

OFFICE OF THE SUPERVISOR

Telephone
(914) 277-3637
Fax
(914) 276-0082

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

ROBERT SCORRANO
SUPERVISOR



**SOMERS TOWN BOARD
WORK SESSION/REGULAR MEETING - 7:00PM
THURSDAY, AUGUST 14, 2025
www.somersny.gov**

6:00pm Executive Session

I. PLEDGE OF ALLEGIANCE:

7:00pm Work Session / Regular Meeting

II. ROLL CALL:

III. PUBLIC HEARINGS:

1. **Continuation of North Edge Realty Residential Development**
For proposed zoning map amendment to allow for the construction of 77 multifamily housing units inclusive of 15 percent affordable units along with recreation amenities located at 29, 43, and 45 NYS Route 6 and 5 County Line Road to rezone from an Existing R-40 and R-80 Residence Districts to Multifamily Residence Baldwin Place MFR-BP District.
2. For Chapter 77, Buildings. Unsafe; Section 77-9 as it relates to 1 Oak Drive, s/b/l 28.18-1-16.

PUBLIC COMMENT

Please limit your comments to no more than 3 minutes.

IV. APPROVAL OF MINUTES:

SOMERS TOWN BOARD
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THURSDAY, AUGUST 14, 2025
www.somersny.gov

V. DEPARTMENT REPORTS: The Town Clerk announces receipt of the following monthly reports: Town Clerk, Building Inspector, Zoning Board of Appeals, Plumbing, Bureau of Fire Prevention, Parks & Recreation, Planning & Engineering, Tax Receiver, Director of Finance and Department Heads

VI. BUSINESS OF THE BOARD:

A. TOWN BOARD:

1. Town of Somers – Update
2. December Town Board Meeting Dates – Discussion
3. Adopt-A Road Program Application & Agreement for the location of Brick Hill Rd from Route 202 to Route 139 – Discussion
4. Cedar Haven Subdivision – Private Common Driveway Name Request – Discussion
5. Vacancy of an Unexpired Term of an Elected Official - Discussion
6. Authorize the solicitation of Bids from professional mechanical engineers to perform a feasibility study to evaluate the library's existing heating, ventilation, and air conditioning equipment, and provide recommendations with budget opinions for modifications/alternate systems per memo dated July 15, 2025 from Thomas J. Tooma Jr., Building Inspector.
7. Review referral responses concerning the request to purchase two town-owned foreclosed properties, 24 Narcissus Dr., Lot 5.15-2-10, and 0 Narcissus Dr., Lot 5.15-2-11, and approve the publishing of an invitation to bid on the properties.
8. Permission to replace the existing 35kw diesel generator at the Police Station and purchase from the cooperative bidding site with installation by Town contracted electrician, per August 7, 2025 memo from Thomas J. Tooma, Jr., Building Inspector.

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9. Authorize the Supervisor to execute:
 - a. The renewal contract for the Town's Storage Tank Third Party Liability Corrective Action and Cleanup Policy, accepting the Terrorism Coverage, with Ironshore Insurance Services LLC. (A Liberty Mutual Company) for the period of August 6, 2025 through August 6, 2026, per July 31, 2025 email from Robert Kehoe, Director of Finance, retro to July 31, 2025.
 - b. The Affordable Care Act Assistance consulting agreement effective October 1, 2025 with Gilroy, Kernan & Gilroy, per August 8, 2025 memo from the Finance Department, per request to change vendors.
 - c. The Lifetime Benefit Solutions Employer Implementation Form to be effective no earlier than October 1, 2025 for the Flexible Spending Account, per August 11, 2025 memo from Robert Kehoe, Director of Finance.
10. Proposed Solar Farm Energy Legislation - Discussion
 - a. Receipt of draft legislation and EAF
 - b. Declare Notice of Intent to Act as Lead Agency
 - c. Circulation of Notice of Intent to other Interested and Involved Agencies including Westchester County and Town of Somers Planning Board
11. Petition for the Extension of the Heritage Hills Special Water District at Towne Centre at Somers - Discussion
 - a. Accept the Petition
 - b. Declaring the Town Board's intent to act as Lead Agency for the purposes of the review pursuant to the New York State Environmental Quality Review Act
 - c. Schedule a Public Hearing before the Town Board in connection with the Application
 - d. Refer the Application to the Planning Board for concurrent review of the Site Plan and other approvals required to facilitate the construction of the necessary infrastructure
12. Extension of Heritage Hills Special Water District and Sewer District to include the location of the new New York State Trooper Barracks – Discussion
 - a. Schedule a Public Hearing to consider the map, plan and report prepared by Woodard & Curran

B. PARKS & RECREATION: No additional business.

C. FINANCIAL: No additional business.

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D. HIGHWAY: No additional business.

E. PERSONNEL:

1. Current Vacancies:

- a. Affordable Housing Board (2- 2-year terms ending 7/11/2026.)
- b. Affordable Housing Board (1- 2-year term ending 7/11/2027.)
- c. Assessment Board of Review (1-5-year term ending 9/30/2029.)

2. Upcoming Vacancies - Terms Expiring in 2025:

- a. Assessment Board of Review (1-5-year term ending 9/30/2025.)

- 3. Authorize the reappointment of Alan Sorkowitz to the Somers Affordable Housing Board to a 2-year term ending July 11, 2027.

F. PLANNING & ENGINEERING: No additional business.

G. POLICE: No additional business.

H. CONSENSUS AGENDA:

- 1. Authorize the Supervisor to execute the 2025/2026 School Tax Warrant.

**SOMERS TOWN BOARD
WORK SESSION/REGULAR MEETING - 7:00PM
THURSDAY, AUGUST 14, 2025
www.somersny.gov**

2025 Calendar

August 14, 2025	7:00pm	Town Board Work Session / Regular Meeting Continuation of Public Hearing For North Edge Realty Residential Development For proposed zoning map amendment to allow for the construction of 77 multifamily housing units inclusive of 15 percent affordable units along with recreation amenities located at 29, 43, and 45 NYS Route 6 and 5 County Line Road to rezone from an Existing R-40 and R-80 Residence Districts to Multifamily Residence Baldwin Place MFR-BP District. Public Hearing For Chapter 77, <u>Buildings, Unsafe</u> ; Section 77-9 as it relates to 1 Oak Drive, s/b/l 28.18-1-16.
September 4, 2025	7:00pm	Town Board Work Session
September 11, 2025	7:00pm	Town Board Regular Meeting
October 2, 2025	7:00pm	Town Board Work Session
October 9, 2025	7:00pm	Town Board Regular Meeting

8/11/2025 12:17 PM
SomersNY-Supervisor/Shared Documents/kdelucia/TB Agendas/2025/Aug 14, 2025 Work Session_Regular Meeting.docx

Sent to:
TB, TA, TC
4/4/25
KO

**NOTICE OF SEQR ACTIONS FOR NORTH EDGE REALTY RESIDENTIAL DEVELOPMENT
And
NOTICE OF PUBLIC HEARING**

Application and Petition for proposed zoning map amendment to allow for the construction of 77 multifamily housing units inclusive of 15 percent affordable units along with recreation amenities located at 29, 43 and 45 NYS Route 6 and 5 County Line Road to rezone from an Existing R-40 and R-80 Residence Districts to Multifamily Residence Baldwin Place MFR-BP District.

Review Requested Zoning Petition, Full EAF and Supporting Documentation

Public Hearing Scheduled for April 10, 2025

Issued by Town of Somers Town Board
Westchester County, New York
TM: 4.19 -2 -2/3/4 and 4.19-2-1

This notice is issued pursuant to Part 617 of the implementing regulations pertaining to Article 8 (State Environmental Quality Review Act (SEQR)) of the New York State *Environmental Conservation Law* and Chapter 92 (Environmental Quality Review) of the *Code of the Town of Somers, New York*.

The Town of Somers Town Board has scheduled a public hearing for Thursday April 10, 2025 at 7:00 PM at Town Hall 335 Route 202, Somers, NY 10589. The public hearing is being held pursuant to §264 on New York State Law and §1-8 of the Somers Town Code.

The Town Board of the Town of Somers, Westchester County, declared themselves as lead agency as part of a coordinated review for Application and Petition for the rezoning of approximately 15.62 acres of real property with an address of 29, 43 and 45 NYS Route 6 and 5 County Line Road from R-40 and R-80 Residence District to Multifamily Residence Baldwin Place(MFR-BP) District for the construction of 77 multifamily units including 15 percent affordable units and recreation amenities (the "Proposed Action).

DESCRIPTION OF ACTION: The Proposed Action involves a zoning map amendment from R-80 Residence District and R-40 Residence District to Multifamily Residence Baldwin Place (MFR-BP) District and also includes the expansion of the water and sewer districts.

LOCATION: 29, 43 and 45 NYS Route 6 and 5 County Line Road, Somers, NY

SUPPLEMENTAL INFORMATION: A Full Environmental Assessment (EAF) and supporting documentation has been prepared for the Proposed Action, a copy of the entire document can be accessed and downloaded by going to <https://www.somersny.gov/resources/environmental-reviews>. Hard copies are available upon request. This form is being distributed to all known Involved and Interested Agencies (see list below), and this information is also available for review in the Town Clerk and Planning and Engineering offices at the Town House and on the Town's web site as note above.

TITLE OF ACTION: North Edge Realty Residential Development

Contact: David B. Smith, Town Planner
335 Route 202
Somers, New York 10589

Telephone: 914-277-5366

Date of this Notice: March 14, 2025

SEQR DISTRIBUTION LIST –

Involved Agencies:

Town Board (Lead Agency)
335 Route 202
Somers, New York 10589
Attn: Robert Scorrano, Supervisor

Town of Somers Planning Board
Somers Town House
335 Route 202
Somers, New York 10589

Westchester County Department of Health
25 Moore Avenue
Mt. Kisco, New York 10549
Attn: Dr. Sherlita Amler

New York City Department of
Environmental Protection
465 Columbus Avenue
Valhalla, New York 10595
Attn.: Cynthia Garcia

New York State Department of Environmental Conservation-Region 3
21 South Putt Corners Road
New Paltz, New York 12561-1620
Attn.: Tiernan Darcy, Div. of Environmental Permits

New York State Department of Transportation Region 8
Office
4 Burnett Boulevard
Poughkeepsie, New York 12603
Attn.: David Groucher, SEQRA-HW Permit Unit

NYS Office of the Attorney General
c/o Philip Bien, Watershed Inspector General
23 Liberty Street
NY, NY 10005

Interested Agencies

Town of Somers Open Space Committee
Somers Town House
335 Route 202
Somers, New York 10589

Somers Architectural Review Board
Somers Town House
335 Route 202
Somers, New York 10589

Town of Somers Town Clerk
Somers Town House
335 Route 202
Somers, New York 10589
Attn: Patricia Kalba, Town Clerk

Town of Somers Building Inspector
Somers Town House
335 Route 202
Somers, New York 10589

Somers Bureau of Fire Prevention
Somers Town House
335 Route 202
Somers, New York 10589

Somers Police Department
Town House
335 Route 202
Somers, New York 10589

Somers Energy Environment Committee Somers
Town House
335 Route 202
Somers, New York 10589

Somers Highway Department
Town House
335 Route 202
Somers, New York 10589

New York State Police Department (Somers)
295 Route 100
Somers, NY 10589

Somers Central School District
250 Route 202
Somers, NY 10589
Attn: Superintendent Raymond H. Blanch

Westchester County Planning Board
432 Michaelian Office Building
White Plains, New York 10601
Attn: Blanca Lopez, Commissioner

NYS Office of Parks, Recreation and Historic Preservation-Taconic Region
c/o Bradley Russell
P.O Box 308
9 Old Post Rod
Staatsburg, NY 12580

Town of Carmel
Attn: Alice Daly
60 McAlpin Avenue
Mahopac, NY 10541

Town of Carmel Planning Department
c/o Rose Trombetta
60 McAlpin Avenue
Mahopac, NY 10541

NYS Homes and Community Renewal
c/o
641 Lexington Avenue
NY, NY 10022

Other- Lead Agency Representatives

David B. Smith, Town Planner
Town House
335 Route 202
Somers, New York 10589

Woodard & Curran Engineering P.A P.C. 709
800 Westchester Avenue Suite N507
Rye Brook, NY 10573
Attn: Steve Robbins

Stephens, Baroni Reilly & Lewis LLP
175 Main Street
White Plains, NY 10601
Attn: Roland A. Baroni, Esq.

Other- Project Sponsor Representatives

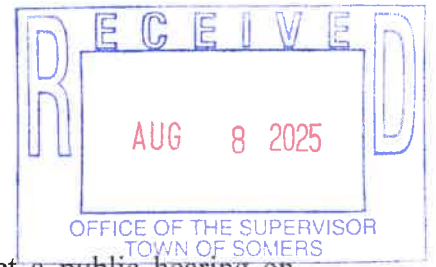
North Edge Realty Corp.
c/o Gus Boniello
165 Waccabuc Road
Goldens Bridge, NY 10526

Keane & Beane
c/o Richard O'Rourke
445 Hamilton Avenue
White Plains, NY 10601

Bibbo & Associates, LLP
c/o Tim Allen
293 Route 100, Suite 203
Somers, NY 10589

sent to:
B, TC, TA
TS
8/8/25

PUBLIC HEARING NOTICE



PLEASE TAKE NOTICE that the Town of Somers will conduct a public hearing on August 14, 2025 at 7:00 p.m. at the Town House, 335 Route 202, Somers, New York with regard to Chapter 77, Buildings, Unsafe; Section 77-9 as it relates to 1 Oak Drive, s/b/l 28.18-1-16.

All persons interested in this matter are invited to attend the public hearing and will be afforded an opportunity to be heard.

By Order of the Town Board
of the Town of Somers

Patricia Kalba
Town Clerk

Dated: July 10, 2025

Sent to:
TB, TA, TC
7/31/25
KD

Highway Department

Town of Somers

WESTCHESTER COUNTY, N.Y.

250 RT. 100
P.O. BOX 281

TELEPHONE
(914) 232-4848
FAX
(914) 232-0150

NICHOLAS DEVITO
Superintendent of Highways

PAUL WESTHOFF
Deputy Supt. of Highways



To: Town Board

From: Nicholas DeVito
Superintendent of Highways

Date: July 30, 2025

Re: Adopt-A-Road – Somers Education Foundation

Be advised attached is the Adopt-a Road Program Application & Agreement submitted by Nick Chakmakian from Somers Education Foundation, for the period beginning August 1, 2025 and ending August 1, 2027 for the location of Brick Hill Rd from Route 202 to Route 139.

If you should have any questions, please feel free to contact me.

Thank you,

Nicholas DeVito
Supt. of Highways

**TOWN OF SOMERS
ADOPT - A - ROAD PROGRAM
APPLICATION**

Group Name:

Somers Education Foundation

Address:

P.O. Box 401 Somers, NY 10589

1st Contact Person:

2nd Contact Person

Name:

Nick Chakmalyan

Name:

Rosalind Gellino

Address:

3 Benjamin Franklin

Address:

12 Lakewood Dr.

Mahopac / Somers NY 10541

Katonah, NY 10536

Phone: (H)

(H)

(W)

(W)

Site Locations: - Please include Route number, Highway name, nearest cross street(s), mile marker number (if known), and any landmarks if applicable.

