

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 _____			

website

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