## Full Environmental Assessment Form Part 1 - Project and Setting

## **Instructions for Completing Part 1**

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

## A. Project and Applicant/Sponsor Information.

Name of Action or Project: Kingsboro Psychiatric Center Mixed-Use Project			
Project Location (describe, and attach a general location map): 81 Clarkson Avenue (portion of Block 4833, Lot 1), East Flatbush, Brooklyn (Kings County),	NY		
Brief Description of Proposed Action (include purpose or need):  The Proposed Project is a comprehensive redevelopment initiative for a 7.2 acre portion of the Empire State Development ("ESD") in collaboration with New York State Homes and Communitisposition of a portion of Block 4833, Lot 1 to a conditionally designated developer and the allevelopment of +/- 1,033,039 sf of residential space (including approximately 1,090 new units would be homeownership units, and two new state-of-the-art single-adult men's homeless she currently available at the Project Site), +/- 8,092 sf of commercial space, +/- 38,378 sf of compens space, of which approximately +/- 2.16 acres will be publicly accessible. As currently cohases, with the first phase commencing in 2024, the final phase anticipated to be completed	nity Renewal ("HCR"). The Propo doption of a General Project Plan (" of affordable housing of which app elters, which would fully replace the munity facilities, +/- 15 parking spacentemplated, construction would be	osed Project involves the GPP") to facilitate the roximately 9.3 percent existing 364 beds es, and +/- 2.80 acres of undertaken in three	
The Proposed Project would support the Vital Brooklyn initiative by facilitating the construction of Brooklyn (East Flatbush). The proposed redevelopment of the Project Site would allow for supportive housing.	n of affordable housing in a significa	ntly underserved portion	
Name of Applicant/Sponsor: Telephone: (212) 991-4549			
Douglaston Development LLC, Breaking Ground Housing Development Fund Corporation, Almat Urban LLC, Andrew Velez Construction, Inc., Jobe Development Corp., and the Brooklyn Bureau of Community Service	E-Mail: jkolkmann@ddny.com		
Address: 7 Penn Plaza, Suite 600			
City/PO: New York	State: New York	Zip Code: <sub>10001</sub>	
Project Contact (if not same as sponsor; give name and title/role):	Telephone:	•	
Eram Qadri, Senior Director, Planning & Environmental Review, Empire State Development	E-Mail:Eram.Qadri@esd.ny.gov		
Address: 33 Third Avenue			
City/PO: New York City	State: New York	Zip Code: 10017	
Property Owner (if not same as sponsor):	Telephone: (518) 257-3000	'	
The People of the State of New York acting through the Dormitory Authority of the State of New York (DASNY)	E-Mail:		
Address: 515 Broadway			
City/PO: Albany	State: New York	Zip Code: <sub>12207</sub>	

## **B.** Government Approvals

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)			
Government Entity	If Yes: Identify Agency and Approval(s) Required	Applicati (Actual or 1	
a. City Counsel, Town Board, □Yes☑No or Village Board of Trustees			
b. City, Town or Village ☐Yes☑No Planning Board or Commission			
c. City, Town or ☐Yes☑No Village Zoning Board of Appeals			
d. Other local agencies	Possibly NYC HPD, NYC HDC, NYC DHS		
e. County agencies □Yes☑No		_	
f. Regional agencies □Yes☑No			
g. State agencies	DASNY, NYS HCR, NYS OMH, NYS OPRHP (Consultation under SHPA)		
h. Federal agencies □Yes☑No			
<ul><li>i. Coastal Resources.</li><li>i. Is the project site within a Coastal Area, o</li></ul>	or the waterfront area of a Designated Inland W	aterway?	□Yes☑No
<ul><li>ii. Is the project site located in a community</li><li>iii. Is the project site within a Coastal Erosion</li></ul>	with an approved Local Waterfront Revitalizat h Hazard Area?	ion Program?	☑ Yes□No □ Yes☑No
C. Planning and Zoning			
C.1. Planning and zoning actions.			
<ul> <li>Will administrative or legislative adoption, or an only approval(s) which must be granted to enable.</li> <li>If Yes, complete sections C, F and G.</li> <li>If No, proceed to question C.2 and con</li> </ul>			□Yes□No
C.2. Adopted land use plans.			
a. Do any municipally- adopted (city, town, vill where the proposed action would be located? If Yes, does the comprehensive plan include spe would be located?	ecific recommendations for the site where the pr	roposed action	□Yes□No
b. Is the site of the proposed action within any leader or other?)  If Yes, identify the plan(s):  Jamaica Bay Watershed Protection Plan	ocal or regional special planning district (for exacted State or Federal heritage area; watershed n		☑Yes□No
c. Is the proposed action located wholly or part or an adopted municipal farmland protection If Yes, identify the plan(s):		pal open space plan,	□Yes⊋No

