

ATTACHMENT 2



Request for Natural Diversity Data Base (NDDB) State Listed Species Review

All requesters must completely fill out Parts I - VII of this form and submit Attachments A and B, or the request will be rejected as incomplete.

There are no fees associated with NDDB Reviews.

DEP USE ONLY

Request No. _____

Hardcopy _____ Electronic files _____

Part I: Preliminary Screening

Before submitting this request, you must review the Natural Diversity Data Base "State and Federal Listed Species and Significant Natural Communities Maps" found on the [DEP website](#). Follow the instructions on the map or in this form's instruction document. These maps are updated twice a year, usually in June and December.

Does your site, including all affected areas, meet the screening criteria according to the instructions:

Yes No

Enter the date of the map reviewed for pre-screening: December 2010 Map#ND044

Part II: Requester Information

If the requester is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. If applicable, the company name shall be stated **exactly as it is registered with the Secretary of State.*

If the requester is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).

1. Requester Company Name*: Infinigy Engineering

Name: **Mark Kiburz**

Address: **11 Herbert Drive**

City/Town: **Latham**

State: **NY**

Zip Code: **12110**

Business Phone: **5186900790**

ext.

Fax: **5186900793**

Requester can best be described as:

Business Entity Federal Agency Municipal govt. State agency Individual

Tribe Other (specify):

Acting as (Affiliation), pick one:

Property owner Consultant Engineer Facility owner Applicant

Biologist Pesticide Applicator Other representative (specify):

2. List Primary Contact to receive Natural Diversity Data Base correspondence and inquiries, if different from requester.

Company: **East Haven Fire Department**

Contact Person: **Dogulas Jackson**

Title: **Chief**

Mailing Address: **200 Main St.**

City/Town: **East Haven**

State: **CT**

Zip Code: **06512**

Business Phone: **203-468-3221**

ext.

Fax:

Email:

Part II: Requester Information (continued)

Affiliation of primary contact, check one: <input type="checkbox"/> Property owner <input type="checkbox"/> Consultant <input checked="" type="checkbox"/> Engineer <input type="checkbox"/> Facility owner <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Biologist <input type="checkbox"/> Pesticide Applicator <input type="checkbox"/> Other representative (specify):
3. Project Type: Choose Project Type: Cellular/Communications tower installation/maint. , If other describe: _____

Part III: Site Information

This request can only be completed for one site. A separate request must be filed for each additional site.

1. Site Location Site Name or Project Name: Riverside VFD Town(s): East Haven Street Address or Location Description: 82 Short Beach Road Size in acres, or site dimensions: 100'x100' compound Latitude and longitude of the center of the site in decimal degrees (e.g., 41.23456 -71.68574): Latitude: 41°15'36.26"N Longitude: 72°51'21.02"W Method of coordinate determination (check one): <input type="checkbox"/> GPS <input type="checkbox"/> Photo interpolation using CTECO map viewer <input checked="" type="checkbox"/> Other (specify): Google Earth
2a. Describe the current land use and land cover of the site. Parking Lot
b. Check all that apply and enter the size in acres or % of area in the space after each checked category. <input checked="" type="checkbox"/> Industrial/Commercial _____ <input type="checkbox"/> Residential _____ <input type="checkbox"/> Forest _____ <input type="checkbox"/> Wetland _____ <input type="checkbox"/> Field/grassland _____ <input type="checkbox"/> Agricultural _____ <input type="checkbox"/> Water _____ <input type="checkbox"/> Utility Right-of-way _____ <input type="checkbox"/> Transportation Right-of-way _____ <input type="checkbox"/> Other (specify): _____

Part IV: Project Information

1. Is the subject activity limited to the maintenance, repair, or improvement of an existing structure within the existing footprint? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain.

Part IV: Project Information (continued)

2. Give a detailed description of the activity which is the subject of this request and describe the methods and equipment that will be used.

Installation of a 125' self supporting tower with a 2,500sq ft utility compound. Access will be gained via a paved driveway. An excavator will be utilized to excavate for concrete footings.

