On-site waste water treatment is currently provided by:**  Public Sewer or  Septic System
7. **Current Zoning:** Rural Residential \_\_\_\_\_ 8. **Current Land Use:** vacant Lot
9. **Project Description:** Installation of 640' wind turbine
- \_\_\_\_\_

**10. MCPB Jurisdiction:**

- Text Adoption or Amendment**       **Site is located within 500' of:** \_\_\_\_\_
- a municipal boundary.
  - a State or County thruway/highway/roadway
  - an existing or proposed State or County park/recreation area
  - an existing or proposed County-owned stream or drainage channel
  - a State or County-owned parcel on which a public building or institution is situated
  - a farm operation within an Agricultural District (Incl. Ag data Statement) (does not apply to area variances)

11. **PUBLIC HEARING:** Date: 12/16/21 \_\_\_\_\_ Time: 7pm \_\_\_\_\_ Location: 7 Erie Street, Fultonville, NY 12072

**Referred Action(s)**

If referring multiple, related actions, please identify the referring municipal board if different from above.

12.  **Text Adoption or**       **Amendment**      **Referring Board:**

Comprehensive Plan     Local Law     Zoning Ordinance     Other \_\_\_\_\_

13.  **Zone Change**      **Referring Board:**

Proposed Zone District: \_\_\_\_\_ Number of Acres: \_\_\_\_\_

Purpose of the Zone Change: \_\_\_\_\_

14.  **Site Plan**     **Project Site Review**      **Referring Board:**

Proposed Improvements: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Will the proposed project require a variance?     Yes       No      Type:  Area     Use

Specify: Special Use Permit

Is a State of County DOT work permit needed?    If Yes :     State or     County     No

Specify: \_\_\_\_\_

15. **X Special Permit**

Referring Board:

Section of local zoning code that requires a special permit for this use: Article IV, Section 4.01:  
LandUseManagementOrdinance.pdf (montgomery.ny.us)

Will the proposed project require a variance?  Yes  No Type:  Area  Use

16. **Variance**

Referring Board:

Area  Use

Section(s) of local zoning code to which the variance is being sought: \_\_\_\_\_

Describe how the proposed project varies from the above code section: \_\_\_\_\_

**SEQR Determination**

Action:

Finding:

- |  |   |
|--|---|
| <input type="checkbox"/> Type I          | <input type="checkbox"/> Positive Declaration – Draft EIS |
| <input type="checkbox"/> Type II         | <input type="checkbox"/> Conditional Negative Declaration |
| <input type="checkbox"/> Unlisted Action | <input type="checkbox"/> Negative Declaration             |
| <input type="checkbox"/> Exempt          | <input type="checkbox"/> No Finding (Type II Only)        |

SEQR determination made by (Lead Agency): FEAF 1 still under review; not completed to date **Date:** 2/28/22

**REQUIRED MATERIAL**

Send 3 copies of a "Full Statement of the Proposed Action" which includes:

All materials required by and submitted to the referring body as an application

- If submitting site plans, please submit only 1 large set of plans, and 12 11x17 packets.
- All material may be submitted digitally as well at <http://www.mcbdc.org/planning-services/montgomery-county-planning-board-referrals/>

This referral, as required by GML §239 1 and m, includes complete information, and supporting materials to assist the Montgomery County Planning Board (MCPB) in its review. Recommendations by MCPB shall be made to the Referring Body within thirty days of receipt of the Full Statement.

*[Signature]* Planning Board Secretary  
Name, Title & Phone Number of Person Completing this Form  
518 669 5948

2/28/22  
Transmittal Date

This side to be completed by Montgomery County Planning.

**REFERRAL FORM**  
**MONTGOMERY COUNTY PLANNING BOARD**


TO: Town of Glen

Receipt of 239-m referral is acknowledged on 2/28/2022. Please be advised that the Montgomery County Planning Board has reviewed the proposal stated on the opposite side of this form on 3/10/22 and makes the following recommendation.

- Approves
- Approves (with Modification)
- Disapproves:
- No significant County-wide or inter-community input
- Not subject to Planning Board review
- Took no action

Section 239-m of the General Municipal Law requires that within thirty days after final action by the municipality is taken; a report of the final action shall be filed with the County Planning Board.

3/11/2022  
Date

  
Kenneth F. Rose, Director  
Montgomery County Dept. of Economic  
Development and Planning