C.3. Zoning	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance.  If Yes, what is the zoning classification(s) including any applicable overlay district?  R-5 District (Low Density General Residence District)	☑ Yes□No
b. Is the use permitted or allowed by a special or conditional use permit?	□Yes☑No
c. Is a zoning change requested as part of the proposed action?	□Yes☑No
If Yes,  i. What is the proposed new zoning for the site? A zoning override would be effectuated via a General Project Plan ("GPP")	
C.4. Existing community services.	
a. In what school district is the project site located? Community School District 18	
b. What police or other public protection forces serve the project site?  NYPD 71st Precinct (421 Empire Boulevard, Brooklyn, NY)	
c. Which fire protection and emergency medical services serve the project site? FDNY Engine 249/Ladder 113 (491 Rogers Avenue, Brooklyn, NY); EMS Station 38 - Kings County Hospital Center	
d. What parks serve the project site? Wingate Park; Hamilton Metz Field; Rolf Henry Playground; I.S. 2 Play Yard; Parkside Playground; I.S. 232 Play Yard; P.S. 268 Play Yard; Lincoln Terrace/Arthur S. Somers Park; Marc and Jason's Playground; P.S. 161 Play Yard; Dodger Playground	Yard; P.S. 221 Play
D. Project Details	
D.1. Proposed and Potential Development	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, components)? ESD would facilitate the redevelopment of a portion of Block 4833, Lot 1 and adopt a GPP to facilitate construction of affordable housing, community facilities, open space, and private driveways with on-site parking.	
b. a. Total acreage of the site of the proposed action? 7.2 acres	
b. Total acreage to be physically disturbed?	
c. Total acreage (project site and any contiguous properties) owned	
or controlled by the applicant or project sponsor?	
c. Is the proposed action an expansion of an existing project or use?  i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, h square feet)? % Units:	☐ Yes ☐ No ousing units,
d. Is the proposed action a subdivision, or does it include a subdivision?  If Yes,	☑Yes □No
<i>i.</i> Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)  Affordable housing, commercial space, community facilities, open space, and private driveways with on-site parking.	
ii. Is a cluster/conservation layout proposed?	□Yes ☑No
iii. Number of lots proposed?TBD	
77. Tallindari dad maninari proposed fot sizes. 17. mininari maninari	
<ul><li>e. Will the proposed action be constructed in multiple phases?</li><li>i. If No, anticipated period of construction: months</li></ul>	☑Yes□No
ii. If Yes:	
<ul> <li>Total number of phases anticipated</li> </ul>	
• Anticipated commencement date of phase 1 (including demolition)  Jan month  2024 year	
Anticipated completion date of final phase  Dec month  2030 year (full occur  The property of the propert	pancy by June 2031)
Generally describe connections or relationships among phases, including any contingencies where progress	
determine timing or duration of future phases:  Phasing (i.e., the number of units and "buildings" constructed as part of a single phase) may depend on financing approvals sought by	
developer for the Proposed Project.	