Brick Hill Road from 202 to
139

Number of participants:

15 people

Dates of Commitment:

once per month - likely weekends

Attach copy of Group Charter (if applicable)

TOWN OF SOMERS

ADOPT-A-ROAD AGREEMENT

This Agreement made this 30 day of July 2025, by and between the Town of Somers, a municipal corporation of the State of New York, having offices at 335 Route 202, Somers, New York, 10589, acting by and through the Superintendent of Highways of the Town of Somers, hereafter called the "SUPERINTENDENT", and the organization known as the following and using the mailing address of:

Somers Education Foundation
P.O. Box 401, Somers, NY 10589

hereafter called the "GROUP."

WHEREAS, the GROUP recognizes the need for and desirability of a more attractive and litter free road segment, described as follows: Brick Hill Road

From RT 202 to RT 139

hereafter known as the segment, and

WHEREAS, this Agreement is intended to enable the GROUP to contribute toward the effort of maintaining the appearance for the segment, and

WHEREAS, by signature below, the GROUP acknowledges the hazardous nature of the activity and agrees to the following terms and conditions:

1. No work of any nature will be performed on the pavement or shoulders of the traveled way.

2. No participants' vehicles may be parked on the travel lanes or shoulders of the roadway.

3. Activities permitted are of a roadside maintenance nature including, but not limited to, litter pickup, mowing, brush control and cutting, tree trimming and planting, and maintaining approved vegetation, except as modified by the SUPERINTENDENT.

4. The GROUP will organize and supervise all activities.

5. The GROUP will organize and conduct a "safety briefing." Each day that work is done in the adopted area, a designated safety person must review the safety checklist and have participants sign the safety signature sheet. The designated safety person's sole responsibility must be assuring the safety of the workers and the traveling public. The SUPERINTENDENT will provide a training video and safety checklist to the designated representative from the GROUP. The designated representative from the GROUP is responsible to present the safety briefing for the first meeting with the GROUP.

6. All participants must attend the safety briefing before participating in the field activity. The designated safety person can provide a link to the safety video to all participants not able to attend the safety briefing in person.

7. The SUPERINTENDENT will provide shirts or vests and head gear that all participants in the GROUP must wear.

8. The GROUP may provide to itself approved safety gear. The GROUP will pick up supplies and materials from the Town Highway Garage during normal working hours. Unused materials and supplies will be returned to the

Town Highway Garage during normal working hours when the GROUP's agreement has ended.

9. The collected waste from the location specified in this agreement shall be left in a designated area in order for the Town Highway Department to pick up. The SUPERINTENDENT will be responsible for disposing of such waste.

10. The GROUP will conduct activities at a frequency which will enhance the attainment of the goal which is to provide a park-like appearance along the adopted road segment. Except as modified by the SUPERINTENDENT, minimum frequency of pick up along a road segment will occur on a monthly basis, with the first pick up commencing one month following the signing of this agreement. The GROUP will report monthly litter pick up amounts and any other pertinent details.

11. The SUPERINTENDENT will collect a \$150.00 permit fee up to \$300 depending on signage requirements for the first two-year period, and a \$75 fee up to \$150 for every 2-year period thereafter.

12. The SUPERINTENDENT will publicize the execution of this Agreement and will highlight it at various periods thereafter.

13. The SUPERINTENDENT will furnish and erect Adopt-A-Road signs at the beginning of each adopted Highway segment, or in each adopted rest area or scenic overlook. Sign for GROUP will be 12 "x 24 " to include name of GROUP and GROUP logo. If the GROUP terminates the agreement, they can keep their portion of the Adopt-A-Road sign.

14. This agreement shall be for a two (2) year period commencing on 8/1/2025 (starting date) and terminating at 12:01am on 8/1/2027 (ending date).

15. Notwithstanding any other provisions of this agreement, the SUPERINTENDENT, in his sole judgment, may terminate this agreement on 30 days notice to the GROUP, or summarily if based on unsafe activity, and take such other action as the SUPERINTENDENT it deems appropriate.

16. The SUPERINTENDENT recognizes the GROUP is the adopting organization for the segment and the GROUP accepts the responsibility of picking up litter on the adopted facility and of promoting a litter-free environment in the community for the term of this agreement.

17. The relationship of the GROUP to the Town of Somers arising out of this agreement shall be that of an independent contractor. Any and all members or employees of the GROUP under this Agreement, shall be considered agents of the GROUP, and all claims arising under the Workers' Compensation Law of the State of New York on behalf of said employees while so engaged, and any act or omission on the part of the GROUP employees while so engaged in any of the work or services provided to rendered herein, shall be the sole obligation and responsibility of the GROUP. The GROUP shall secure Workers' Compensation insurance, for the benefit of, and keep insured during the life of this agreement, such employees engaged therein as are required to be insured by the provisions of the Workers' Compensation Law.

The GROUP hereby agrees to indemnify, save and hold harmless the Town of Somers, and all its officials, departments, boards, agents and employees from any and all claims, demands, actions or cause of action or whatsoever nature or character arising out of or by reason of this execution or performance of work and services provided for herein and further agrees to defend at its own cost and expense any action or proceeding commenced for the purpose of asserting any claim of any character arising hereunder. Each group participant (or parent or guardian if 12 to 18 years of age) will sign and date the "Adopt-A-Road General Release" protecting the Town for the duration of the Agreement.

Somers Education Foundation

Name of Group/Organization



Signature of Organization Leader

Nick Chakmakian

Organization Leader Title - Please Print

Nick Chakmakian

Organization Coordinator - Please Print

3 Benjamin Green Lane

Coordinator's Address

Mahopac/
Somers, NY 10541

Town of Somers

By:



Superintendent of Highways

Coordinator's Daytime Phone Number

Coordinator's Evening Phone Number

Sent to:
TB, TA, TC
7/31/25
KD

PLANNING AND ENGINEERING DEPARTMENTS

Telephone
(914) 277-5366
Fax
(914) 277-4093

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
www.somersny.gov

Steven Woelfle
Principal Engineering Technician
swoelfle@somersny.gov



David B. Smith
Town Planner
directorofplanning@somersny.gov

Date: July 31, 2025

To: Town Board

From: Steven Woelfle SW
Engineering Department

RE: Private Common Driveway Name Discussion/Request

Cedar Haven subdivision was approved in 1999 with a common driveway easement for 2 lots off Watergate Drive in the already constructed Cale Farms subdivision.

The addresses were already established during the Cale Farms subdivision leaving no numbers available for the common driveway lots. (see attached email from the tax assessor)

The current owner is requesting a solution to this matter and after discussion with the Supervisor and Tax Assessor a private common driveway name may be the best option.

Please advise.

Att.

SW/wg

cc: Town Clerk
Town Attorney
Tax Assessor
Town Historian
Bureau of Fire Prevention
Paul Mastrantoni

We can discuss when you guys get back - I had Paul write this so maybe that can be a start to get on tb agenda

Steve

-----Original Message-----

From: Paul Mastrantoni

Sent: Tuesday, July 22, 2025 10:25 AM

To: Steve Woelfle <swoelfle@somersny.gov>

Subject: Cedar Haven subdivision

Good morning Rob

I own two lots in Cedar Haven subdivision off of Watergate dr.

The two parcels will be accessed by a common driveway off watergate dr According to the town there are no available watergate drive address.

Please advise if the common driveway

Can be given a road name or some other

Solution.

Thank you

Paul Mastrantoni

Sent from my iPhone

Steve Woelfle

From: Teresa Stegner
Sent: Tuesday, June 3, 2025 4:28 PM
To: David B. Smith; Robert Scorrano; Nick DeVito
Cc: Kim DeLucia; Steve Woelfle; Patricia Kalba; Tom Tooma
Subject: New Road name or renumbering of properties on Watergate Drive - legal addresses are both "Off Watergate Drive"
Attachments: Cedar Haven Subdivision - filed map 26445.pdf; Off Watergate properties from Cedar Haven Subdivision.pdf; Deed transfer from Town of Somers to Hogan.pdf; Cale Farms Resubdivision - filed map 23407.pdf

Good Afternoon,

This is an inherited problem that needs some historical perspective. In late 1999 a 3-lot subdivision (Cedar Haven – attached) was done off of Route 118. However, 2 parcels could be accessed from an easement owned by the Town of Somers from Watergate Drive. This easement was transferred to the owner (A. T. Hogan) of the parcel off of Route 118 which allowed these 2 parcels to have access to Watergate Drive. As the assessor at the time did not anticipate this scenario, they did not leave two available Watergate addresses. This creates an issue where the most likely solutions are either: a new private road name is created for these 2 parcels; or I renumber everyone from 48 Watergate Drive to 72 Watergate Drive -- 13 properties in all. Numbers 48 & 50 Watergate Drive would go to the subdivided parcels and the current 48 Watergate Dr would become 52 Watergate Dr, 50 would become 54, and so on. This will create a major USPS mailing nightmare for those residents for years to come, but if that is the way you choose to go, we will need to start getting everyone used to it by sending several mailings and a discussion (or several) at one or more Town Board meeting.

I was contacted by an attorney who made me aware that these properties are in the process of being sold to a developer so we have some time to sort this out, but not much time. This issue was created by the Town's poor foresight and it needs to be corrected with a commonsense solution.

If you have other ideas, please feel free to contact me.

Thank you.

Teresa A. Stegner
Assessor – Town of Somers
335 Route 202
Somers, NY 10589
(914) 277-3504

Telephone
(914) 277-3539

FAX
(914) 277-3790

BUILDING DEPARTMENT
Town of Somers
WESTCHESTER COUNTY, N.Y.

**TOWN HOUSE
ANNEX
337 ROUTE 202
SOMERS, NY 10589**

Thomas J. Tooma, Jr.
Building Inspector



MEMO TO: Town Board

FROM: Thomas J. Tooma, Jr., Building Inspector

RE: Bids for a Professional Design of the HVAC System for the Somers Library

DATE: July 15, 2025

At the April 10, 2025 Town Board meeting, permission was granted to solicit Bids from professional mechanical engineers to perform a feasibility study for the following:
Evaluate the library's existing heating, ventilation, and air conditioning equipment, and provide recommendations with budget opinions for modifications/alternate systems.

Unfortunately, no bids were received. The Bid document has since been revised and permission is being requested to once again solicit bids for an engineering design of the HVAC systems in the Somers Library.

Sent to:
TB, YA, TC
7/29/25
KD

Town Owned Property 24 and 0 Narcissus Drive Referral Summary For August 14, 2025 Town Board Meeting

Assessor – No objection to sell

Highway Department – No objection to sell

Parks & Recreation – No objection to sell

Engineering Department – No objection to sell

Planning Department – If you add both properties together they are slightly more than 10,000 s.f. Necessary for zoning, however, both lots are encumbered with steep slopes (almost all of the two lots are 25% slope) making them very problematic if not impossible to build the septic system needed to serve a prospective house. Mr. Ziegler indicated they didn't want to develop just keep it open, can the lots be sold with that restriction?

Open Space Committee - No objections to sell if the lots are not buildable and are a firm NO sale, if they are.

Kim DeLucia

From: Robert Scorrano
Sent: Tuesday, March 4, 2025 12:09 PM
To: Al Ziegler, CPA
Cc: Kim DeLucia
Subject: RE: Land Purchase

Received, thank you.

Best,

Robert Scorrano
Somers Town Supervisor
E: rscorrano@somersny.com
P: (914) 277-3637

From: Al Ziegler, CPA
Sent: Monday, March 3, 2025 6:51 PM
To: Robert Scorrano <rscorrano@somersny.gov>
Subject: Land Purchase

As directed, I Albert Ziegler am requesting to purchase tax map lots 5.15-2-10 and 5.15-2-11 that are town owned and connected to my back yard at 9 Magnolia Dr. (Tax map 5.15-2-19) We are interested in the property just to protect the property from being purchased and developed by someone else. Our plan is to keep the property undisturbed and as is.

Thank you for your consideration.

Albert and Luciana Ziegler
9 Magnolia Dr
Lake Lincolndale, NY 10541

Kim DeLucia

From: Teresa Stegner
Sent: Tuesday, July 29, 2025 12:42 PM
To: Patricia Kalba
Cc: Kim DeLucia
Subject: RE: Sale of Town owned property

Hi Patty,

Sorry for the late response.

I have no objection to the sale of the 2 Narcissus properties. 274 Route 202 should be kept for future Town use due to its proximity to Town Hall.

Teresa A. Stegner
Assessor – Town of Somers
335 Route 202
Somers, NY 10589
(914) 277-3504

From: Patricia Kalba <pkalba@somersny.gov>
Sent: Tuesday, May 6, 2025 1:47 PM
To: Teresa Stegner <tstegner@somersny.gov>; Nick DeVito <ndevito@somersny.gov>; Steve Woelfle <swoelfle@somersny.gov>; David B. Smith <directorofplanning@somersny.gov>
Cc: Kim DeLucia <kdelucia@somersny.gov>
Subject: Sale of Town owned property

Does anyone have any objections to the sale of the two attached properties?

Parks & Recreation Board has no objections and Open Space has no objections if the lots are not buildable and are a firm NO sale, if they are.

Patricia Kalba, RMC, MMC
Town Clerk
New York State Town Clerks Association 3rd Vice President
Town of Somers
335 Route 202
Somers, New York 10589

914-277-3323
914-277-3960 (fax)
pkalba@somersny.com

Note: This e-mail message is intended only for the use of the individual or entity to whom it is addressed, and may contain information that is privileged or confidential. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering this message to the identified addressee, you are hereby notified that any unauthorized use, disclosure, reproduction, dissemination or disruption of this communication is strictly prohibited. Please note that it is your responsibility to scan this e-mail for viruses. If you receive this e-mail message in error, please delete all copies of this message and notify the sender immediately by telephone at (914) 277-3323. Thank you.

Kim DeLucia

From: David B. Smith
Sent: Tuesday, May 6, 2025 2:18 PM
To: Patricia Kalba; Teresa Stegner; Nick DeVito; Steve Woelfle
Cc: Kim DeLucia
Subject: Re: Sale of Town owned property

Patty,

Agree with Steve W re: 274 Route 202. Re: the properties off of Magnolia/Narcissus Drive, if you add both properties together they are slightly more than 10,000 s.f. Necessary for zoning, however, both lots are encumbered with steep slopes (almost all of the two lots are 25% slope) making them very problematic if not impossible to build the septic system needed to serve a prospective house. That one owner Ziegler indicated they didn't want to develop just keep it open, can the lots be sold with that restriction?

Best,

Dave Smith
Town of Somers Planning Department

From: Patricia Kalba <pkalba@somersny.gov>
Sent: Tuesday, May 6, 2025 1:46 PM
To: Teresa Stegner <tstegner@somersny.gov>; Nick DeVito <ndevito@somersny.gov>; Steve Woelfle <swoelfle@somersny.gov>; David B. Smith <directorofplanning@somersny.gov>
Cc: Kim DeLucia <kdelucia@somersny.gov>
Subject: Sale of Town owned property

Does anyone have any objections to the sale of the two attached properties?

Parks & Recreation Board has no objections and Open Space has no objections if the lots are not buildable and are a firm NO sale, if they are.