3. Provide a contact for questions about the project details if different from Part II primary contact.

Name: **Mark Kiburz**

Phone: 518-339-8765

Email: **mkiburz@inflnigy.com**

Part V: Request Type and Associated Application Type

Check *one* box from either Group 1 or Group 2, indicating the appropriate category for this request.

Group 1. If you check one of these boxes, fill out Parts I – VII of this form and submit the required attachments A and B.

- Preliminary screening was negative but an NDDB review is still requested
- Request regards a municipally regulated or unregulated activity (no state permit/certificate needed)
- Request regards a preliminary site assessment or project feasibility study
- Request relates to land acquisition or protection
- Request is associated with a *renewal* of an existing permit, with no modifications

Group 2. If you check one of these boxes, fill out Parts I – VII of this form and submit required attachments A, B, and C.

- Request is associated with a *new* state or federal permit application
- Request is associated with modification of an existing permit
- Request is associated with a permit enforcement action
- Request regards site management or planning, requiring detailed species recommendations
- Request regards a state funded project, state agency activity, or CEPA request

If you are filing this request as part of a state or federal permit application enter the application information below.

Permitting Agency and Application Name: _____

State DEP Application Number, if known: _____

State DEP Enforcement Action Number, if known: _____

State DEP Permit Analyst/Engineer, if known: _____

Is this request related to a previously submitted NDDB request? Yes No

Enter the previous NDDB Request Number(s), if known: _____

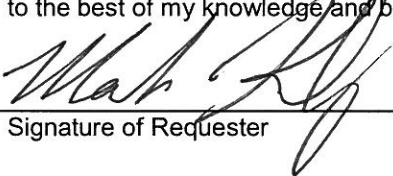
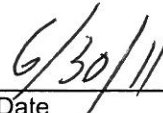
Part VI: Supporting Documents

Please check each attachment submitted as verification that *all* applicable attachments have been supplied with this request form. Label each attachment as indicated in this part (e.g., Attachment A, etc.) and be sure to include the requester's name, site name and the date. **Please note that Attachments A and B are required for all requesters.** Attachment C (DEP-APP-007C) is supplied at the end of this form.

<input checked="" type="checkbox"/> Attachment A:	Overview Map: an 8 1/2" X 11" print/copy of the relevant portion of a USGS Topographic Quadrangle Map clearly indicating the exact location of the site.
<input checked="" type="checkbox"/> Attachment B:	Detailed Site Map: fine scaled map showing site boundary details on aerial imagery with relevant landmarks labeled. (Site boundaries in GIS [ESRI ArcView shapefile, in NAD83, State Plane, feet] format can be substituted for detailed maps, see instruction document)
<input type="checkbox"/> Attachment C:	Supplemental Information, Group 2 requirement (attached, DEP-APP-007C) <input type="checkbox"/> Section i: Supplemental Site Information and supporting documents <input type="checkbox"/> Section ii: Supplemental Project Information and supporting documents

Part VII: Requester Certification

The requester *and* the individual(s) responsible for actually preparing the request must sign this part. A request will be considered incomplete unless all required signatures are provided.

<p>"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief."</p>	
 Signature of Requester	 Date
Mark Kiburz Name of Requester (print or type)	6-30-11 Title (if applicable)
Signature of Preparer (if different than above)	Date
Name of Preparer (print or type)	Title (if applicable)

Note: Please submit the completed Request Form and all Supporting Documents to:

CENTRAL PERMIT PROCESSING UNIT
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 79 ELM STREET
 HARTFORD, CT 06106-5127

Or email request to: dep.nddbrequest@ct.gov

Attachment C: Supplemental Information, Group 2 requirement

Section i: Supplemental Site Information

1. Existing Conditions

Describe all natural and man-made features including wetlands, watercourses, fish and wildlife habitat, floodplains and any existing structures potentially affected by the subject activity. Such features should be depicted and labeled on the site plan that must be submitted. Photographs of current site conditions may be helpful to reviewers.

- Site Photographs (optional) attached
- Site Plan/sketch of existing conditions attached

2. Biological Surveys

Has a biologist visited the site and conducted a biological survey to determine the presence of any endangered, threatened or special concern species Yes No

If yes, complete the following questions and submit any reports of biological surveys, documentation of the biologist's qualifications, and any NDDB survey forms.