	ct include new resid				<b>∠</b> Yes <b>N</b> o
If Yes, show num	nbers of units propo One Family		Three Family	Multiple Femily (four or more)	
	One Family	Two Family	Three Family	Multiple Family (four or more) +/- 69	
Initial Phase At completion	-		197		
of all phases				+/- 1,090	
	osed action include	new non-residentia	al construction (inclu	iding expansions)?	<b>∠</b> Yes□No
If Yes,  i Total number	r of structures	9			
<i>ii.</i> Dimensions	(in feet) of largest p	roposed structure:	150' max height; 2	35' max width; and 139' max length	
iii. Approximate	extent of building	space to be heated	or cooled:	1,105,301 (total) square feet	
h. Does the prop	osed action include	construction or oth	er activities that wil	l result in the impoundment of any	□Yes☑No
liquids, such a				agoon or other storage?	
If Yes,					
i. Purpose of the	e impoundment: coundment, the prin	cipal source of the	water	Ground water Surface water stream	os Other specify:
ii. II a water iiii	boundment, the prin	cipal source of the	water.	Ground water Surface water stream	isOther specify.
iii. If other than v	water, identify the ty	ype of impounded/o	contained liquids and	d their source.	
iv Annrovimate	size of the propose	d impoundment	Volume	million gallons: surface area:	acres
v. Dimensions of	of the proposed dam	or impounding str	ucture:	million gallons; surface area:height;length	acres
vi. Construction	method/materials 1	for the proposed da	m or impounding str	ructure (e.g., earth fill, rock, wood, conc	rete):
D.2. Business On	4:				
D.2. Project Op					
				uring construction, operations, or both?	☐Yes ✓ No
materials will		ation, grading or in	stanation of utilities	or foundations where all excavated	
If Yes:	remain onsite)				
<i>i</i> .What is the p	urpose of the excava	ation or dredging?			
ii. How much ma	aterial (including ro	ck, earth, sediment	s, etc.) is proposed to	o be removed from the site?	
<ul> <li>Volume</li> </ul>	e (specify tons or cu	bic yards):			
• Over w	hat duration of time	?	a arraggistad an duade	ged, and plans to use, manage or dispose	of thom
Describe natu	ire and characteristic	es of materials to o	e excavated of dredg	ged, and plans to use, manage of dispose	of them.
W/:11 4h ana h					
	e onsite dewatering ibe.				☐Yes ☐No
	otal area to be dredg			acres	
	naximum area to be			acres	
			or dredging?	feet	
	avation require blas				∐Yes ☐No
ix. Summarize si	te reciamation goals	s and plan:			
·					
b. Would the pro	posed action cause	or result in alteration	on of, increase or de	crease in size of, or encroachment	☐Yes ✓ No
into any exist			ch or adjacent area?		
If Yes:		1.1.	CC + 1.4		1.
				vater index number, wetland map number	er or geographic
description).	-				
-					

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square	
iii. Will the proposed action cause or result in disturbance to bottom sediments?	
**** 1	□Yes □No
iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?  If Yes, describe:  iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?	□Yes□No
acres of aquatic vegetation proposed to be removed:	
<ul> <li>expected acreage of aquatic vegetation remaining after project completion:</li> </ul>	
purpose of proposed removal (e.g. beach clearing, invasive species control, boat access):	
proposed method of plant removal:	
if chemical/herbicide treatment will be used, specify product(s):	
v. Describe any proposed reclamation/mitigation following disturbance:	
c. Will the proposed action use, or create a new demand for water?  If Yes:	∡Yes □No
i. Total anticipated water usage/demand per day:  TBD gallons/day	
ii. Will the proposed action obtain water from an existing public water supply?	✓ Yes □No
If Yes:	
Name of district or service area: Community District 9 (Brooklyn)	
<ul> <li>Does the existing public water supply have capacity to serve the proposal?</li> </ul>	✓ Yes No
• Is the project site in the existing district?	✓ Yes No
• Is expansion of the district needed?	☐ Yes ✓ No
<ul> <li>Do existing lines serve the project site?</li> </ul>	✓ Yes No
<i>iii.</i> Will line extension within an existing district be necessary to supply the project? If Yes:	□Yes ☑No
Describe extensions or capacity expansions proposed to serve this project:	
Source(s) of supply for the district:	
<i>iv.</i> Is a new water supply district or service area proposed to be formed to serve the project site? If, Yes:	☐ Yes ☑ No
Applicant/sponsor for new district:	
Date application submitted or anticipated:	
Proposed source(s) of supply for new district:	
v. If a public water supply will not be used, describe plans to provide water supply for the project:	
vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: gal	
d. Will the proposed action generate liquid wastes?	✓ Yes □No
If Yes:	
i. Total anticipated liquid waste generation per day:	
<i>ii.</i> Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all coapproximate volumes or proportions of each):	omponents and
approximate volumes of proportions of each): A sanitary sewer and stormwater assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Propo	sed Project.
<ul><li>iii. Will the proposed action use any existing public wastewater treatment facilities?</li><li>If Yes:</li></ul>	✓ Yes □No
Name of wastewater treatment plant to be used: Coney Island Wastewater Resource Recovery Facility (WRRI	F)
Name of district: Community District 9 (Brooklyn)	
<ul> <li>Does the existing wastewater treatment plant have capacity to serve the project?</li> </ul>	✓ Yes □No
• Is the project site in the existing district?	☑ Yes □No
• Is expansion of the district needed?	□Yes ✓No