Patricia Kalba, RMC, MMC
Town Clerk
New York State Town Clerks Association 3rd Vice President
Town of Somers
335 Route 202
Somers, New York 10589

914-277-3323
914-277-3960 (fax)
pkalba@somersny.com

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Kim DeLucia

From: Steve Woelfle
Sent: Wednesday, March 5, 2025 10:01 AM
To: Kim DeLucia; Nick DeVito
Cc: Robert Scorrano
Subject: RE: Town Owned Property - Lots 5.15-2-10 and 11

Yes, please proceed.

From: Kim DeLucia <kdelucia@somersny.gov>
Sent: Monday, March 3, 2025 11:56 AM
To: Steve Woelfle <swoelfle@somersny.gov>; Nick DeVito <ndevito@somersny.gov>
Cc: Robert Scorrano <rscorrano@somersny.gov>
Subject: Town Owned Property - Lots 5.15-2-10 and 11

Hi Steve and Nick,

Please refer to your email below from June 10, 2024 and let us know if you still have no objection to the sale of lots 5.15-2-10 and 11.

We had an inquiry today, and Rob wants to add it to the March 13th Town Board meeting agenda for referral.

Thank you,

Kim

Kim DeLucia
Executive Assistant to
Robert Scorrano, Town Supervisor
TOWN OF SOMERS
335 ROUTE 202
SOMERS, NY 10589
Phone: 914-277-3637
Fax: 914-276-0082
WWW.SOMERSNY.COM

From: Steve Woelfle <swoelfle@somersny.com>
Sent: Monday, June 10, 2024 12:28 PM
To: Kim DeLucia <kdelucia@somersny.com>; Teresa Stegner <tstegner@somersny.com>; Nick DeVito <ndevito@somersny.com>; David B. Smith <directorofplanning@somersny.com>
Cc: Robert Scorrano <rscorrano@somersny.com>; Patricia Kalba <pkalba@somersny.com>
Subject: RE: Follow-up - Referrals

Nick and I have no objection to the sale of lots 5.15-2-10 and 11

Steven Woelfle
Town of Somers-Engineering Dept.
Phone: (914) 277-5366
Fax: (914) 277-4093

From: Kim DeLucia <kdelucia@somersny.com>

Sent: Thursday, June 6, 2024 12:49 PM

To: Teresa Stegner <tstegner@somersny.com>; Nick DeVito <ndevito@somersny.com>; David B. Smith <directorofplanning@somersny.com>; Steve Woelfle <swoelfle@somersny.com>

Cc: Robert Scorrano <rscorrano@somersny.com>; Patricia Kalba <pkalba@somersny.com>

Subject: Follow-up - Referrals

Good afternoon,

The following referral was sent out on **1/28/2022**:

1. Request to purchase two parcels from the Town of Somers, Lots 5.15-2-10 and 5.15-2-11 located to the rear of 9 Magnolia Drive

We received responses from the Open Space Committee and the Parks and Recreation Department. The resident is following up to see where this stands.

We need a response from the **Assessor, Highway, and Planning & Engineering**.

Please look into this as soon as possible so we can determine next steps. **Teresa** – if you don't have any issues with selling the properties, please provide a Fair Market Value for each.

Let me know if you have any questions.

Thank you,

Kim

Kim DeLucia
Executive Assistant to
Robert Scorrano, Town Supervisor
TOWN OF SOMERS
335 ROUTE 202
SOMERS, NY 10589
Phone: 914-277-3637
Fax: 914-276-0082
WWW.SOMERSNY.COM

From: Patricia Kalba <pkalba@somersny.com>

Sent: Friday, January 28, 2022 11:54 AM

To: Teresa Stegner <tstegner@somersny.com>; Nick DeVito <ndevito@somersny.com>; Denise Schirmer <dschirmer@somersny.com>; Steve Ralston <sralston@somersny.com>; David B. Smith <directorofplanning@somersny.com>; Steve Woelfle <swoelfle@somersny.com>

Cc: Wendy Getting <wgetting@somersny.com>; Kim DeLucia <kdelucia@somersny.com>

Subject: Referrals

Please find two (2) referrals for your review

1. Request to purchase two parcels from the Town of Somers, Lots 5.15-2-10 and 5.15-2-11 located to the rear of 9 Magnolia Drive
2. Request to donate two parcels to the Town of Somers, Lots 5.19-2-24 and 5.19-2-25 located on Myrtle Drive

Let me know if you have questions. Thank you!

Patty

Patricia Kalba, RMC, CMC

C-TB, TC, TA
TJ
8/12/25

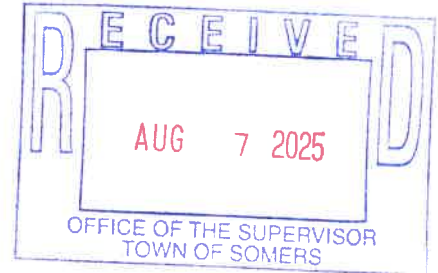
Telephone
(914) 277-3539

FAX
(914) 277-3790

BUILDING DEPARTMENT
Town of Somers
WESTCHESTER COUNTY, N.Y.

**TOWN HOUSE
ANNEX
337 ROUTE 202
SOMERS, NY 10589**

Thomas J. Tooma, Jr.
Building Inspector



MEMO TO: Town Board

FROM: Thomas J. Tooma, Jr.
Building Inspector

RE: Replacement Generator for Police Station

DATE: August 7, 2025

Permission is being requested to replace the existing 35kw diesel generator at the Police Station as the existing one is nearing the end of its career.

It is suggested that the Town purchase a diesel generator from the cooperative bidding site that the Town is a member of with the expectation that the Town contracted electrician will install.

Sent to:
TB, TA, TC
7/31/25 KD



IRONSHORE
A Liberty Mutual Company

Ironshore Environmental
Ironshore Insurance Services LLC.

APPLICATION FOR INSURANCE

Storage Tank Third Party Liability Corrective Action and Cleanup Policy

THIS IS AN APPLICATION FOR A CLAIMS-MADE POLICY. PLEASE REVIEW THE APPROPRIATE POLICY CAREFULLY.

INSTRUCTIONS:

- Please print or type clearly.
- Please answer all questions and those applicable to the coverages requested. If any questions in those sections do not apply, please answer "NA."
- The application must be signed and dated by a duly authorized executive, officer, owner, or principal of the applicant.
- Please submit the following with this application:
 - o Copies of most recent underground storage tank and pipeline leak detection test results for each underground storage tank and any piping that is over 30 years old.
 - o Evidence of Storage Tank Coverage with Retroactive Dates for the expiring policy.
 - o Loss Runs for the past 3 years.

INSURED PARTY INFORMATION:

Named Insured: Town of Somers
Mailing Address: 335 Rte 202, Somers NY 10589

Company is a: ☐ Corporation; ☐ Partnership; ☐ Joint Venture; ☒ Other (please specify) Municipality

1. Are there any additional Named Insureds for the Company to evaluate for coverage? YES ☒ NO. If Yes, list the entities and their relationship to the First Named Insured and include an organizational chart: _____
2. Are there any additional Insureds for the Company to evaluate for coverage? YES ☒ NO. If Yes, list the entities and their relationship to the Named Insured: _____

EXISTING COVERAGE DETAILS:

	Storage Tank Coverage
	Check if none ()
Carrier	IronShore Insurance Co
Limits	1,000,000/1,000,000
Deductible / SIR	5000
Premium	6480
Effective dates	8/6/2024-8/6/2025
Any retroactive dates	

REQUESTED COVERAGE:

	Storage Tank Coverage
Limits	1,000,000/1,000,000
Deductible / SIR	5000
Term	1 year
Any retroactive dates	
Effective dates	8/6/2025-8/6/2026

LOCATION & TANKS INFORMATION:☐ Ironshore Storage Tank Upload Spreadsheet Completed and Attached

OR

☐ Locations and Tank Details Outlined Below**LOCATION INFORMATION:**

Please complete table and questions below (not required if Ironshore Storage Tank Upload Spreadsheet Completed and Attached)

1. Total Number of Locations to be Insured: _____

Location Name	Street address	City	State	Zip Code	Use of Facility	# Tanks at this location
1. Town of Somers HWY	250 Rte 100	Somers	NY	10589	HWY	6
2. Somers Park	80-82 Primrose Str	Somers	NY	10589	Park Rec	2
3. Town of Somers Town House	355 Rte 202	Somers	NY	10589	Admin	2
4. Somers Annex	337 Rte 202	Somers	NY	10589	Admin	1
5. Somers Police	100 PRIMrose	Somers	NY	10589	Police	1
Use of Facility:	<ul style="list-style-type: none">• Gas Station;• Convenience Store;• Airport;• Marina;• Hospital/Med. Center;• Auto Dealer;• Fuel Terminal;• Apartments/Condos;• Manufacturing Facility;• Retail;• School;• Other (please specify)					

(If the above space is inadequate to account for all properties to be covered, please attach a statement of values that includes, at a minimum, the street address, city, state, zip code, location name (if applicable), use of facility, and number of tanks at the location to be scheduled)

2. Are there any sites currently under investigation or remediation? ____YES ☒ ____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
3. Is there a history of leaks or releases at any of the covered locations? ____YES ☒ ____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
4. Has any underground storage tank(s) at any of the covered locations been removed, closed in place or taken out of service? ____YES ____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
5. Are there plans to upgrade or remove a tank(s) at any location over the next year? ____YES ☒ ____NO. If yes, please provide details. _____

LOCATION & TANKS INFORMATION:

☐ Ironshore Storage Tank Upload Spreadsheet Completed and Attached

OR

☐ Locations and Tank Details Outlined Below

LOCATION INFORMATION:

Please complete table and questions below (not required if Ironshore Storage Tank Upload Spreadsheet Completed and Attached)

1. Total Number of Locations to be insured: _____

Location Name	Street address	City	State	Zip Code	Use of Facility	# Tanks at this location
6 Somers Nutrition Dept	98 Primrose Street	Somers	NY	10589	Senior Ctr	2
7. Somers Police Station	100 Primrose Street	Somers	NY	10589	Police	1
8. Somers Town House	335 Rte 202	Somers	NY	10589	Admin	4
9. Somers Library	80 Primrose Street	Somers	NY	10589	Library	3
10. Heritage Hills	8 Heritage Hills	Somers	NY	10589	Emergency Shelter	4
Use of Facility:	<ul style="list-style-type: none"> • Gas Station; • Convenience Store; • Airport; • Marina; • Hospital/Med. Center; • Auto Dealer; • Fuel Terminal; • Apartments/Condos; • Manufacturing Facility; • Retail; • School; • Other (please specify) 					

(If the above space is inadequate to account for all properties to be covered, please attach a statement of values that includes, at a minimum, the street address, city, state, zip code, location name (if applicable), use of facility, and number of tanks at the location to be scheduled

2. Are there any sites currently under investigation or remediation? ____YES x____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
3. Is there a history of leaks or releases at any of the covered locations? ____YES x____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
4. Has any underground storage tank(s) at any of the covered locations been removed, closed in place or taken out of service? ____YES ____NO. If yes, please provide explanation and attach copies of applicable environmental reports. _____
5. Are there plans to upgrade or remove a tank(s) at any location over the next year? ____YES x____NO. If yes, please provide details. _____

STORAGE TANK INFORMATION:

Please complete a separate page for each location (not required if Ironshore Storage Tank Upload Spreadsheet Completed and Attached)

Location Name: _____

UNDERGROUND STORAGE TANK INFORMATION*N/A*

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Wall Type	Tank Const.	Contents	Overfill Protection (Y/N)	Leak Detection	Tank Specific Retro Date	Tank Specific Deductible

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	Leak Detection	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel O = Other (please specify)	N = None ATM = Auto Tank Monitoring GW = Groundwater Monitoring SIA = 3 rd Party Statistical Inventory Analysis IM = Interstitial Monitoring V = Vapor Monitoring TT = Annual Tightness	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

① Location Name: Town of Somers | Highway Dept

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
900	2018	1000	Steel SW			Heating Oil				Y		5000
1A	1999	3000	Steel SW			GAS			Y	Y		5000
1B	1999	3000	Steel SW			Diesel			Y	Y		5000
Master 2	2013	500	Steel SW			Heating Oil				Y		5000
Lube Oil	1980	300	Steel SW			New Oil						50000
Hvor 61L	1980	300	Steel SW			Hydraulic			Y	Y		50000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JP = Jet Fuel A = Antifreeze O = Other (please specify)

Location Name: 2 Town of Somers Library Park 80-82 Primrose Street

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
4	2008	500	ST113 SW			HO				Y		5000
1	1996	2000	ST113 STEEL SW			HO				Y		5000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) ST1 = (ST1-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#3

Location Name: Somers Town House | 355 US. 202 Somers NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2013	330	STI P3 Steel			HO				Y		5000
2	2013	330	STI P3 Steel			HO				Y		5000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#4
Location Name: Somers Annex | 937 US Rte 202

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2013	275	STI P3 STEEL SW			HO				Y		5200

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#5
 Location Name: Somers Police Dept | 100 Primrose St Somers NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2012	330	ST118 STEEL SW			HO				Y		5000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#6

Location Name: Somers Nutrition Dept | 98 Primrose St Somers NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2013	275	ST1B SW			HO				Y		5000
2	2013	275	ST1B SW			HO				Y		5000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (refined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#7

Location Name: Somers Police Dept | 100 Primrose St Somers NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2003	150	SW			Diesel				Y		10000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel P/S = ACT 100 (FRP Clad Steel) STI = (STI-PB) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

8

Location Name: Somers Town House | 335 Rte 202 Somers NY 10589

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2017	120	SW			Propane				Y		10000
2	2017	120	SW			Propane				Y		10000
3	2017	120	SW			Propane				Y		10000
4	2017	120	SW			Propane				Y		10000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P9) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JP = Jet Fuel A = Antifreeze O = Other (please specify)

#9

Location Name: Somers LIBRARY 80 Primrose Street Somers NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2023	1000	S SW			Propane				Y		10000
2	2023	1000	S SW			Propane				Y		10000
3	2023	1000	S SW			Propane				Y		1000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-PB) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

#10
Location Name: Heritage Hills & Heritage Hills Simlars NY

ABOVEGROUND STORAGE TANK INFORMATION

Tank # or ID	Year Installed	Tank Capacity (gallons)	Tank Const.	Base Const.	Diking Const.	Contents	Overfill Protection (Y/N)	Overfill Alarms (Y/N)	Leak Detection (Y/N)	Is Tank in a secure location (Y/N)	Tank Specific Retro Date	Tank Specific Deductible
1	2023	1000	S SW			Propane				Y		10000
2	2023	1000	S SW			Propane				Y		10000
3	2023	1000	S SW			Propane				Y		10000
4	2023	1000	S SW			Propane				Y		10000

PIPING RELATED QUESTIONS FOR EACH TANK LISTED ABOVE

Tank # or ID	Has Pipes (Y/N)?	Is Piping 100% Above Ground? (Y/N)	Piping Wall Type	Piping Constr.	Piping Leak Detection

Wall Type	Construction (specify all that apply)	AST Diking and/or Base Construction	Contents
DW (double) SW (single) R (relined)	F = Fiberglass S = Coated or Bare Steel F/S = ACT 100 (FRP Clad Steel) STI = (STI-P3) Steel Tank Institute T.P. FRP = Fiberglass Reinforced Plastic CPS = Cathodically Protected Steel WS = Welded Steel PL = Plastic V = Vaulted O = Other (please specify)	C = Concrete GR = Gravel E = Dirt / Earth S = Steel containment unit PC = Packed Clay O = Other (please specify)	G = Gasoline D = Diesel K = Kerosene NO = New Oil WO = Waste Oil HO = Heating Oil P = Propane JF = Jet Fuel A = Antifreeze O = Other (please specify)

BUSINESS INFORMATION:

1. Have there been any failed tank tests for storage tanks at facilities related to this submission in the past two years? _____ YES ☒ _____ NO. If yes, please explain: _____

2. Have you in the last five years been prosecuted, or are you currently being prosecuted, for violations of any standard or law relating to the release or threatened release from the location of a regulated substance, hazardous waste or any other pollutant? _____ YES ☒ _____ NO. If yes, please explain: _____

3. Have any claims been made against you during the last five years for cleanup or response action regulated substances, or bodily injury or property damage, resulting from the release of regulated substances, hazardous waste from this location or any other locations owned or operated by you, into the environment? Please provide a brief description of the claim(s) and its disposition. If none, so state. _____ YES ☒ _____ NO. If yes, please explain: _____

4. At the time of signing of this application do you know of any facts or circumstances, which may reasonably be expected to result in a claim being asserted against your company for environmental cleanup or response, or for bodily injury or property damage arising from the release of pollutants into the environment? If none, so state. _____ YES _____ NO. If yes, please explain. _____

WARRANTY:

ACCEPTING THIS APPLICATION DOES NOT BIND THE UNDERWRITER TO COMPLETE, OR THE APPLICANT TO PURCHASE, THE POLICY. IN THE EVENT THERE IS ANY MATERIAL CHANGE IN THE ANSWERS TO THE QUESTIONS OR REPRESENTATIONS OR WARRANTIES HEREIN PRIOR TO THE ISSUANCE DATE OF THE POLICY, WHICH WOULD RENDER THIS APPLICATION FORM INACCURATE OR INCOMPLETE, THE APPLICANT WILL NOTIFY THE INSURER IN WRITING AND, IF NECESSARY, ANY OUTSTANDING QUOTATION MAY BE MODIFIED OR WITHDRAWN.