Biologist(s) name:

Habitat and/or species targeted by survey:

Dates when surveys were conducted:

- Reports of biological surveys attached
- Documentation of biologist's qualifications attached
- [NDDB Survey forms](#) for any listed species observations attached

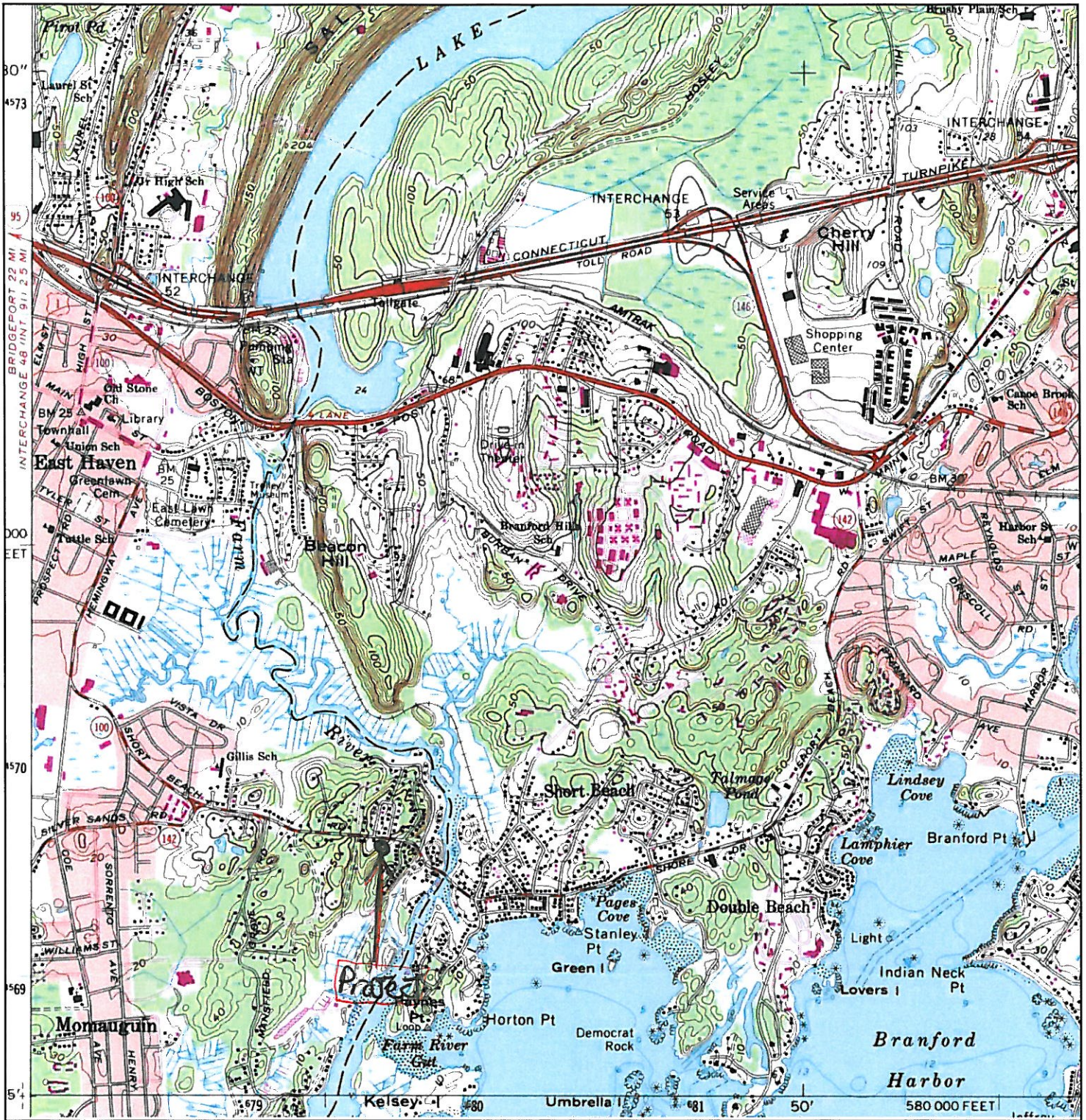
Section ii: Supplemental Project Information


1. Provide a schedule for all phases of the project including the year, the month and/or season that the proposed activity will be initiated and the duration of the activity.