Do existing sewer lines serve the project site?	☑Yes ☐No
<ul> <li>Will a line extension within an existing district be necessary to serve the project?</li> <li>If Yes:</li> </ul>	□Yes☑No
<ul> <li>Describe extensions or capacity expansions proposed to serve this project:</li> <li>A sanitary sewer and stormwater assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Proposed P</li> </ul>	roject.
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?	□Yes☑No
<ul><li>If Yes:</li><li>Applicant/sponsor for new district:</li></ul>	
Applicant/sponsor for new district:     Date application submitted or anticipated:	
• What is the receiving water for the wastewater discharge?	
v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including spec receiving water (name and classification if surface discharge or describe subsurface disposal plans):	ifying proposed
vi. Describe any plans or designs to capture, recycle or reuse liquid waste:	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point	<b>∠</b> Yes□No
sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point	
source (i.e. sheet flow) during construction or post construction?  If Yes:	
i. How much impervious surface will the project create in relation to total size of project parcel?	
221,640 Square feet or5.1 acres (impervious surface) 313,632 Square feet or7.2 acres (parcel size) ii. Describe types of new point sources. curbs and gutters	
313,632 Square feet or 7.2 acres (parcel size)	
ii. Describe types of new point sources.	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent p	roperties,
groundwater, on-site surface water or off-site surface waters)?	
Stormwater runoff would flow into the combined sewer system, and would be managed in accordance with a Stormwater Pollution Pre SWPPP) to be developed with NYSDEC and in consultation with NYCDEP.	evention Plan
If to surface waters, identify receiving water bodies or wetlands:	
Will stormwater runoff flow to adjacent properties?  Provide a stormwater runoff flow to adjacent properties?	☐ Yes ☐ No
1 1 1 2 1	
f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?	<b>☑</b> Yes <b>□</b> No
If Yes, identify:	
i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)	
An air quality assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Proposed Project.	
ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) an air quality assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Proposed Project.	
iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)  An air quality assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Proposed Project.	
g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit,	□Yes☑No
or Federal Clean Air Act Title IV or Title V Permit?	
If Yes:	
i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year)	□Yes□No
ii. In addition to emissions as calculated in the application, the project will generate:	
•Tons/year (short tons) of Carbon Dioxide (CO <sub>2</sub> )	
•Tons/year (short tons) of Nitrous Oxide (N <sub>2</sub> O)	
•Tons/year (short tons) of Perfluorocarbons (PFCs)	
•Tons/year (short tons) of Sulfur Hexafluoride (SF <sub>6</sub> )	
<ul> <li>Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs)</li> <li>Tons/year (short tons) of Hazardous Air Pollutants (HAPs)</li> </ul>	
TOUS/ VEAL USION WISH OF HAZARDOUS AN FORMAINS UTLATEST	