NOTICE TO ARKANSAS & NEW MEXICO APPLICANTS: "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT, OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON."

NOTICE TO COLORADO APPLICANTS: "IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE, AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AUTHORITIES."

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: "WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT."

NOTICE TO FLORIDA APPLICANTS: "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY IN THE THIRD DEGREE."

NOTICE TO KENTUCKY APPLICANTS: "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME."

NOTICE TO LOUISIANA APPLICANTS: "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON."

NOTICE TO MAINE APPLICANTS: "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS."

NOTICE TO NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE AND MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWINGLY THAT HE/SHE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO OKLAHOMA APPLICANTS – WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY (365: 15-10, 36 §3613.1)

NOTICE TO PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON, FILES A STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT, MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, SUBJECT TO CRIMINAL PROSECUTION AND CIVIL PENALTIES.

NOTICE TO TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

NOTICE TO VERMONT APPLICANT: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH MAY BE A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW YORK APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS (\$5,000) AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATIONS

THE UNDERSIGNED APPLICANT WARRANTS THAT THE STATEMENTS SET FORTH IN THIS APPLICATION AND ITS ATTACHMENTS AND OTHER MATERIALS SUBMITTED TO THE INSURER ARE TRUE AND CORRECT.

THE UNDERSIGNED UNDERSTANDS, AGREES TO, AND ACKNOWLEDGES, THAT THIS POLICY CONTAINS A POLICY AGGREGATE LIMIT OF LIABILITY THAT IS ACCEPTED AND SHARED BY ALL OF THE APPLICANTS AND INSURED'S WHO ARE OR MAY BECOME AN INSURED HEREUNDER. IN VIEW OF THE OPERATION AND NATURE OF THIS SHARED POLICY AGGREGATE LIMIT OF LIABILITY, THE APPLICANT UNDERSTANDS AND AGREES THAT PRIOR TO FILING A CLAIM UNDER THIS POLICY, THE POLICY AGGREGATE LIMIT OF LIABILITY MAY BE EXHAUSTED OR REDUCED BY PRIOR PAYMENTS FOR OTHER CLAIMS UNDER THIS POLICY. AS A RESULT, THERE MAY BE NO AVAILABLE LIMIT TO PAY AN APPLICANT'S OR INSURED'S CLAIM, REGARDLESS OF WHETHER ANY LOSS, BUSINESS INTERRUPTION EXPENSE OR EXTRA EXPENSE HAS BEEN PAID ON SUCH APPLICANT'S OR INSURED'S BEHALF.

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____
Title: _____

Insurance representative: Mark Connelly
Name of firm: Fairfield County Ins Services a Hub International Co
Address: 401 Main Street Ridgefield CT 06877
Telephone number: 203-894-3188
Fax number: 203-431-8789
E-mail address: Mark.Connelly@hubinternational.com

Surplus lines agent (SLA) (for the state where the named insured is domiciled): _____
Address: _____
City: _____
State, ZIP code: _____
Surplus lines license number: _____



TERRORISM COVERAGE ELECTION FORM

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

- ☐ I hereby elect to purchase coverage for "certified acts of terrorism" for the policy period for 3% of the Base Policy Premium.
- ☐ I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from "certified acts of terrorism."

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for "certified acts of terrorism," the premium charge for losses covered by TRIA, and the Company's limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

Sent to:
TB, TC, TH
8/11/25

Telephone
(914) 277-4394

FAX
(914) 277-3788

EMAIL
Finance@Somersny.gov

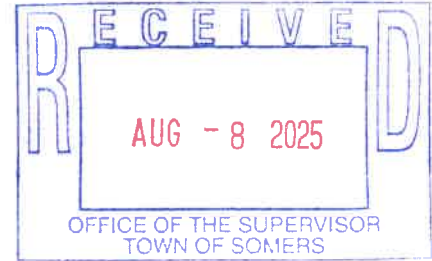
Robert Kehoe
Director of Finance

FINANCE OFFICE

Town of Somers
WESTCHESTER COUNTY, N.Y.




TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589



MEMORANDUM

To: Supervisor and Town Board

CC: Town Clerk

From: Finance Department 

Date: August 8, 2025

Subject: Change in Affordable Care Act ("ACA") Consultant

The Finance Department is requesting a change to the vendor used for our Affordable Care Act (ACA) consulting services. This consultant assists in the preparation of IRS Forms 1095 and 1094 for our employees and IRS, respectively, regarding their health coverage and additionally tracks our compliance with ACA guidelines.

We propose transitioning from our current provider, Alera Group, to Gilroy Kernan & Gilroy ("GKG") on October 1, 2025. Our service from Alera Group has declined since the departure of a key employee to GKG several years ago.

This recommendation is based on our assessment that GKG will offer improved response times and deliver more accurate advice and reporting data, which are critical to maintaining compliance and operational efficiency with the ACA. GKG's fees are slightly less than Alera's.

Please let us know if you have any questions or require further information regarding this requested change.



This ACA Assistance agreement ("Agreement") is made 10/1/25 (the "Effective Date") by and between Town of Somers, (the "Client") and Gilroy Kernan & Gilroy ("GKG").

Whereas Client wishes to obtain the services described in Exhibit I from the GKG on the terms as set forth herein; and

Whereas GKG wishes to provide such services to Client on the terms as set forth herein.

Now, therefore, for good and valuable consideration, the receipt and sufficiency of which is hereby mutually acknowledged and agreed, the parties hereto hereby agree as follows:

1. **Scope of Services to be provided by GKG** GKG will provide the services described on Exhibit I (the "Services") to the Client with respect to the Patient Protection and Affordable Care Act ("ACA").
2. **Fee** Client will pay GKG the fees set forth on Exhibit II, as and when described in Exhibit II. It is acknowledged and understood that Client is solely and exclusively responsible for all taxes, fees and other assessments incurred by it under the ACA.
3. **Term** This Agreement shall remain in effect until the first anniversary of the Effective Date, unless earlier terminated as described below; the term of this Agreement will thereafter automatically be extended for an additional term of one (1) year on each anniversary of the Effective Date, unless either party notifies the other, in writing, of its intention to terminate the Agreement as of the next anniversary of the Effective Date, which notice shall be delivered at least ninety (90) days prior to each anniversary of the Effective Date. The term of this Agreement as extended (if applicable) is referred to herein as the "Term." Notwithstanding the foregoing, the Agreement shall terminate immediately upon (i) breach of the Agreement that is not cured (if susceptible to cure) within ten (10) business days (ii) either party may terminate this Agreement by providing ninety (90) days' advance written notice to the other. Notice of termination must be in writing and delivered by certified mail, return receipt requested or overnight carrier to the party's address of record.
4. **Personnel** GKG is performing its Services as an independent contractor, and neither GKG nor any of its personnel shall be considered employees of the Client for any purpose. GKG will assign its personnel according to the needs of the Client as the GKG determines. GKG retains the right to substitute personnel.
5. **Client's Responsibility** Client will make available such information as may be reasonably requested for GKG to perform the services contemplated herein, in a format as reasonably requested by GKG. Such information will be provided promptly and will be correct and complete. Without in any way limiting any other provision of this Agreement, Client shall be solely and exclusively responsible for the accuracy of all data provided to GKG and shall indemnify GKG and hold the GKG harmless from any claims arising out of or related to the use of inaccurate data, including without limitation data GKG re-formats on behalf of Client that is provided in a format that is inconsistent with GKG's systems.
6. **Not Legal Services** Client acknowledges, understands and agrees that neither GKG nor any consultant providing Services are engaged in the practice of law. The Services are not and shall not be deemed to be the provision of legal, tax, financial or similar advice of any kind. Client hereby represents and confirms that for all legal issues arising out of or related to the Services Client will consult with its own legal counsel and is not relying on the GKG nor any of its employees or agents to provide legal advice. GKG is not responsible for any advice, guidance or support provided to Client by any other entity or third party.

7. **Confidentiality** All Confidential Information (defined below) disclosed hereunder will remain the exclusive and confidential property of the disclosing party. The receiving party shall not disclose the Confidential Information of the disclosing party and will use at least the same degree of discretion and diligence in protecting such Confidential Information as it uses with respect to its own Confidential Information, but in no case less than reasonable care. For these purposes, Confidential Information will include but is not limited to, software, technical processes, trade secrets, functional and technical specifications, designs, drawings, translations, analysis, research, processes, computer programs, beta versions, algorithms, methods, ideas, "know how," and other technical information, materials, plans, projects, and other business information, and User Information; provided, however, that Confidential Information does not include any data or information which the recipient can demonstrate was (a) publicly known through no fault or breach of this Agreement by the recipient; (b) already known to the recipient prior to disclosure by the disclosing party; (c) lawfully disclosed by a third party; (d) independently developed without reference to the Confidential Information; or (e) disclosed pursuant to legal requirement or order. Each party will protect all Confidential Information of the other party with the same degree of care as it uses to avoid unauthorized use, disclosure, publication or dissemination of its own confidential information but in no event less than a reasonable degree of care. Neither party will disclose, release or otherwise make available to any third-party Confidential Information of the other party except in order to perform its obligations pursuant to this Agreement. The confidentiality obligations of each party shall survive the termination of this Agreement.

8. **DISCLAIMERS** GKG HAS TAKEN DUE CARE IN THE DEVELOPMENT OF THE SERVICES CONTEMPLATED HEREIN BASED UPON ITS UNDERSTANDING OF THE REQUIREMENTS OF THE ACA. GKG WILL ENDEAVOR TO REMAIN UPDATED ON NEW DEVELOPMENTS IN THE ACA. GKG IS NOT A LAW FIRM AND DOES NOT OFFER LEGAL SERVICES NOR HIRE LAWYERS TRAINED IN THE INTERPRETATION OF THE LAW. THE SERVICES PROVIDED ARE NOT INTENDED TO, NOR SHOULD IT, SUPERSEDE OR SUPPLANT THE ADVICE AND INTERPRETATIONS OF CLIENT'S LAWYERS, ACTUARIES AND ADVISORS. A CHANGE IN DATA OR ASSUMPTIONS IS LIKELY TO YIELD A DIFFERENT OUTCOME. CLIENT ACKNOWLEDGES, UNDERSTANDS AND AGREES THAT IT AND NOT GKG IS SOLELY AND EXCLUSIVELY RESPONSIBLE FOR ALL ASPECTS OF COMPLIANCE WITH THE ACA.

9. **WARRANTY** THE SERVICES ARE PROVIDED "AS IS." EXCEPT AS EXPRESSLY PROVIDED UNDER THIS AGREEMENT, THE GKG AND ITS AFFILIATES, OFFICERS, DIRECTORS, EMPLOYEES AND AGENTS: (A) DO NOT WARRANT THE ACCURACY, COMPLETENESS, COMPREHENSIVENESS OR CURRENCY OF THE SERVICES; AND (B) EXPRESSLY DISCLAIM ALL WARRANTIES AND CONDITIONS, EXPRESS, IMPLIED OR STATUTORY, INCLUDING, WITHOUT LIMITATION, THE IMPLIED WARRANTIES OR CONDITIONS OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, AND NON-INFRINGEMENT. GKG MAKES NO WARRANTY OR GUARANTEE THAT THE SERVICES PROVIDED WILL BE UNINTERRUPTED, AVAILABLE AT ANY TIME OR FROM A PARTICULAR LOCATION, SECURE OR ERROR-FREE OR THAT ANY SYSTEMS USED BY GKG IN DELIVERING THE CONTEMPLATED SERVICES IS FREE OF VIRUSES OR OTHER POTENTIALLY HARMFUL COMPONENTS.

10. **Limitation of Liability; Indemnification** Neither GKG nor its affiliates, officers, directors, employees or agents shall be liable under any claim, demand or action arising out of or relating to Client's reliance upon the information provided as part of the services contemplated herein. In no event will GKG, its affiliates, officers, directors, employees or agents have any liability for direct, special, incidental, consequential or punitive damages, including, without limitation, damages due to lost profits or business interruption, or other damages, even if they have been advised of the possibility of such loss or damages and whether or not such loss or damages is/are foreseeable and notwithstanding the failure of essential purpose of any limited remedy. Without limiting any of the foregoing terms, GKG's liability in connection with this Agreement shall not exceed, as to any claim, the fee referenced in Exhibit II and actually paid to GKG, (\$7,800). Client agrees to indemnify and hold GKG, its affiliates, officers, directors, employees and agents harmless from any claims, lawsuits, proceedings, costs, attorneys' fees, damages or other losses arising out of or relating to Client's use of the Services.

11. **Counterparts** This Agreement may be executed in any number of counterparts, each of which shall be deemed an original and all of which counterparts taken together shall constitute one and the same instrument. The parties hereto agree that this Agreement and any related documents may be executed by facsimile or digital signature, which will have the same effect as an original signature.

12. **Amendments and Waivers** Any provision of this Agreement may be amended or waived if, and only if, such amendment or waiver is in writing and is signed, in the case of the amendment, by each party to this Agreement or, in the case of a waiver, by the party against whom the waiver is to be effective. No failure or delay in exercising any rights or privilege hereunder shall operate as a waiver thereof. No waiver of any right or privilege in respect to any occurrence or event on one occasion shall be deemed a waiver of such right or privilege in respect of such occurrence or event on any other occasion.