2. Describe and quantify the proposed changes to existing conditions and describe any on-site or off-site impacts. In addition, provide an annotated site plan detailing the areas of impact and proposed changes to existing conditions.

- Annotated Site Plan attached

Historical Topographic Map



<p>N</p> 	TARGET QUAD	SITE NAME: East Haven Riverside VFD	CLIENT: Infinigy Engineering
	NAME: BRANFORD	ADDRESS: 82 Short Beach Road	CONTACT: Mark Kiburz
	MAP YEAR: 1984	East Haven, CT 06512	INQUIRY#: 3102457.4
	PHOTOREVISED: 1967	LAT/LONG: 41.2601 / -72.8558	RESEARCH DATE: 06/22/2011
	SERIES: 7.5		
	SCALE: 1:24000		

infiniting
 0
 engineering
 11 Harbor Drive
 Latham, NY 12110
 OFFICE: (518) 690-0790
 FAX: (518) 690-0793

STATE OF NEW YORK
 ENGINEERING
 LICENSE No. 24705
 JOHN S. STEINBERG
 LICENSED PROFESSIONAL ENGINEER

NO.	REVISION	DATE
1	ISSUED FOR CONSTRUCTION	08/15/11
2	ISSUED FOR PERMITS	08/15/11
3	ISSUED FOR PERMITS	08/15/11
4	ISSUED FOR PERMITS	08/15/11

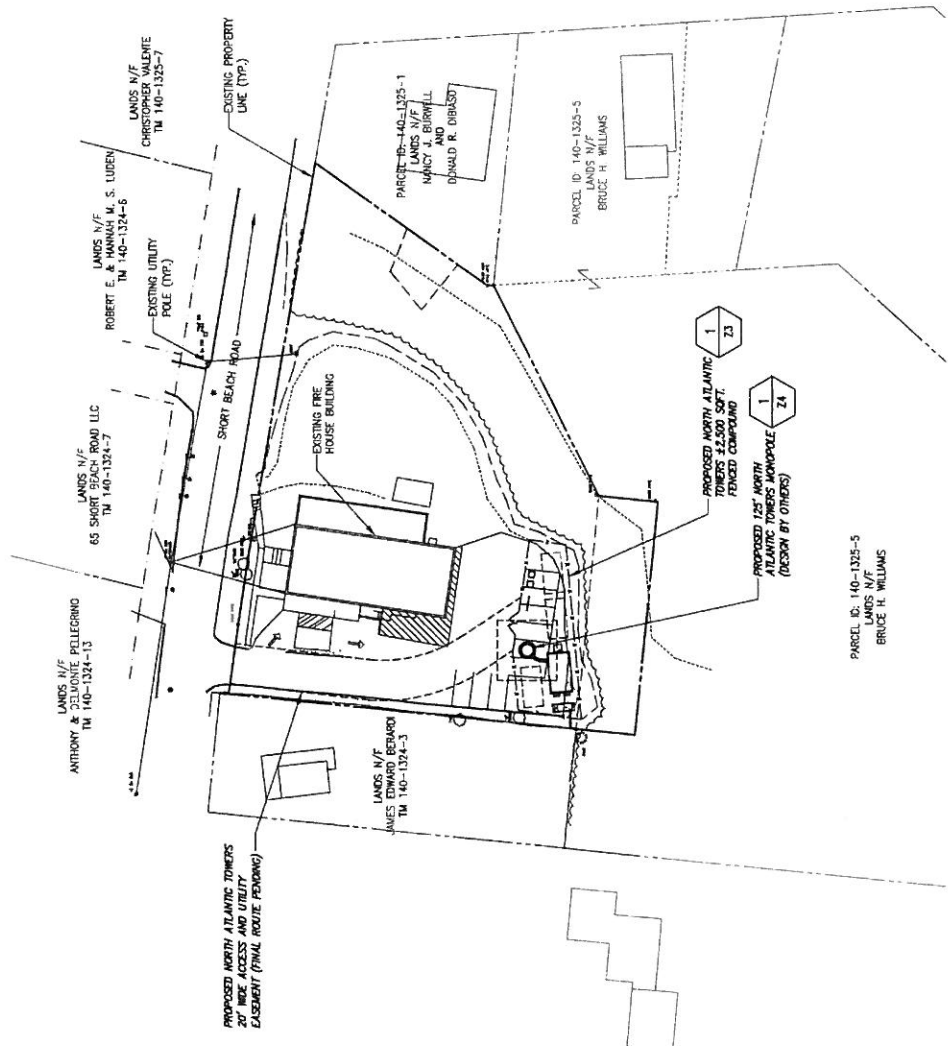
Project Name: EAST HAVEN RIVERSIDE VFD
 Project Number: CT1109-D
 Project Location: 82 SHORT BEACH ROAD, EAST HAVEN, CT 06512