h. Will the proposed action generate or emit methane (includant landfills, composting facilities)?	ading, but not limited to, sewage treatment plants,	□Yes☑No
If Yes:		
<ul><li>i. Estimate methane generation in tons/year (metric):</li><li>ii. Describe any methane capture, control or elimination m</li></ul>	passures included in project design (e.g. combustion to c	renerate heat or
electricity, flaring):		generate near or
electrony, naring).		
i. Will the proposed action result in the release of air pollut	rants from onen air operations or processes, such as	☐Yes No
quarry or landfill operations?	ants from open-an operations of processes, such as	
If Yes: Describe operations and nature of emissions (e.g., d	liesel exhaust, rock particulates/dust):	
	······································	
' Wild 1 c' 1c' 1 c' 1'	, CC 1 , 1 1 , 1 1 , 1 1 , 1 1	
j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services?	n traffic above present levels or generate substantial	<b>∠</b> Yes No
If Yes:		
<i>i.</i> When is the peak traffic expected (Check all that apply	):  Morning  Evening  Weekend	
Randomly between hours of to		
ii. For commercial activities only, projected number of tra	uck trips/day and type (e.g., semi trailers and dump truck	cs):
• • •	unit truck trip deliveries during the peak hours.	,
iii. Parking spaces: Existing 0	Proposed15 Net increase/decrease	15
		□Yes☑No
<ul><li>iv. Does the proposed action include any shared use parking</li><li>v. If the proposed action includes any modification of ex</li></ul>		
Proposed driveway connections to/from Clarkson Ave and Winthrop St for veh		
vi. Are public/private transportation service(s) or facilities		✓ Yes No
vii Will the proposed action include access to public transp		√Yes No
or other alternative fueled vehicles?	,	
viii. Will the proposed action include plans for pedestrian of	or bicycle accommodations for connections to existing	□Yes No
pedestrian or bicycle routes?		
k. Will the proposed action (for commercial or industrial pr	rojects only) generate new or additional demand	✓ Yes No
for energy?	rojects only) generate new or additional demand	[2] 1 CS[110
If Yes:		
i. Estimate annual electricity demand during operation of An energy assessment per the CEQR Technical Manual will be prep	the proposed action:	
200		
ii. Anticipated sources/suppliers of electricity for the proje	ect (e.g., on-site combustion, on-site renewable, via grid/	local utility, or
other):		
Grid/local utility		
iii. Will the proposed action require a new, or an upgrade, t	to an existing substation?	□Yes No
1. Hours of operation. Answer all items which apply.		
i. During Construction:	ii. During Operations:	
Monday - Friday: TBD	Monday - Friday: 24 hours	
Saturday: TBD	Saturday: 24 hours	
Sunday:     Not Expected	Sunday: 24 hours	
Holidays: Not Expected	Holidays: 24 hours	,
<u> </u>	-	

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction,	☑ Yes □No
operation, or both? If yes:	
i. Provide details including sources, time of day and duration:	
A noise assessment per the CEQR Technical Manual will be prepared as part of the EIS for the Proposed Project.	
ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen?	□Yes□No
Describe:	
n. Will the proposed action have outdoor lighting?	Yes □ No
If yes:	
<i>i.</i> Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures: Based on preliminary designs, the Proposed Project would include outdoor lighting for night-time pedestrian safety within the landscap	and portions of the
Project Site, and outdoor lighting for night-time vehicular safety.	bed portions of the
<i>ii.</i> Will proposed action remove existing natural barriers that could act as a light barrier or screen?	☐ Yes ☑ No
Describe:	LI Tes LINO
Describe.	
o. Does the proposed action have the potential to produce odors for more than one hour per day?	☐ Yes ☑ No
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest	
occupied structures:	
	-
-	3.
p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons)	☐ Yes ☑ No
or chemical products 185 gallons in above ground storage or any amount in underground storage?	
If Yes:	
i. Product(s) to be stored (e.g., month, year)	
iii. Generally, describe the proposed storage facilities:	
iii. Generally, describe the proposed storage facilities.	
q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?	☑ Yes □No
If Yes:	
<i>i.</i> Describe proposed treatment(s):	
Commercial components (e.g., supermarket) would be expected to engage in routine pest control appropriate to busine	ess operation; this
may involve the use of pesticides indoors.	
ii. Will the proposed action use Integrated Pest Management Practices?	☐ Yes ☑No
r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal	☑ Yes □No
of solid waste (excluding hazardous materials)?	
If Yes:	
i. Describe any solid waste(s) to be generated during construction or operation of the facility:	
<ul> <li>Construction: TBD tons per (unit of time)</li> <li>Operation: TBD tons per (unit of time)</li> </ul>	
• Operation: TBD tons per (unit of time)  ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:	
Compatible TRD	
• Construction: 123	
Operation: TBD	
iii. Proposed disposal methods/facilities for solid waste generated on-site:	
• Construction: TBD	
Operation:	