13. **Severability** If any term or provision of this Agreement or the application thereof to any person or circumstances shall, to any extent, be invalid or unenforceable, the remainder of this Agreement, or the application of such term or provision to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected thereby, and each term and provision of this Agreement shall be valid and enforceable to the fullest extent permitted by law. Further, if any provision of this Agreement becomes inconsistent with any present or future law or regulation of any entity having regulatory jurisdiction over it, that provision shall be superseded or amended to conform to such law and regulation, but the remainder of this Agreement shall remain in full force and effect.

14. **Successors and Assigns** This Agreement is binding upon the successors and assigns of the parties hereto. GKG may assign this Agreement to an affiliate or a successor in interest upon written notice to the Client.

15. **Notices.** Whenever any notice may be or is required to be given hereunder, such notice shall be in writing and sent by United States first class mail, postage prepaid; or by overnight delivery service, where receipt is given, and addressed to such party at its last address appearing in the records of the party who is providing the notice; or by e-mailing such person at his, her or its last known e-mail address with a confirmation copy delivered in accordance with this provision.

16. **Governing Law; Jurisdiction** This Agreement shall be governed by the laws of New York, without regard to principles of conflicts of law. Venue for any action under this Agreement shall be in the state or federal courts located in Oneida County, NY. User consents to such jurisdiction and will not challenge jurisdiction on any grounds including without limitation forum non conveniens.

17. **Entire Agreement** This Agreement contains the entire Agreement between GKG and Client related to the subject matter hereof and supersede all prior agreements, proposals or representations, whether written or oral, between the parties relating to the subject matter of this Agreement. All schedules and exhibits hereto are intended to be and hereby are specifically made a part of this Agreement.

18. **Third-Party Beneficiaries** No provision of this Agreement shall confer upon any person, including but not limited to, Clients, other than the parties hereto any rights or remedies hereunder.

Town of Somers

Gilroy Kernan & Gilroy

By: _____

By: _____

Title: _____

Title: _____

Date: _____

Date: _____

Exhibit I: Full ACA Services GKG will provide full tracking and reporting services (see below)

Compliance Review

- Review of current ACA plan for administrative compliance
- Conduct staff training and ACA education, as needed
- Complete analysis and provide recommendations for measurement, administration and stability periods
- Revise compliance procedure as ACA changes

Education on ACA policies and procedures

- Educate on ACA legislation, regulations and procedures
- Draft ACA required policies, as needed
- Update policies and procedures as legislation changes
- Create a recommended action plan for ACA compliance
- Provide ongoing support for questions and concerns
- Review and assign IRS appropriate safe harbor codes for employees

Data Collection:

- Client is responsible for providing data requested in a timely manner

Tracking and Reporting

- Using electronic, web-based ACA software platform designed to comply with mandates
- Advise Client concerning policy for standard measurement, administrative and stability periods
- Consult with Client concerning ACA regulatory tracking and filing requirements
- Track variable employee benefits eligibility using tracking system and payroll information provided by Client
- Software can access historical data and generate reports to meet external audit requirements
- Ensure continuous compliance as federal changes are implemented
- Track eligibility and affordability issues associated with multiple measurement, stability, and administrative periods across complex employee demographics
- Track variable hour/part time employees' hours and provide monthly tracking reports
- Track employee medical insurance waivers
- Produce IRS required 1095 forms
- Electronically file IRS required 1094
- State ACA file as needed

Exhibit II: Full ACA Services: annual \$7,800.00 to be invoiced Quarterly
State forms as needed \$3.00 per form in CA, DC, NJ, MA, RI.
Print and Mail Services are available

Sent to:
TBJC,IA
TS
8/11/25

Telephone
(914) 277-4394

FAX
(914) 277-3788

EMAIL
Finance@Somersny.gov

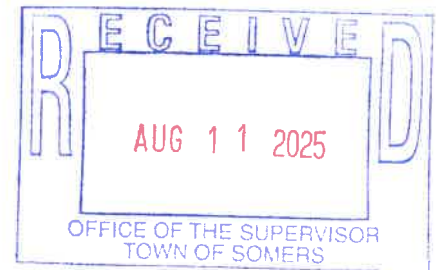
Robert Kehoe
Director of Finance

FINANCE OFFICE

Town of Somers
WESTCHESTER COUNTY, N.Y.



TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589



MEMORANDUM

To: Supervisor and Town Board

From: Finance Department

CC: Town Clerk

Date: August 11, 2025

Subject: Request to Implement a Flexible Spending Account (FSA) Program

The Finance Department is requesting the Town Board's approval to implement a Flexible Spending Account (FSA) program for all full-time, permanent part-time (17hrs/wk), Elected and Police employees of the Town of Somers, starting October 1, 2025.

An FSA allows employees to set aside pre-tax dollars to pay for eligible medical, dental, vision, and dependent care expenses. These can include co-pays, deductibles and a variety of medical products. Also covered are services ranging from dental and vision care to eyeglasses and hearing aids. Participation in the program would be optional and there is no cost to the participants to join.

We recently surveyed full-time staff and found that there was enough interest expressed in this type of benefit to proceed with our expectation that participation will grow over time. Based on that feedback, we believe the FSA program would be a valuable addition to our employee benefits offering.

If approved, we would begin with an initial open enrollment period for the October launch which would cover the last quarter of 2025. Another open enrollment would follow in January 2026 for the calendar year and each January thereafter.

One caveat is the Upfront Annual Election: The Town would be required to reimburse expenses up to the participant's annual election regardless of their account balance. If one terminates employment, we cannot recoup the funds we reimbursed that exceed what the employee had

contributed at that point. We anticipate implementing a rollover to the next calendar year for unspent FSA funds, currently capped at \$660 by the IRS.

FSA's are subject to compliance requirements such as Plan Documents and nondiscrimination testing. We will work with a Third-Party Provider to be compliant. Our recommendation is to use Lifetime Benefit Solutions as our provider who we also use for our Premium Only Plan (POP) which allows us to pre tax health contributions. They will be no additional cost for the nondiscrimination testing since we already use them for POP testing.

Unused FSA funds are forfeited to the Town. Employees can only set their contribution once at the beginning to the Plan Year unless there is a qualifying event. The maximum amount an employee can contribute is set by the Town and subject to IRS regulations. Since Employers own the FSA's, they cannot be maintained when an employee no longer works for the Town so the employee would lose any unspent funds in their FSA account. The carryover doesn't affect the maximum amount of salary reduction contributions that can be made.

We appreciate your consideration and would be happy to provide more information or answer any questions that you may have.

Key Program Details:

- Start Date: October 1, 2025
- Eligible Employees: Full-time, permanent part-time (17 hrs/wk), Police, Library and Elected officials.
- Participation: Voluntary
- Eligible Expenses: Health, dental, vision, and dependent care
- Cost to Town: \$3.50 per participating employee per month with a \$75 monthly minimum (covered by the Town)
- One-time \$450 for new plan documentation

Employer Implementation

FSA, LPFSA, HSA, and HRA Plans



Purpose: The purpose of this document is to collect information required by Lifetime Benefits Solutions to assemble the client business profile in our system.

Definitions:

FSA: Flexible Spending Account

LPFSA: Limited Purpose Flexible Spending Account

LPHRA: Limited Purpose Health Reimbursement Account

HSA: Health Savings Account

HRA: Health Reimbursement Account

Contents:

☐ **General Information**

All clients must complete

☐ **Lifetime Benefit Solutions Authorization for Electronic Funds Transfer Form**

All clients must complete

☐ **Lifetime Benefit Solutions Debit Card Client Settlement Agreement**

For debit card clients only. This form needs to be returned with a voided check or letter from the bank

☐ **FSA Supplemental Information**

Complete only if offering FSA Healthcare, FSA Dependent Care, or LPFSA benefits

☐ **HSA Supplemental Information**

Complete only if offering HSA benefits

☐ **HRA Supplemental Information**

Complete only if offering HRA benefits

Instructions:

- Complete each form
- Return all completed forms to your Sales Consultant

Need help completing the form?

Your dedicated Sales Consultant would be happy to walk you through the process.

Sales Consultant: _____

Address: _____

Phone Number: _____

Email: _____

LifetimeBenefitSolutions.com

General Information

New Client Information

Client Full Legal Name: _____

Client Name (DBA): _____

Client Address: _____

Billing Address: _____ ☐ Same as Client Address

Business Phone Number: _____

Employer Tax ID: _____

Divisions: ☐ Yes ☐ No

Division Names: _____

Is the employer and all divisions part of the same control group? ☐ Yes ☐ No

Is the employer part of an Affiliated Service Group within the meaning of Internal Revenue Code Sec. 414(m)*?

☐ Yes ☐ No *Please consult with your legal or tax representative for guidance or refer to the IRS

Publication at the following link for guidance in determining if the employer is part of an Affiliated Service Group:
irs.gov/pub/irs-tege/epchd704.pdf

Number of Eligible Employees as of beginning of plan year _____

Estimated Number of Participants as of beginning of plan year _____

Reimbursement Products

☐ FSA Healthcare ☐ FSA DCAP ☐ LPFSA ☐ HSA ☐ HRA

Welfare Benefit Group Services

Will LBS be preparing plan documents? ☐ Yes ☐ No

If yes, an additional information packet will be provided during the implementation process.

☐ FSA ☐ HRA ☐ Pre-tax Only

Will LBS be preparing Form 5500 filings? ☐ Yes ☐ No

If yes, an additional information packet will be provided during the imZ process.

Will LBS be providing access to self-service non-discrimination testing? ☐ Yes ☐ No

Non-Discrimination Testing includes (select all that apply):

☐ FSA ☐ HRA ☐ Pre-tax Only ☐ Self-funded ☐ NA

Plan year: Begin _____ End _____

Plan year is typically the 12 month period the employer uses to file the Form 5500, if required.

If not required, it is the 12-month coverage or benefit period. For example, if medical has a deductible, it would be the same 12 month period that the deductibles are calculated under.

Contact Information



Administration (Day-to-Day Contact)

Name/Title: _____ Phone: _____

Email: _____ Web Portal Access: ☐ Yes ☐ No

Compliance (Plan Design, Plan Document, Non-Discrimination Testing)

Name: _____ Phone: _____

Email: _____ Web Portal Access: ☐ Yes ☐ No

Additional Contact

Name: _____ Phone: _____

Email: _____ Web Portal Access: ☐ Yes ☐ No

Broker Information

Firm Name: _____ Firm EIN: _____

Firm Address: _____

Broker Name: _____ Email: _____

Phone Number: _____ Web Portal Access: ☐ Yes ☐ No

Broker Support Staff Name (if applicable): _____

Email: _____ Phone Number: _____

Broker Portal Access: ☐ Yes ☐ No

Debit Card Information

**Important: Please Attach voided check or copy of bank letter*

Lifetime Benefit Solutions Health Spending Card: ☐ Yes ☐ No **If Yes, complete The Bankcorp Bank Form*

Co-Payment Information: If providing the debit card, attach a copy of your benefit schedule that outlines all of your co-pay amounts. If you have multiple medical plans and have a side-by-side comparison, you may attach that as well.

Are there any limits on the debit card (e.g. only medical reimbursed through debit card, not Rx, etc): No ☐ Yes ☐

If Yes, please specify limits: _____

Automatic Claim Transfer:

Medical claims transfer is available with Excellus or Univera coverage depending on HRA plan design.

If available, is the client interested in the Automatic Claim Transfer? ☐ Yes ☐ No

Insurance Provider Information

Lifetime Benefit Solutions uses the following information to substantiate debit card transactions and perform other claim processing functions.

Medical Insurance Carrier Name: _____

Dental Insurance Carrier Name: _____

Vision Insurance Carrier Name: _____

RX Insurance Carrier Name: _____

Lifetime Benefits Solutions

Authorization for Electronic Funds Transfer

This form gives lifetime Benefit Solutions authorization to electronically withdraw funds per information provided.

Authorization Signature	
Authorized Signature:	Date:
Effective Date:	

Section 1 - Administrative Fee Payments

Important: Only one form of payment can be used for ALL administrative fees. If electronic payment is removed, all administrative fees must be paid via check or wire. If electronic payment information is added or changed, all administrative fee withdrawals will be made against the new account provided.

Please check appropriate boxes

- ☐ **New** ACH Bank Account Registration (Check only if no ACH is currently registered for administrative fee payments)
- ☐ **Change** ACH Bank Account information
- ☐ **Authorization to withdraw new Line of Business (LOB) administration fees from the same bank account** debited for your current bill. **For this selection, please leave banking information section blank.**

LBS Administration Company ID 9162865001

Bank Information	
Bank Name:	
Account No:	ABA/RTN No:
Account Type: Checking <input type="checkbox"/> or Savings <input type="checkbox"/>	
Bank Contact:	Title:
E-mail Address:	Telephone No:

Section 2 - Claim Reimbursement Payments

You acknowledge that completion of this section gives Lifetime Benefit Solutions authorization to electronically withdraw funds from the account specified below for claim reimbursement payments made to your participants. In addition, any credits will be issued to this account.

When claim reimbursement checks are mailed to participants, a summary report will also be emailed to a Plan Representative with both the participant check details and the Plan total. The Plan total represents the amount that must be available in your account for this check cycle. Lifetime Benefit Solutions will send this weekly report via mail to:

Send report to (print name): _____

Email report to (print email address): _____

- ☐ Please check if you want to use same banking information as Section 1 (Administration Fee Payments). If not the same, please complete Bank Information below:

LBS Reimbursement Company ID 9162865003

Bank Information	
Bank Name:	
Account No:	ABA/RTN No:
Account Type: Checking <input type="checkbox"/> or Savings <input type="checkbox"/>	
Bank Contact:	Title:
E-mail Address:	Telephone No:

AUTHORIZATION FOR ACH DEBITS / CREDITS

Depositor Name as Shown on Bank Records

Checking Account Number/ Transit Routing Number
(A voided check or spec sheet **must** be attached for this account)

TO: _____

(Bank Address: Street, Box #, City, State and Zip Code)

Depositor authorizes The Bancorp Bank to present automated debits and credits to and from the above listed account as required to perform their responsibilities related to processing Depositor's benefit program. This authorization will remain in effect until revoked by Depositor in writing and until you actually receive such notice. Depositor agrees that you shall be fully protected in honoring any such ACH transaction.

Depositor agrees that your treatment of each such ACH transaction and your rights in respect to it shall be the same as if it were a check signed by Depositor.

I authorize payments to be withdrawn daily or weekly as needed.

Dated this _____ day of _____, 20_____.

Signature of Depositor in Agreement with Bank Records

Please update your ACH filter (on the above reference account) to grant access to The Bancorp Bank. The Bancorp Bank identification number is: **1050006509**.

FSA Plan Design Information

Complete ONLY if offering FSA Benefits

Effective Date:

New Plan: This is a new plan having an effective date of _____. This effective date corresponds with the Medical Plan Year ☐ Yes ☐ No. The initial plan year will be a Short Plan Year ending on _____.

