



Northeast Site Solutions
Denise Sabo
4 Angela's Way, Burlington CT 06013
203-435-3640
denise@northeastsitesolutions.com

April 27, 2023

Town of Barre
Zoning/Building Department
14317 W Barre Rd, Albion NY 14411

RE: Verizon Wireless Permit Application
Site Address: 15085 East Barre Rd, Barre NY 14411
Site#: 816547_Crown-VZW

Hi Shelly,

Thank you again for taking the time to speak with me.
As discussed, Verizon Wireless is filing a permit on the existing cell tower located at 15085 East Barre Rd, Barre NY.

As requested, I have attached the planning board and building permit application along with GC insurance, construction drawings and structural analysis. Also attached is a check for \$100 (planning boards) and \$325 (BP fee)
Please let me know if you have any questions.

Thank you, I appreciate you help with this matter.

Regards,

Denise Sabo
Phone: (203) 435-3640
Email: denise@northeastsitesolutions.com



816547

TOWN OF BARRE
PLANNING BOARD
APPLICANT ACKNOWLEDGEMENT

Date: 4/24/23

Applicant: Name: Denise Saba, db/a Crown Castle for Verizon wireless upgrade project
Address: 4 Angelas way Burlington CT 06013
Telephone: 203 435 3640

Subject Property: Address: East Barre Rd (cell tower)
Tax Lot No. 96. - 1-45. / TOWER

Referred to Planning Board for:

Special Use Permit modification Site Plan Review

Applicant shall reimburse the Town of Barre for all engineering, legal, or other extraordinary or unanticipated expenses incurred by the Town in review of the proposed action. The applicant shall reimburse the Town as expenses are incurred.

Where such expenses are estimated to be greater than \$1,000.00, the Planning Board will require an escrow account be established in an amount determined by such Board. The escrow account will be replenished as expenses are paid by the Town.

All monies due the Town of Barre shall be paid in full before issuance of any required permit OR within thirty (30) days of final action taken by the Planning Board.

I, Denise Saba from NSS db/a crown castle have read the above statement and agree to the terms and conditions thereof.

Denise Saba
Applicant's Signature

4/24/23
Date

Fee's paid ck # 1275
\$ 100.00

August, 2021

**TOWN OF BARRE
PLANNING BOARD**

APPLICATION

(See Instructions and Procedures Attached)

Date Received: _____

1. I (we) hereby apply to the Town Board:

for Site Plan Review for a Special Use Permit

Pursuant to Section for the Town of Barre Zoning Regulations: _____
350-63

2. LOCATION: Address East Barre Rd ^{cell tower} Tax Lot No. 96-1-45/TOWER
Current Zoning: _____

3. OWNER: Crown Castle Telephone: (203) 435 3640
Address: 4017 Washington Rd, McHenry PA Zip: 15317

APPLICANT: Venzon wireless Telephone: _____
Address: 180 Washington Valley Rd, Bedminster NJ 07921 Zip: _____
Northeast Site Solutions

AGENT: Denise Sabo elblo Crown Castle Telephone: Venzon project
Address: 4 Angelas way Burlington Zip: 050013

If the applicant is not the owner or if there is an applicant/agent, please explain: (203) 435 3640
Venzon is the lessee on the cell tower owned by Crown Castle (lessor). Crown hired Northeast Site Solutions as Agent for the project.

4. DESCRIBE BRIEFLY THE DETAILS OF THIS REQUEST: Replace (6) existing antenna
Replace (6) existing RRU, Add (3) Antenna
and add (1) hybrid line.

SIGNATURE(s): Denise Sabo DATE: 4/24/23

DATE: _____

AGRICULTURAL DATA STATEMENT

Per § 305-a of the New York State Agriculture and Markets Law, any application for a special use permit, site plan approval, use variance, or subdivision approval requiring municipal review and approval that would occur on property within a New York State Certified Agricultural District containing a farm operation or property with boundaries within 500 feet of a farm operation located in an Agricultural District shall include an Agricultural Data Statement.

A. Name of applicant: Denise Sabo of NSS e/bb/Crown Castle
Mailing address: Per Verizon wireless
4 Angelas Way, Burlington CT 06013

B. Description of the proposed project: Replace (6) ^{existing} antenna on existing cell tower. Replace (6) ERW on tower.
Add (3) new Antenna and (1) hybrid line
No work on ground needed.

C. Project site address: East Barre Rd Town: Barre

D. Project site tax map number: 96-1-45-1TWR

E: The project is located on property:
 within an Agricultural District containing a farm operation, or
 with boundaries within 500 feet of a farm operation located in an Agricultural District.

F. Number of acres affected by project: 0

G. Is any portion of the project site currently being farmed?
 Yes. If yes, how many acres _____ or square feet _____ ?
 No.

H. Name and address of any owner of land containing farm operations within the Agricultural District and is located within 500 feet of the boundary of the property upon which the project is proposed.

I. Attach a copy of the current tax map showing the site of the proposed project relative to the location of farm operations identified in Item H above.

FARM NOTE

Prospective residents should be aware that farm operations may generate dust, odor, smoke, noise, vibration and other conditions that may be objectionable to nearby properties. Local governments shall not unreasonably restrict or regulate farm operations within State Certified Agricultural Districts unless it can be shown that the public health or safety is threatened.

Denise Sabo - Director - Northeast 4-24-23
Name and Title of Person Completing Form Site Solutions Date

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information							
Crown - Venzon Wireless # 816547 ^{BU}							
Name of Action or Project: 816547 - Crown/VZW - ^{APP} 642507							
Project Location (describe, and attach a location map): East Barre Rd							
Brief Description of Proposed Action: Replace (6) existing Antenna and Add (3) new Antenna on existing cell tower. Replace (6) existing RW.							
Name of Applicant or Sponsor: Denise Scho dblo Venzon Wireless		Telephone: 203 435 3640					
Address: 4 Angeles way		E-Mail: (denise@northeastbeta)solutions.com					
City/PO: Burlington		State: CT	Zip Code: 06013				
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
3.a. Total acreage of the site of the proposed action?		_____ acres					
b. Total acreage to be physically disturbed?		_____ acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres					
4. Check all land uses that occur on, adjoining and near the proposed action.							
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)							
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____							
<input type="checkbox"/> Parkland							

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100 year flood plain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____</p>	NO	YES
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____</p>	NO	YES
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____</p>	NO	YES
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>Denise Sabo</u> Date: <u>4/14/23</u></p> <p>Signature: <u>Denise Sabo</u></p>		