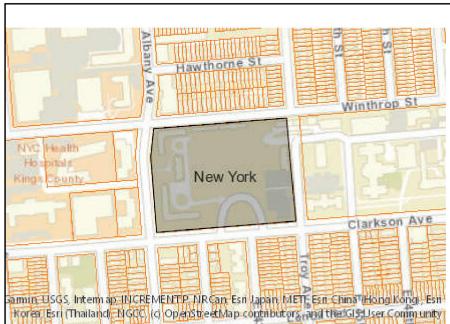
s. Does the proposed action include construction or modification of a solid waste management facility?				
If Yes:				
<i>i.</i> Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities):				
ii. Anticipated rate of disposal/processing:				
• Tons/month, if transfer or other non-	combustion/thermal treatment.	, or		
• Tons/hour, if combustion or thermal				
iii. If landfill, anticipated site life:	years			
t. Will the proposed action at the site involve the comme	ercial generation, treatment, sto	orage, or disposal of hazard	ous Yes No	
waste?	-			
If Yes:				
<i>i</i> . Name(s) of all hazardous wastes or constituents to be	e generated, handled or manag	ed at facility:		
ii. Generally describe processes or activities involving	hazardous wastes or constituer	its:		
iii. Specify amount to be handled or generatedt	ons/month			
iv. Describe any proposals for on-site minimization, rec	cycling or reuse of nazardous c	onstituents:		
v. Will any hazardous wastes be disposed at an existing	g offsite hazardous waste facili	ity?	□Yes□No	
If Yes: provide name and location of facility:		*		
1631	1:1 :11	. 1 1		
If No: describe proposed management of any hazardous	wastes which will not be sent	to a hazardous waste facilit	y:	
-				
E. Site and Setting of Proposed Action				
E.1. Land uses on and surrounding the project site				
a. Existing land uses.	municat sita			
i. Check all uses that occur on, adjoining and near the  ☐ Urban ☐ Industrial ☐ Commercial ☐ Resident Commercial ☐ Commercial ☐ Resident Commercial ☐ Res		(non-farm)		
Forest Agriculture Aquatic Othe	r (specify): Institutional, residentia	al (urban), and open space		
ii. If mix of uses, generally describe:				
-				
b. Land uses and covertypes on the project site.				
Land use or	Current	Acreage After	Change	
Covertype	Acreage	Project Completion	(Acres +/-)	
Roads, buildings, and other paved or impervious	2.5	5.1	+ 2.6	
surfaces	2.0	5.1	7 2.0	
• Forested				
<ul> <li>Meadows, grasslands or brushlands (non-</li> </ul>				
agricultural, including abandoned agricultural)				
Agricultural				
(includes active orchards, field, greenhouse etc.)				
Surface water features  (lakes pands streams rivers etc.)				
(lakes, ponds, streams, rivers, etc.)				
Wetlands (freshwater or tidal)				
Non-vegetated (bare rock, earth or fill)				
• Other				
Describe: Lawn areas				
Describe.	4.7	2.1	- 2.6	

c. Is the project site presently used by members of the community for public recreation?  i. If Yes: explain:	□Yes☑No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  If Yes,	∠Yes No
i. Identify Facilities:  Kingsboro Psychiatric Center, Kingsbrook Jewish Hospital, Kings County Hospital, SUNY Downstate Hospital, P.S. 235, Middle School of the Arts, I.S. 391, New Heights Middle School, Achieveme	nt First Crown Heights Middle
School, Kings County Senior Center, McKinney Rehabilitation Center, George Wingate High School, P.S. 397, Darchai Menachem Boys School, Bros Chomes Academy, Jewish Board Family & Cit Center at NYU Langone, Statcare Urgent & Walk-In Medical Care, East Flatbush Ascend Lower School, Friends of Crown Heights Education Center # 4, Project Social Care Head Start Church Ave,	nildren, Flatbush Family Health
e. Does the project site contain an existing dam?	□Yes☑No
If Yes:	1031110
i. Dimensions of the dam and impoundment:	
<ul><li>Dam height: feet</li><li>Dam length: feet</li></ul>	
<ul><li>Dam length: feet</li><li>Surface area: acres</li></ul>	
Volume impounded: gallons OR acre-feet	
ii. Dam's existing hazard classification:	
iii. Provide date and summarize results of last inspection:	
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility.	□Yes☑No ity?
If Yes:  i. Has the facility been formally closed?	□Yes□ No
If yes, cite sources/documentation:	_
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:	
iii. Describe any development constraints due to the prior solid waste activities:	
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes:	□Yes☑No
<i>i.</i> Describe waste(s) handled and waste management activities, including approximate time when activities occurre	d:
L. Dermid and district the Handau Language Langu	
<ul> <li>h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?</li> <li>If Yes:</li> </ul>	☑Yes□ No
<ul><li>i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:</li></ul>	□Yes☑No
Yes – Spills Incidents database  Provide DEC ID number(s):  Provide DEC ID number(s):	
☐ Yes – Environmental Site Remediation database Provide DEC ID number(s): ☐ Neither database	
ii. If site has been subject of RCRA corrective activities, describe control measures:	
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?	✓Yes□No
If yes, provide DEC ID number(s): C224226	
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):	
C224226 - Classification Code: N (No Further Action at this Time)	