Plan Options: (Choose Grace Period or Carryover)

Benefit	Annual min/max	Employer Contribution (Funded Money)	Grace Period	Carryover
Dependent Care	Min \$ _____ Max \$ _____ No minimum and up to the IRS applicable limit.	<input type="checkbox"/> Yes <input type="checkbox"/> No ER contribution amount: \$ _____ _____% of participant compensation Is the employer contribution a match? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
Health Care	Min \$ _____ Max \$ _____ No minimum and up to the IRS applicable limit.	<input type="checkbox"/> Yes <input type="checkbox"/> No ER contribution amount: \$ _____ _____% of participant compensation Is the employer contribution a match? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No Carryover amount: <input type="checkbox"/> IRS max (as indexed each year) <input type="checkbox"/> Other
Limited Purpose	Min \$ _____ Max \$ _____ No minimum and up to the IRS applicable limit.	<input type="checkbox"/> Yes <input type="checkbox"/> No ER contribution amount: \$ _____ _____% of participant compensation Is the employer contribution a match? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No Carryover amount: <input type="checkbox"/> IRS max (as indexed each year) <input type="checkbox"/> Other

Reimbursement Filing Limit:

Active Employees have the following number of days after plan year end to submit claims for reimbursement:

☐ (LBS Standard) 120 ☐ Other _____ (number of days)

Terminated Employees have the following number of days after termination date to submit claims for reimbursement:

☐ (LBS Standard) 90 ☐ Other _____ (number of days)

Payroll Information:

Date of First Payroll: _____ **Frequency:** _____

Payroll data will be provided:

☐ Via EDI file feed

☐ Lifetime Benefit Solutions will post contributions to accounts each pay day based on employee elections

**Enrollment Method:**

- ☐ Employer input through the Employer Portal
- ☐ Data File using Lifetime Benefit Solutions Enrollment File format
- ☐ Paper Enrollment Forms sent to Lifetime Benefit Solutions

Regardless of enrollment method chosen, timely completion of the plan set-up requires all enrollment data to be entered in the system at least 4 weeks prior to the Effective Date.

Communication Preference:

The employer would like to automatically opt into having members communication preference set to electronic.

- ☐ Yes ☐ No

Miscellaneous:

If the broker will pay portion of the fees associated with this plan, please explain below:

If employer maintains a health reimbursement account (hra), which plan shall pay expenses first:

- ☐ N/A The Employer does not maintain a HRA
- ☐ The HRA under the Employer's Plan
- ☐ This plan (Flexible Spending Account)

Authorized Signatures

We understand and agree to the terms and conditions outlined in this application. We confirm that all information provided on this application is accurate.

Title: _____

Signature: _____

Print Name: _____

Date: _____

Sent to:
TB, TC, TA
TJ
8/11/25

PLANNING AND ENGINEERING DEPARTMENTS

Telephone
(914) 277-5366
Fax
(914) 277-4093

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
www.somersny.com

Steven Woelfle
Principal Engineering Technician
swoelfle@somersny.com



David B. Smith
Town Planner
directorofplanning@somersny.com

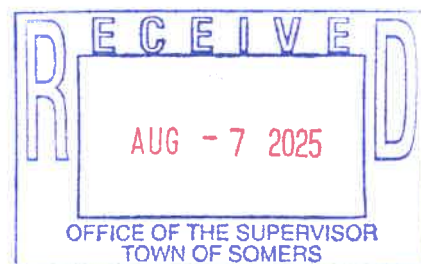
August 7, 2025

To: Hon. Robert Scorrano, Supervisor and
Town Board Members

From: David B. Smith

Re: Draft Ordinance – Solar Energy

Cc: Roland Baroni



Attached please find a draft version of a proposed Solar Energy legislation for your review and consideration. The draft legislation is taken from the New York State Model Ordinance and a review of other surrounding communities. In summary, the use would be limited to schools and other institutions of higher learning located in the R-120 zoning District only after application to the Town Board for a floating zone to be applied to the property. A prospective applicant would then be required to apply to the Planning Board for a special permit and site plan approval.

Please note that procedurally, the Town Board has referred such matters to the Planning Board and Westchester County as part of the Notice of Intent to Act as Lead Agency under SEQR. It will be suggested that the Planning Board, at their next regular meeting in September, provide your honorable Board with a response to Lead Agency but also begin to review the proposed legislation in detail. It is further suggested, that the draft legislation be forwarded to the Building Department for their continued review of this matter.

In addition to the proposed legislation, an Environmental Assessment Form has been provided for use in SEQR circulation. In the meantime, should you have any questions or comments on the above or attached please do not hesitate to reach out to this office.

§170-80 Solar Energy

A. Statutory authority and jurisdiction

1. This Solar Energy Local Law is adopted pursuant to sections 261-263 of NYS the Town Law Sections section 20 of the Municipal Home Rule Law of the State of New York, which authorize the Town of Somers to adopt zoning provisions that advance and protect the health, safety and welfare of the community, and, “to make provision for, so far as conditions may permit, the accommodation of Solar Energy Systems and equipment and access to sunlight necessary therefor.”
2. The authority to issue special use permits pursuant to this section is hereby delegated to the Planning Board.
3. References herein to zoning districts in the Town of Somers are references to such districts as described in this Chapter 170 of the Code of the Town of Somers.

B. Legislative Intent

This Solar Energy Local Law is adopted to advance and protect the public health, safety, and welfare of the Town of Somers by creating regulations for the installation and use of solar energy generating systems and equipment, with the following objectives:

1. To take advantage of a safe, abundant, renewable and non-polluting energy resource;
2. To decrease the cost of electricity to the owners of residential and commercial properties, including single-family houses;
3. To increase employment and business development in the Town of Somers, to the extent reasonably practical, by furthering the installation of Solar Energy Systems; ○
4. To mitigate the impacts of Solar Energy Systems on environmental resources such as important agricultural lands, forests, wildlife, and other protected resources; and
5. To create synergy between solar and sustainability goals established by the Town in their Comprehensive Plan Update.

C. Applicability.

1. The requirements of this section shall apply to all solar energy systems permitted, installed, or modified in the Town of Somers after the effective date of this section, excluding general maintenance and repair.
2. Legally authorized solar energy systems constructed or installed prior to the effective date of this section shall not be required to meet the requirements of this section.
3. Modifications to an existing solar energy system that increase the solar energy system area by more than 20% of the original area of the solar energy system (exclusive of moving any fencing) or fail to comply with zoning shall be subject to this section.
4. All solar energy systems shall be designed, erected, and installed in accordance with all applicable codes, regulations, and industry standards as referenced in the NYS Uniform Fire Prevention and Building Code ("Building Code"), the NYS Energy Conservation Code ("Energy Code"), and the Code of the Town of Somers.

D. General Requirements

1. A building permit shall be required for installation of all solar energy systems.
2. Issuance of permits and approvals by the Planning Board shall include review pursuant to the State Environmental Quality Review Act ECL Article 8 and its implementing regulations at 6 NYCRR Part 617 ("SEQRA").

3. Unless specifically superseded herein, all other chapters of this Code and any other applicable county, state or federal law or regulation shall apply.
4. The Building Inspector or the Planning Board shall have the discretionary authority to call upon any department, agency or employee of the Town for such assistance as shall be deemed necessary, including but not limited to the Bureau of Fire Prevention, and emergency service providers, for reviews and recommendations.

E. Permitting requirements for Tier 1 solar energy systems

1. Roof-mounted solar energy systems. All applications for Tier 1 solar energy systems shall be reviewed and approved by the Building Department and shall be permitted in all zoning districts, and shall be exempt from site plan review under the Town Code, subject to the following conditions for each type of solar energy system:
 - (a) Roof-mounted solar energy systems on buildings shall incorporate the following design requirements:
 - [1] Solar panels on pitched roofs shall be mounted with a maximum distance of eight inches between the roof surface the highest edge of the system.
 - [2] Solar panels on pitched roofs shall be installed parallel to the roof surface on which they are mounted or attached.
 - [3] Solar panels on pitched roofs shall not extend higher than the highest point of the roof surface on which they are mounted or attached.
 - [4] Solar panels on flat roofs shall not extend above the top of the surrounding parapet, or more than 24 inches above the flat surface of the roof, whichever is higher.
 - [5] Glare: All solar panels shall have anti-reflective coating(s).
 - [6] Height: All roof-mounted solar energy systems shall comply with the height limitations in the underlying zoning district. If the installation is proposed to an existing building whose height already meets or exceeds the maximum building height, the system may be installed above the existing maximum roof height but not to exceed 24 inches above the existing maximum height.
2. Building-integrated solar energy systems shall be shown on the plans submitted for the building permit application for the building containing the system.
3. Tier one solar energy systems may also be installed on the roof of an accessory structure provided that collectively such panels shall not exceed 750 square feet and shall comply with zoning requirements for accessory structures.

F. Permitting requirements for Tier 2 solar energy systems (Reserved)

G. Permitting requirements for Tier 3 solar energy systems.

All Tier 3 solar energy systems are permitted through the issuance of a special use permit and site plan approval after an applicant has petitioned the Town Board for the application of a floating zone limited to the following condition: (1) properties must be located in the R-120 District and the use must be associated with a school or other institute of higher learning; (2) the maximum lot size associated with the use shall be no more than 12 acres.

All such Tier 3 solar energy systems shall be subject to the underlying zoning restrictions in the district in which they are proposed as set forth within this chapter, in addition to the following:

- (1) Applications for the installation of Tier 3 solar energy system shall be subject to all rules, referrals, procedures and requirements applicable to special permit and site plan applications including required public hearing.
- (2) Underground requirements. All on-site utility lines shall be placed underground to the extent feasible and as permitted by the serving utility, with the exception of the main service connection at the utility company right-of-way and any new interconnection equipment.
- (3) Vehicular paths. Vehicular paths within the site shall be designed to minimize the extent of impervious materials and soil compaction.
- (4) Signage.
 - (a) No signage or graphic content shall be displayed on the solar energy systems except the manufacturer's name, equipment specification information, safety information, and twenty-four-hour emergency contact information. Said information shall be depicted on the smallest sign feasible and in no case shall the sign be of an area greater than six square feet.
 - (b) As required by National Electric Code (NEC), disconnect and other emergency shutoff information shall be clearly displayed on a light reflective surface. A clearly visible warning sign concerning voltage shall be placed at the base of all pad-mounted transformers and substations. ^ω
- (5) Glare. All solar panels shall have anti-reflective coating(s).
- (6) Lighting. Lighting of the solar energy systems shall be limited to that minimally required for safety and operational purposes and shall be reasonably shielded and downcast from abutting properties.
- (7) Tree-cutting. Removal of existing trees should be minimized to the extent practicable and a mitigation/replanting plan shall be required on and/or off site pursuant to Chapter 156. Mitigation shall be determined based upon the area of disturbance as determined by the Planning Board. In determining any replanting or replacement, the Planning Board may require a pollinator-friendly habitat as an additional means of mitigation.
- (8) Decommissioning.
 - (a) Solar energy systems that have been abandoned and/or not producing electricity for a period of one year shall be removed at the owner's and/or operator's expense.
 - (b) A decommissioning plan [signed by the owner and/or operator of the solar energy system] shall be submitted by the applicant, addressing the following:
 - [1] The cost of removing the solar energy system.
 - [2] The time required to decommission and remove the solar energy system and any ancillary structures.
 - [3] The time required to repair any damage caused to the property by the installation and removal of the solar energy system.
 - [4] A tree restoration plan, restoring the decommissioned area to a condition similar to the condition that existed prior to the installation, recognizing that

mature plantings cannot be easily relocated, the Planning Board may exercise discretion in determining the number, caliper, type and location of plantings in reviewing any such plan, but all plantings shall be native noninvasive species.

- (c) Security/lien. In the event of default upon performance of such decommissioning, after proper notice, the Town shall be entitled to arrange for removal or decommissioning and the cost of same shall constitute a lien on the owner's real property.
- (9) Site plan application. For any solar energy system requiring a special use permit, site plan approval shall be required from the Planning Board. Any site plan application shall, in addition to the material required by § 170-114, include the following information:
- (a) Property lines and physical improvements and features, including driveways, roads, topography, and trees as taken from an updated survey for the project site.
 - (b) Proposed changes to the landscape of the site, grading, vegetation clearing and planting, exterior lighting, and screening vegetation or structures.
 - (c) A one- or three-line electrical diagram detailing the solar energy system layout, solar collector installation, associated components, and electrical interconnection methods, with all National Electrical Code-compliant disconnects and over-current devices.
 - (d) A preliminary equipment specification sheet that documents all proposed solar panels, significant components, mounting systems, and inverters that are to be installed. A final equipment specification sheet shall be submitted prior to the issuance of building permit.
 - (e) Name, address, and contact information of proposed or potential system installer and the owner and/or operator of the solar energy system. Such information of the final system installer shall be submitted prior to the issuance of building permit.
 - (f) Name, address, phone number, and signature of the project applicant, as well as all the property owners, demonstrating their consent to the application and the use of the property for the solar energy system.
 - (g) Property operation and maintenance plan. Such plan shall describe continuing photovoltaic maintenance and property upkeep, such as mowing and trimming.
 - (h) Erosion and sediment control and stormwater management plans prepared to New York State Department of Environmental Conservation standards, if applicable, and to such standards as may be established by the Planning Board.
 - (i) Any additional information required by the Planning Board based upon the on-site conditions.
- (10) Special use permit standards.
- (a) Lot size. The property on which the Tier 3 solar energy system is placed shall meet the lot size requirements of the underlying zoning district. Maximum lot area devoted to Tier 3 solar energy systems shall be 12 acres.
 - (b) Setbacks. The Tier 3 solar energy systems shall comply with the following setback requirements:
 - [1] Each Tier 3 solar energy system shall, at a minimum, a) satisfy the setback provisions as expressly provided in said district, and b) shall not be set back less than the maximum height of the system. Where the Planning Board determines that, consistent with the stated purpose and intent of the

underlying district, an alternate layout would better protect and preserve existing topography, wetlands, steep slopes and view sheds, the Planning Board may increase such setback requirements and require supplemental methods of screening through earth berms, landscaping and other such treatments, or such other condition which provides for a better layout.

- (c) Height. The Tier 3 solar energy system shall not exceed 15 feet in height, except that the Planning Board, in its discretion, may alter same to accommodate vehicle clearance. For purposes of determining height structures shall be subject to the definition of "structure height" in § 170-3.
- (d) Development coverage.
 - [1] The following components of a Tier 3 solar energy system shall be considered included in the calculations for development coverage requirements:
 - [a] Foundation systems, typically consisting of driven piles or monopoles or helical screws with or without small concrete collars.
 - [b] All mechanical equipment of the solar energy system, including any pad-mounted structure for batteries, switchboard, transformers, or storage cells.
 - [c] The horizontal surface area of all panels, arrays, fencing and other components of the Tier 3 solar energy system.
 - [d] Access roads servicing the solar energy system.
 - [2] Development coverage of the Tier 3 solar energy system, as defined above, shall be restricted as follows:
 - [a] Solar energy systems shall not occupy more than 35% of the net lot area.
- (e) Fencing requirements. All mechanical equipment, shall be enclosed and secured as required by NEC and the Planning Board, with a self-locking gate to prevent unauthorized access.
- (f) Vehicular Paths. Vehicular paths within the Facility Area shall be designed in compliance with Uniform Code requirements to ensure emergency access, while minimizing the extent of impervious materials and soil compaction.
- (g) Screening, visibility, and habitat. Solar energy systems shall be required to:
 - [1] Conduct a visual assessment of the visual impacts of the solar energy system on public roadways and adjacent properties. At a minimum, a line-of-sight profile analysis shall be provided. Depending upon the scope and potential significance of the visual impacts, additional impact analyses, including for example a digital viewshed report, may be required to be submitted by the applicant.
 - [2] Submit a screening and landscaping plan to show adequate measures to screen through landscaping, grading, or other means so that views of solar panels and solar energy equipment shall be minimized as reasonably practical from public roadways and adjacent properties to the extent feasible. The screening and landscaping plan shall specify the locations, elevations, height, plant species, and/or materials that will comprise the structures, landscaping, and/or grading

used to screen and/or mitigate any adverse aesthetic effects of the system, following the applicable rules and standards established by the Town.