NORTH ATLANTIC TOWERS
THIS OCCURS IN THE REGION PROJECT AND IS NOT TO BE CONSIDERED AS A PART OF THE PROJECT. ANY CHANGES TO THE PROJECT SHALL BE MADE BY THE CLIENT. THE CLIENT IS RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION PROVIDED. THE ENGINEER HAS CONDUCTED VISUAL CHECKS OF THE PROJECT AND HAS FOUND NO DISCREPANCIES. THE ENGINEER HAS CONDUCTED VISUAL CHECKS OF THE PROJECT AND HAS FOUND NO DISCREPANCIES.

Drawing Scale: AS NOTED
 Date: 8/15/11

ABUTTERS MAP
 Drawing Number: **Z1**

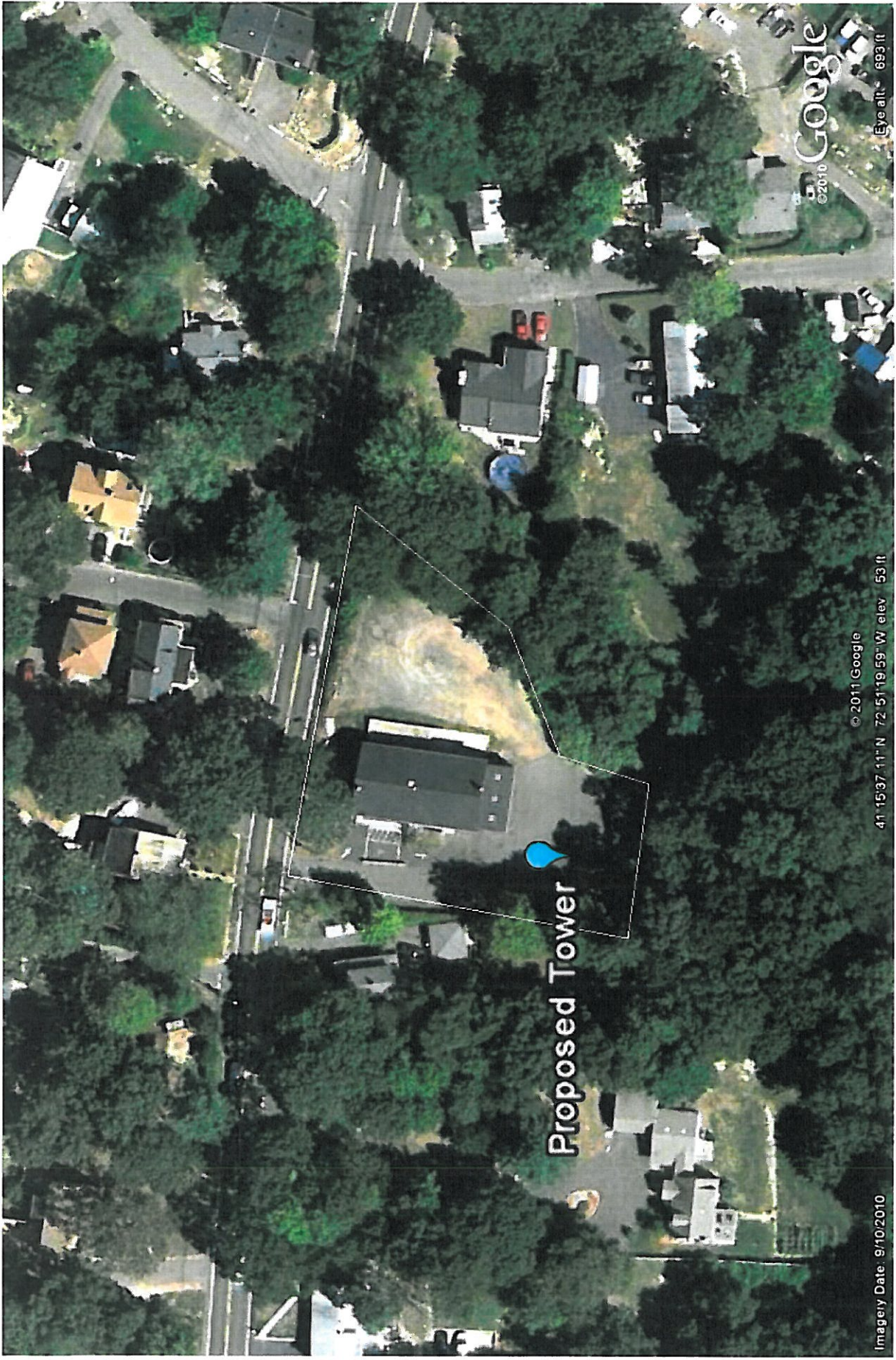
1. THE USE, APPROXIMATELY 115 RESIDENTIAL STRUCTURES WITHIN A 100' RADIUS OF THE PROPOSED NORTH ATLANTIC TOWERS WOULD BE REMOVED BASED ON AERIAL PHOTOGRAPHY. TREE REMOVAL TO BE COMPLETED FOR INSTALLATION OF TOWERS. APPROXIMATELY 15' IS APPROXIMATELY 15' (A).