v. Is the project site subject to an institutional control limiting property uses?	□Yes☑No
<ul> <li>If yes, DEC site ID number:</li> <li>Describe the type of institutional control (e.g., deed restriction or easement):</li> </ul>	
Describe any use limitations:	
<ul> <li>Describe any engineering controls:</li> <li>Will the project affect the institutional or engineering controls in place?</li> </ul>	□Yes□No
Explain:	
E.2. Natural Resources On or Near Project Site	
a. What is the average depth to bedrock on the project site? >10 inches feet	
b. Are there bedrock outcroppings on the project site?  If Yes, what proportion of the site is comprised of bedrock outcroppings?	☐ Yes ☑ No
c. Predominant soil type(s) present on project site: Urban land 100 %	
d. What is the average depth to the water table on the project site? Average:35-44 feet	
e. Drainage status of project site soils: Well Drained: 100% of site	
☐ Moderately Well Drained:% of site ☐ Poorly Drained% of site	
f. Approximate proportion of proposed action site with slopes: 2 0-10%: 100 % of site	
☐ 10-15%:% of site ☐ 15% or greater:% of site	
g. Are there any unique geologic features on the project site?  If Yes, describe:	□Yes☑No
h. Surface water features.  i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers,	□Yes☑No
ponds or lakes)?  ii. Do any wetlands or other waterbodies adjoin the project site?	□Yes☑No
If Yes to either <i>i</i> or <i>ii</i> , continue. If No, skip to E.2.i. <i>iii</i> . Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal,	□Yes☑No
state or local agency?	
<ul> <li>iv. For each identified regulated wetland and waterbody on the project site, provide the following information:</li> <li>Streams: Name Classification</li> </ul>	
<ul> <li>Lakes or Ponds: Name</li> <li>Classification</li> </ul>	
<ul> <li>Wetlands: Name Approximate Size</li> <li>Wetland No. (if regulated by DEC)</li> </ul>	
v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?	□Yes☑No
If yes, name of impaired water body/bodies and basis for listing as impaired:	
i. Is the project site in a designated Floodway?	□Yes☑No
j. Is the project site in the 100-year Floodplain?	☐Yes ✓No
k. Is the project site in the 500-year Floodplain?	□Yes☑No
1. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?	✓ Yes □No
If Yes:  i. Name of aquifer: Sole Source Aquifer Names:Brooklyn-Queens SSA	

m. Identify the predominant wildlife species that occupy or use the project s Common Songbirds	site:	
Rodents		
<ul> <li>n. Does the project site contain a designated significant natural community?</li> <li>If Yes:</li> <li>i. Describe the habitat/community (composition, function, and basis for de</li> </ul>		□Yes ☑No
ii. Source(s) of description or evaluation: iii. Extent of community/habitat:		
Currently:	acres	
Following completion of project as proposed:	acres	
• Gain or loss (indicate + or -):	acres	
<ul> <li>o. Does project site contain any species of plant or animal that is listed by the endangered or threatened, or does it contain any areas identified as habitated if Yes: <ol> <li>i. Species and listing (endangered or threatened):</li> </ol> </li> </ul>	t for an endangered or threatened speci	
p. Does the project site contain any species of plant or animal that is listed by special concern?	by NYS as rare, or as a species of	□Yes☑No
If Yes:  i. Species and listing:		
-		
q. Is the project site or adjoining area currently used for hunting, trapping, fi If yes, give a brief description of how the proposed action may affect that us		□Yes ☑No
E.3. Designated Public Resources On or Near Project Site		
a. Is the project site, or any portion of it, located in a designated agricultural Agriculture and Markets Law, Article 25-AA, Section 303 and 304? If Yes, provide county plus district name/number:	· ·	□Yes ☑No
b. Are agricultural lands consisting of highly productive soils present?  i. If Yes: acreage(s) on project site?  ii. Source(s) of soil rating(s):		□Yes ☑No
c. Does the project site contain all or part of, or is it substantially contiguou Natural Landmark? If Yes:		□Yes ☑No
F 10 10 10 10 10 10 10 10 10 10 10 10 10	Geological Feature tion and approximate size/extent:	
d. Is the project site located in or does it adjoin a state listed Critical Enviror If Yes:  i CEA name:		□Yes☑No
i. CEA name: ii. Basis for designation:		
iii. Designating agency and date:		