- [3] Tier 3 solar energy system owners shall develop, implement, and maintain native vegetation to the extent practicable pursuant to a vegetation management plan by providing native perennial vegetation and a foraging habitat beneficial to game birds, songbirds, and pollinators consistent with any requirements of the Agriculture and Markets Law. To the extent practicable, when establishing perennial vegetation and a beneficial foraging habitat, the owners shall use native plant species and seed mixes.

- (11) Ownership changes. If the owner or operator of the solar energy system changes or the owner of the property changes, the special use permit shall remain in effect, provided that the successor owner or operator assumes in writing all of the obligations of the special use permit, site plan approval, and decommissioning plan.

H. Safety.

- (1) Solar energy systems and solar energy equipment shall be certified under the applicable electrical and/or building codes as required.
- (2) Solar energy systems, and access to same, shall be maintained in good working order, in accordance with industry standards, and as may be specified or required by the Planning Board.
- (3) Storage batteries are not permitted as part of this ordinance.

I. Permit time frame and abandonment.

- (1) The special use permit and site plan approval for a solar energy system shall be subject to commencement of construction within 12 months from the date of site plan approval. In the event construction is not completed in accordance with the final site plan, as may have been amended and approved, as required by the Planning Board, within 12 months after commencement of construction, the Planning Board, upon prior written application of the applicant, may extend the time to complete construction for an additional six months. If the applicant fails to achieve substantial completion after 24 months, the approvals shall expire.
- (2) Upon cessation of electricity generation of a solar energy system on a continuous basis for 12 months, the Town may notify and instruct the property owner and operator of the solar energy system to implement the decommissioning plan. The decommissioning plan must be completed within 360 days of notification.
- (3) If the owner and/or operator fails to comply with decommissioning upon any abandonment, the Town may remove of the solar energy system, restore the site in accordance with the decommissioning plan and place a lien on the property for the cost of such undertaking.
- (4) If, at the time of decommissioning, the property owner desires to pursue a utilization of the area different from the restoration set forth in the decommissioning plan, said owner shall pursue a site plan amendment in a timely fashion so that the application, approval and implementation may all be completed before the expiration of the three-hundred-sixty-day period referenced in Subsection I(2). Said application shall comply with then existing zoning regulations.

- J. Enforcement.** Any violation of this solar energy section shall be subject to the same enforcement requirements, including the civil and criminal penalties, provided for in the zoning or land use regulations of Town.

- K. Severability.** The invalidity or unenforceability of any section, subsection, paragraph, sentence, clause, provision, or phrase of the aforementioned sections, as declared by the valid judgment of any court of competent jurisdiction to be unconstitutional, shall not affect the validity or enforceability of any other section, subsection, paragraph, sentence, clause, provision, or phrase, which shall remain in full force and effect.

The following are new definitions proposed to be added to the code.

§170- 3 Definitions

ACTIVE AGRICULTURAL LAND: Land used for a Farm Operation in accordance with Agriculture and Markets Law § 301 – uses of which include production of crops, livestock, and livestock products – within the past five years.

BUILDING-INTEGRATED SOLAR ENERGY SYSTEM: A combination of Solar Panels and Solar Energy Equipment integrated into any building envelope system such as vertical facades, semitransparent skylight systems, roofing materials, or shading over windows, which produce electricity for onsite consumption.

FACILITY AREA: The cumulative land area occupied during the commercial operation of the solar energy generating facility. This shall include all areas and equipment within the facility's perimeter boundary – including the solar energy system, onsite interconnection equipment, onsite electrical energy storage equipment, and any other associated equipment – as well as any site improvements beyond the facility's perimeter boundary such as access roads, permanent parking areas, or other permanent improvements. The facility area shall not include site improvements established for impact mitigation purposes, including but not limited to vegetative buffers and landscaping features.

GLARE: The effect by reflections of light with intensity sufficient as determined in a commercially reasonable manner to cause annoyance, discomfort, or loss in visual performance and visibility in any material respects.

GROUND-MOUNTED SOLAR ENERGY SYSTEM: A Solar Energy System which is secured to the ground via a pole or other mounting system, detached from any other structure that generates electricity for onsite or offsite consumption.

KILOWATT (kW): A unit of power equal to 1,000 watts. The nameplate capacity of residential and commercial solar energy systems may be described in terms of kW.

MEGAWATT (MW): A unit of power equal to 1,000 kW. The nameplate capacity of larger solar energy systems may be described in terms of MW.

NAMEPLATE CAPACITY: A solar energy system's maximum electric power output under optimal operating conditions. Nameplate Capacity may be expressed in terms of Alternating Current (AC) or Direct Current (DC).

NATIVE PERENNIAL VEGETATION: Native wildflowers, forbs, and grasses that serve as habitat, forage, and migratory way stations for Pollinators and shall not include any prohibited or regulated invasive species as determined by the NYS Department of Environmental Conservation.

POLLINATOR: Bees, birds, bats, and other insects or wildlife that pollinate flowering plants, and includes both wild and managed insects.

ROOF-MOUNTED SOLAR ENERGY SYSTEM: A Solar Energy System located on the roof of any legally permitted building or structure that produces electricity for onsite or offsite consumption.

SOLAR ACCESS: Space open to the sun and clear of overhangs or shade so as to permit the use of active and/or passive Solar Energy Systems on individual properties.

SOLAR ENERGY EQUIPMENT: Electrical material, hardware, inverters, conduit, energy storage devices, or other electrical and photovoltaic equipment associated with the production and storage of electricity.

SOLAR ENERGY SYSTEM: The components and subsystems required to convert solar energy into electric energy suitable for use. The term includes, but is not limited to, Solar Panels and Solar Energy Equipment. A Solar Energy System is classified as a Tier 1, Tier 2, or Tier 3 Energy System as follows.

A. Tier 1 Solar Energy Systems include the following:

1. Roof-Mounted Solar Energy Systems on buildings.
2. Building-Integrated Solar Energy Systems.
3. Solar energy systems mounted as a roof on an accessory structure, not exceeding a total roof area of 750 square feet and not constituting a ground-mounted solar energy system as defined herein.

B. Tier 2 Solar Energy Systems: reserved

C. Tier 3 Solar Energy Systems include the following:

1. Ground-Mounted Solar Energy Systems not included under Tier 1 or Tier 2 Solar Energy Systems with a Facility Area of up to 12 acres in size.

SOLAR PANEL: A photovoltaic device capable of collecting and converting solar energy into electricity.

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			
Name of Action or Project: Code amendments to permit solar energy systems			
Project Location (describe, and attach a location map): Town of Somers, NY			
Brief Description of Proposed Action: Town Code amendments to permit solar energy systems			
Name of Applicant or Sponsor: Town of Somers		Telephone: 914-277-5366 E-Mail: directorofplanning@somersny.gov	
Address: 335 Route 202			
City/PO: Somers		State: NY	Zip Code: 10589
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.		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? 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?		Town-wide acres NA acres NA acres	
4. Check all land uses that occur on, are adjoining or near the proposed action: 5. <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agriculture <input checked="" type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): <input checked="" type="checkbox"/> Parkland			

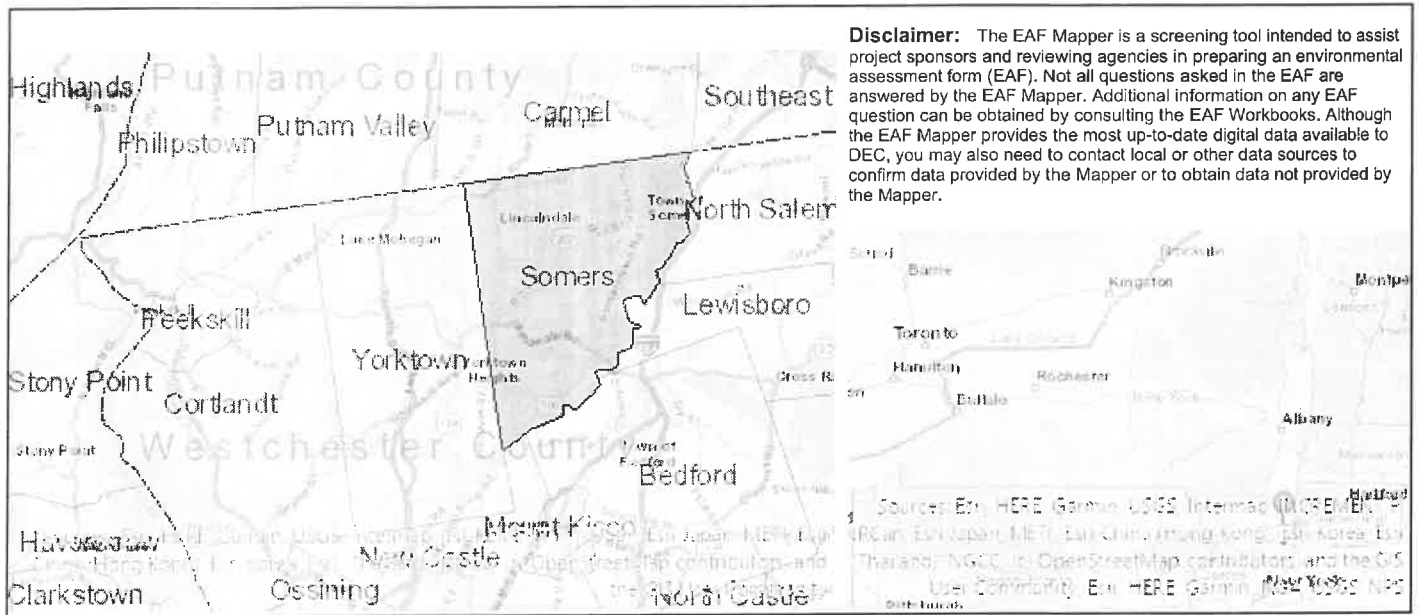
5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ Not applicable	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ Not applicable	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. 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?	<input type="checkbox"/>	<input checked="" 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?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input checked="" type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input checked="" type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" 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? Bald Eagle, Northern Long-e...	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input type="checkbox"/>	<input type="checkbox"/>

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Baldwin Place		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Town of Somers</u> Date: <u>8/7/25</u> Signature: _____ Title: _____		



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	Yes
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Bald Eagle, Northern Long-eared Bat, Least Bittern, Bog Turtle
Part 1 / Question 16 [100 Year Flood Plain]	Yes
Part 1 / Question 20 [Remediation Site]	Yes

email sent to:
TB, IC, TA T&S/11/25



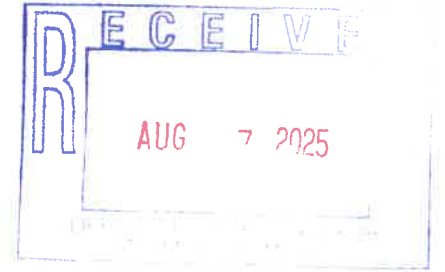
ZARIN &
STEINMETZ LLP

Jody T. Cross, Esq.
jcross@zarin-steinmetz.com
Also admitted in CT

August 7, 2025

Via Hand Delivery

Hon. Robert Scorrano
Supervisor of the Town of Somers
and Members of the Town Board
Town of Somers
335 Route 202
Somers, NY 10589



**Re: Towne Centre at Somers
325 Route 100, Somers, NY
Tax Lot: 17.15-1-13 ("Property")
Petition for the Extension of Water District**

Dear Supervisor Scorrano and Members of the Town Board:

We represent Regency Centers ("Regency"), the owner of the above-referenced Property, commonly known as the Towne Centre at Somers shopping center. We submit this letter in connection with Regency's request that the Town extend the Heritage Hills Special Water District ("Water District") to incorporate the Property ("Application").

In furtherance of Regency's Application, enclosed please find nine copies of the following:

1. Full Environmental Assessment Form, dated August 7, 2025; and
2. Petition for the Extension of Water District, with the following Exhibits:

Exhibit A Metes & Bounds description of the Property

Exhibit B Map, dated August 7, 2025, prepared by JMC Planning Engineering Landscape Architecture & Land Surveying, PLLC ("JMC"), showing the boundaries of the Proposed Extension

Exhibit C Engineering Report, last revised August 7, 2025, prepared by JMC, together with the supporting plans

We further note that the approximate cost of construction to Regency to implement this project is \$20,000.00.

We respectfully request that the Application be placed on the Town Board's August 14, 2025 work session agenda, for the purposes of the Board considering: (i) accepting the Petition; (ii) declaring the Town Board's intent to act as Lead Agency for the purposes of the review

pursuant to the New York State Environmental Quality Review Act; (iii) scheduling a Public Hearing before the Town Board in connection with the Application; and (iv) referring the Application to the Planning Board for concurrent review of the Site Plan and other approvals required to facilitate the construction of the necessary infrastructure.

If you have any questions, or require any additional information, please do not hesitate to contact us. Thank you for your consideration.

Very truly yours,

ZARIN & STEINMETZ LLP

By:



Jody T. Cross

Encls.

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: Heritage Hills Water District Extension		
Project Location (describe, and attach a general location map): 325 Route 100, Somers, NY		
Brief Description of Proposed Action (include purpose or need): The applicant proposes to extend the Heritage Hills Water District to include the noted parcel and to extinguish the existing on site public water supply that is utilizing a drilled well.		
Name of Applicant/Sponsor: Regency Centers	Telephone: (203)863-8200	
	E-Mail: andyalbrecht@regencycenters.com	
Address: 321 Railroad Avenue		
City/PO: Greenwich	State: CT	Zip Code: 06830
Project Contact (if not same as sponsor; give name and title/role): Richard Cordone, PE, Design Manager JMC PLLC	Telephone: (914)273-5225	
	E-Mail: rcordone@jmcpllc.com	
Address: 120 Bedford Road		
City/PO: Armonk	State: NY	Zip Code: 10504
Property Owner (if not same as sponsor):	Telephone:	
	E-Mail:	
Address:		
City/PO:	State:	Zip Code:

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	Application Date (Actual or projected)
a. City Counsel, Town Board, <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees	Town Board	08/07/2025
b. City, Town or Village <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Planning Board or Commission		
c. City, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Westchester County Department of Health	September 2025
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources. i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No iii. Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? ☐ Yes ☒ No

- If Yes, complete sections C, F and G.
- If No, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? ☐ Yes ☒ No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? ☐ Yes ☒ No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) ☒ Yes ☐ No

If Yes, identify the plan(s):

NYC Watershed Boundary

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? ☐ Yes ☒ No

If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. ☒ Yes ☐ No
If Yes, what is the zoning classification(s) including any applicable overlay district?