GRAPHIC SCALE
 60' 30' 0 30' 60'
 SCALE (11x17): 1" = 60'-0"
 SCALE (22x34): 1" = 30'-0"

ABUTTERS MAP
 SCALE: AS NOTED

BASEMAPING PREPARED FROM A SITE WALK PERFORMED BY INFINITY ENGINEERING ON 3/11/11, AND A SURVEY PERFORMED BY INFINITY SURVEYING, DATED: 4/8/11.



Proposed Tower

©2010 Google

Eye alt. 693 ft

© 2011 Google

41°15'37.11\" N 72°51'19.59\" W elev 53 ft

Imagery Date: 9/10/2010



Connecticut Department of
**ENERGY &
ENVIRONMENTAL
PROTECTION**

July 12, 2011

Douglas Jackson
Town Of East Haven, Fire Dept.
200 Main St
East Haven, CT 06512

Project: New communications tower at Riverside VFD, 82 Short Beach Rd., East Haven
Request No.: 201105794

Dear Douglas Jackson,

I have reviewed Natural Diversity Data Base maps and files regarding the area delineated on the map you provided for the proposed New communications tower at Riverside VFD, 82 Short Beach Rd., East Haven, Connecticut. I have determined that the proposed activities will not impact any extant populations of Federal or State Endangered, Threatened or Special Concern Species that occur in the vicinity of this property.

Natural Diversity Data Base information includes all information regarding critical biological resources available to us at the time of the request. This information is a compilation of data collected over the years by the Department of Environmental Protection's Natural History Survey and cooperating units of DEP, private conservation groups and the scientific community. This information is not necessarily the result of comprehensive or site-specific field investigations. Consultations with the Data Base should not be substitutes for on-site surveys required for environmental assessments. Current research projects and new contributors continue to identify additional populations of species and locations of habitats of concern, as well as, enhance existing data. Such new information is incorporated into the Data Base as it becomes available.

Please contact me if you have further questions at (860) 424-3592, or dawn.mckay@ct.gov . Thank you for consulting the Natural Diversity Data Base. Also be advised that this is a preliminary review and not a final determination. A more detailed review may be conducted as part of any subsequent environmental permit applications submitted to DEP for the proposed site.

Sincerely,

A handwritten signature in cursive script that reads "Dawn M. McKay".

Dawn M. McKay

Environmental Analyst 3