which is listed on the National or State Register of Historic Places, or that has been determined by the Commissione	
Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Place If Yes:	s?
i. Nature of historic/archaeological resource: ☐ Archaeological Site ☐ Historic Building or District	
ii. Name: Eligible prop.: Kingsboro Psychiatric Center; Bldg 20 / Assem. Hall; Bldg. 10 Residence (demo.); Bldg 19 Admin.; 681 Clarkson Ave; Bldg 22 Power Plant; Bldg 2 Div. 2 Res.; Bldg 1 Div. 3 F	Res.; Bldg 28 Frmr. Gym.
iii. Brief description of attributes on which listing is based: The Kingsboro Psychiatric Center was previously determined eligible for the State and National Registers u health/medicine as an example of a mental health complex that reflects the treatment of mental illness and addictions. The property was also determined eligible under Criterion C as a complex of institutional buildings that reflect Colonial Revival and Neoclassical architectural styles, and reflect the evolution of the treatment of mental health and changing the complex retains its collection of institutional buildings that reflect Colonial Revival and Neoclassical architectural styles, and reflect the evolution of the treatment of mental health and changing the complex retains its collection of institutional buildings that reflect Colonial Revival and Neoclassical architectural styles, and reflect the evolution of the treatment of mental health and changing the color of t	nder Criterion A in the area ildings constructed between g staff accommodations.
f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	Yes <b>∠</b> No
If Yes:	Yes <b>∠</b> No
i. Describe possible resource(s):	
ii. Basis for identification:	
scenic or aesthetic resource? If Yes:	<b>Z</b> Yes∏No
i. Identify resource:Jackie Robinson Parkway; Shore Parkway; Jamaica Bay - Tributaries, tidal wetlands and regulated adjacer	
<ul> <li>ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or sceedet.):</li> <li>State Scenic Byway (parkways); State Scenic Byway (parkways); Critical Environmental Areas</li> </ul>	enic byway,
iii. Distance between project and resource: 2.7; 3.1; 3.0 miles.	<b>-</b>
<ul> <li>i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers         Program 6 NYCRR 666?     </li> <li>If Yes:</li> </ul>	Yes <b>∠</b> No
<i>i.</i> Identify the name of the river and its designation:	
	]Yes □No
F. Additional Information Attach any additional information which may be needed to clarify your project.  If you have identified any adverse impacts which could be associated with your proposal, please describe those imparts which you propose to avoid or minimize them.	cts plus any
<b>G. Verification</b> I certify that the information provided is true to the best of my knowledge.	
Applicant/Sponsor Name Joel Kolkmann Date 12/19/2022	
Signature Title Authorized Signatory	



**Disclaimer:** The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.



B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	Yes
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	Yes
E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID]	C224226
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	No
E.2.h.ii [Surface Water Features]	No
E.2.h.iii [Surface Water Features]	No
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.I. [Aquifers]	Yes
E.2.I. [Aquifer Names]	Sole Source Aquifer Names:Brooklyn-Queens SSA
E.2.n. [Natural Communities]	No
	· · · · · · · · · · · · · · · · · · ·

E.2.o. [Endangered or Threatened Species]	No
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook.
E.3.e.ii [National or State Register of Historic Places or State Eligible Sites - Name]	Eligible property:Building 20 / Assembly Hall, Eligible property:BLDG. #2 DIVISION 2 RESIDENCE (1917), Eligible property:BLDG. #10 RESIDENCE (1934) - DEMOLISHED, Eligible property:BLDG. #19 ADMINISTRATION (1924), Eligible property:BLDG. #22 POWER PLANT (1914)
E.3.f. [Archeological Sites]	No
E.3.i. [Designated River Corridor]	No