NS - Neighborhood Shopping District

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? _____

C.4. Existing community services.

a. In what school district is the project site located? Somer Central School

b. What police or other public protection forces serve the project site?

Town of Somers and NYS Police

c. Which fire protection and emergency medical services serve the project site?

Somers Volunteer Fire Department

d. What parks serve the project site?

Fireman's Field, Bailey Park, Reis Park, Koegel Park, Van Tassel Park, Angle Fly Preserve, Lasdon Park, Muscote Farm

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, include all components)? Commercial, New Water Service

b. a. Total acreage of the site of the proposed action? 10.79 acres

b. Total acreage to be physically disturbed? 0.1 acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 10.79 acres

c. Is the proposed action an expansion of an existing project or use? ☐ Yes ☒ No

i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? ☐ Yes ☒ No

If Yes,

i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) _____

ii. Is a cluster/conservation layout proposed? ☐ Yes ☐ No

iii. Number of lots proposed? _____

iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will the proposed action be constructed in multiple phases? ☐ Yes ☒ No

i. If No, anticipated period of construction: 1 months

ii. If Yes:

- Total number of phases anticipated _____

- Anticipated commencement date of phase 1 (including demolition) _____ month _____ year

- Anticipated completion date of final phase _____ month _____ year

- Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
If Yes, show numbers of units proposed.				
	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion	_____	_____	_____	_____
of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes,	
i. Total number of structures _____	
ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length	
iii. Approximate extent of building space to be heated or cooled: _____ square feet	

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes,	
i. Purpose of the impoundment: _____	
ii. If a water impoundment, the principal source of the water: <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> Other specify: _____	
iii. If other than water, identify the type of impounded/contained liquids and their source. _____	
iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres	
v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length	
vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____	

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes:	
i. What is the purpose of the excavation or dredging? _____	
ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?	
<ul style="list-style-type: none"> • Volume (specify tons or cubic yards): _____ • Over what duration of time? _____ 	
iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____	
iv. Will there be onsite dewatering or processing of excavated materials? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, describe. _____	
v. What is the total area to be dredged or excavated? _____ acres	
vi. What is the maximum area to be worked at any one time? _____ acres	
vii. What would be the maximum depth of excavation or dredging? _____ feet	
viii. Will the excavation require blasting? <input type="checkbox"/> Yes <input type="checkbox"/> No	
ix. Summarize site reclamation goals and plan: _____	

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes:	
i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____	

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments?

☐ Yes ☐ No

If Yes, describe:

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?

☐ Yes ☐ No

If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- 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?

☒ Yes ☐ No

If Yes:

i. Total anticipated water usage/demand per day: _____ 5100 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: Heritage Hills Water District
- Does the existing public water supply have capacity to serve the proposal? ☒ Yes ☐ No
- Is the project site in the existing district? ☐ Yes ☒ No
- Is expansion of the district needed? ☒ Yes ☐ No
- Do existing lines serve the project site? ☒ Yes ☐ No

iii. Will line extension within an existing district be necessary to supply the project?

☐ Yes ☒ No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site?

☐ Yes ☒ No

If, Yes:

- 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: _____ gallons/minute.

d. Will the proposed action generate liquid wastes?

☐ Yes ☒ No

If Yes:

i. Total anticipated liquid waste generation per day: _____ gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

iii. Will the proposed action use any existing public wastewater treatment facilities?

☐ Yes ☐ No

If Yes:

- Name of wastewater treatment plant to be used: _____
- Name of district: _____
- Does the existing wastewater treatment plant have capacity to serve the project? ☐ Yes ☐ No
- Is the project site in the existing district? ☐ Yes ☐ No
- Is expansion of the district needed? ☐ Yes ☐ No

<ul style="list-style-type: none"> • Do existing sewer lines serve the project site? _____ • Will a line extension within an existing district be necessary to serve the project? _____ <p>If Yes:</p> <ul style="list-style-type: none"> • Describe extensions or capacity expansions proposed to serve this project: _____ _____ _____ 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? _____</p> <p>If Yes:</p> <ul style="list-style-type: none"> • Applicant/sponsor for new district: _____ • Date application submitted or anticipated: _____ • What is the receiving water for the wastewater discharge? _____ 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):</p> <p>_____</p> <p>_____</p>	
<p>vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____</p> <p>_____</p> <p>_____</p>	
<p>e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point 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?</p> <p>If Yes:</p> <p>i. How much impervious surface will the project create in relation to total size of project parcel?</p> <p style="margin-left: 40px;">_____ Square feet or _____ acres (impervious surface)</p> <p style="margin-left: 40px;">_____ Square feet or _____ acres (parcel size)</p> <p>ii. Describe types of new point sources. _____</p> <p>_____</p> <p>iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?</p> <p>_____</p> <p>_____</p> <ul style="list-style-type: none"> • If to surface waters, identify receiving water bodies or wetlands: _____ _____ • Will stormwater runoff flow to adjacent properties? _____ 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>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?</p> <p>If Yes, identify:</p> <p>i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)</p> <p>_____</p> <p>ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)</p> <p>_____</p> <p>iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)</p> <p>_____</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit?</p> <p>If Yes:</p> <p>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)</p> <p>ii. In addition to emissions as calculated in the application, the project will generate:</p> <ul style="list-style-type: none"> • _____ Tons/year (short tons) of Carbon Dioxide (CO₂) • _____ Tons/year (short tons) of Nitrous Oxide (N₂O) • _____ Tons/year (short tons) of Perfluorocarbons (PFCs) • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆) • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs) • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs) 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

<p>h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate methane generation in tons/year (metric): _____</p> <p>ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____</p>			
<p>i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____</p>			
<p>j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. When is the peak traffic expected (Check all that apply): <input type="checkbox"/> Morning <input type="checkbox"/> Evening <input type="checkbox"/> Weekend <input type="checkbox"/> Randomly between hours of _____ to _____</p> <p>ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____</p> <p>iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____</p> <p>iv. Does the proposed action include any shared use parking? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____</p> <p>vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Estimate annual electricity demand during operation of the proposed action: _____</p> <p>ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____</p> <p>iii. Will the proposed action require a new, or an upgrade, to an existing substation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>l. Hours of operation. Answer all items which apply.</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7AM-5PM • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> <td style="width: 50%; vertical-align: top;"> <p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ Hours of operation vary by tenant • Saturday: _____ • Sunday: _____ • Holidays: _____ </td> </tr> </table>		<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7AM-5PM • Saturday: _____ • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ Hours of operation vary by tenant • Saturday: _____ • Sunday: _____ • Holidays: _____
<p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ 7AM-5PM • Saturday: _____ • Sunday: _____ • Holidays: _____ 	<p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ Hours of operation vary by tenant • Saturday: _____ • Sunday: _____ • Holidays: _____ 		

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p>	
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>n. Will the proposed action have outdoor lighting? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>_____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p> <p>_____</p> <p>_____</p>	
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p> <p>_____</p>	
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ tons per _____ (unit of time) • Operation : _____ tons per _____ (unit of time) <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: _____ • Operation: _____ <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • Construction: _____ • Operation: _____ 	

s. Does the proposed action include construction or modification of a solid waste management facility? ☐ Yes ☒ No

If Yes:

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 treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? ☐ Yes ☒ No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? ☐ Yes ☐ No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

- ☐ Urban ☒ Industrial ☐ Commercial ☒ Residential (suburban) ☐ Rural (non-farm)
☒ Forest ☐ Agriculture ☐ Aquatic ☒ Other (specify): Office, Retail, Municipal

ii. If mix of uses, generally describe: _____

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	7.88	7.88	0
• Forested	0	0	0
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	0	0	0
• Agricultural (includes active orchards, field, greenhouse etc.)	0	0	0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	0	0	0
• Non-vegetated (bare rock, earth or fill)	0	0	0
• Other Describe: <u>Landscaped Areas</u>	2.91	2.91	0

c. Is the project site presently used by members of the community for public recreation? ☐ Yes ☒ No
i. If Yes: explain: _____

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? ☒ Yes ☐ No
If Yes,
i. Identify Facilities:
Somers Middle School (+/- 1,500 feet from the core retail area) _____

e. Does the project site contain an existing dam? ☐ Yes ☒ No
If Yes:
i. Dimensions of the dam and impoundment:
• Dam height: _____ feet
• Dam length: _____ feet
• Surface area: _____ acres
• 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
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? ☐ Yes ☒ No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____

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? ☐ Yes ☒ No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: ☐ Yes ☐ No
☐ Yes – Spills Incidents database 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): _____
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____

v. Is the project site subject to an institutional control limiting property uses? ☐ Yes ☒ No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? ☐ Yes ☐ No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ >6 feet

b. Are there bedrock outcroppings on the project site? ☐ Yes ☒ No
If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site:

Ub	65 %
ChB	17 %
Ff and other	18 %

d. What is the average depth to the water table on the project site? Average: _____ 0 - 15 feet

e. Drainage status of project site soils: ☒ Well Drained: _____ 93 % of site
☒ Moderately Well Drained: _____ 2 % of site
☒ Poorly Drained _____ 5 % of site

f. Approximate proportion of proposed action site with slopes: ☒ 0-10%: _____ 90 % of site
☒ 10-15%: _____ 10 % of site
☐ 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? ☐ Yes ☒ No
If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? ☐ Yes ☒ No

ii. Do any wetlands or other waterbodies adjoin the project site? ☒ Yes ☐ No
If Yes to either i or ii, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? ☒ Yes ☐ No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

• Streams:	Name _____	Classification _____
• Lakes or Ponds:	Name _____	Classification _____
• Wetlands:	Name Off site local and ACOE	Approximate Size 20+
• Wetland No. (if regulated by DEC)	E-1	

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

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? ☒ Yes ☐ No
If Yes:
i. Name of aquifer: Principal Aquifer

<p>m. Identify the predominant wildlife species that occupy or use the project site:</p> <p>Common suburban mammals _____</p> <p>_____</p>	
<p>n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe the habitat/community (composition, function, and basis for designation): _____</p> <p style="margin-left: 20px;">ii. Source(s) of description or evaluation: _____</p> <p style="margin-left: 20px;">iii. Extent of community/habitat:</p> <ul style="list-style-type: none"> • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres 	
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing (endangered or threatened): _____</p> <p>Northern Long-eared Bat, Least Bittern</p> <p>_____</p>	
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Species and listing: _____</p> <p>_____</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, give a brief description of how the proposed action may affect that use: _____</p> <p>_____</p>	
<p>E.3. Designated Public Resources On or Near Project Site</p>	
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="margin-left: 20px;">i. If Yes: acreage(s) on project site? _____</p> <p style="margin-left: 20px;">ii. Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature</p> <p style="margin-left: 20px;">ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____</p> <p>_____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. CEA name: _____</p> <p style="margin-left: 20px;">ii. Basis for designation: _____</p> <p style="margin-left: 20px;">iii. Designating agency and date: _____</p>	

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes: i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District ii. Name: <u>Somers Hamlet Historic District</u>	
iii. Brief description of attributes on which listing is based: _____	
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
g. Have additional archaeological or historic site(s) or resources been identified on the project site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes: i. Describe possible resource(s): _____ ii. Basis for identification: _____	
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes: i. Identify resource: _____ ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____ iii. Distance between project and resource: _____ miles.	
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes: i. Identify the name of the river and its designation: _____ ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? <input type="checkbox"/> Yes <input type="checkbox"/> No	

F. Additional Information

Attach any additional information which may be needed to clarify your project.

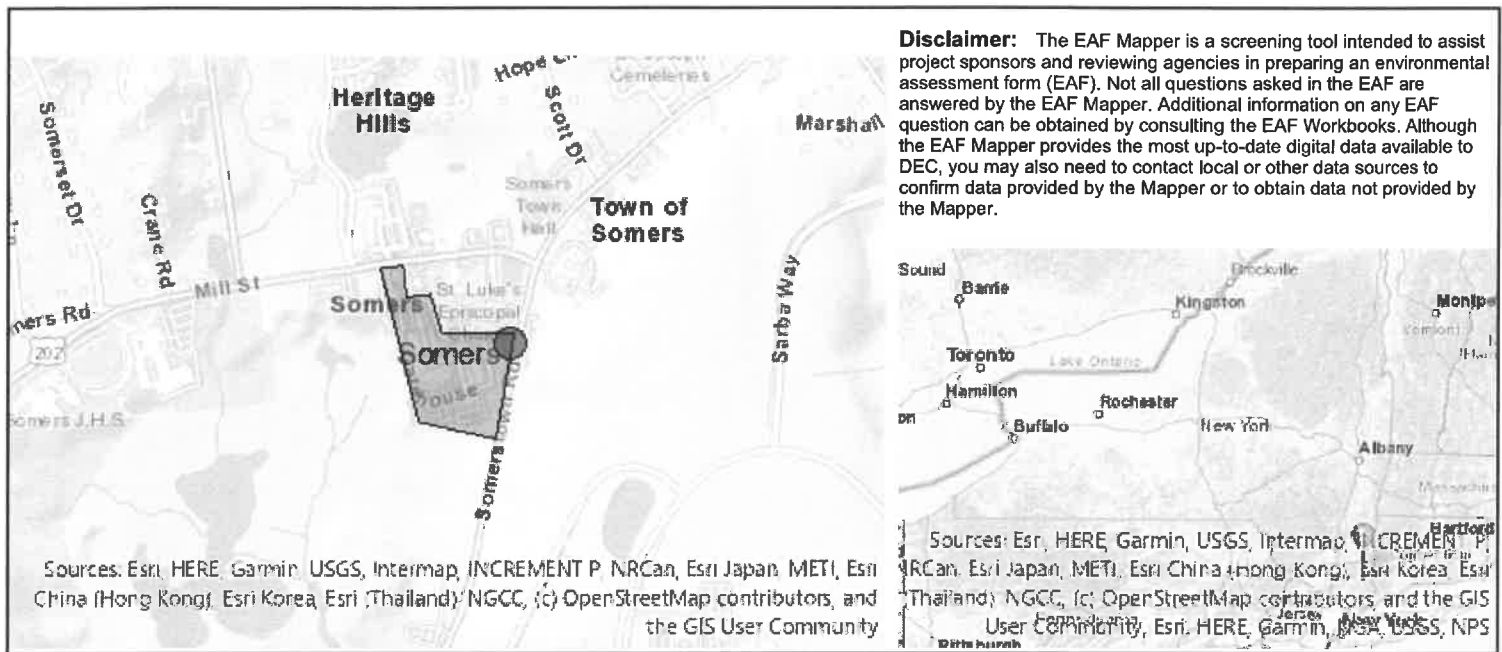
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Richard Cordone, PE JMC for Applicant Date 08/07/2025

Signature  Title Design Manager



B.1.i [Coastal or Waterfront Area]	No
B.1.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Yes - Digital mapping data are not available for all Special Planning Districts. Refer to EAF Workbook.
C.2.b. [Special Planning District - Name]	NYC Watershed Boundary
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]	No
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.h.ii [Surface Water Features]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
E.2.h.iii [Surface Water Features]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
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.l. [Aquifers]	Yes

E.2.i. [Aquifer Names]	Principal Aquifer
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	Yes
E.2.o. [Endangered or Threatened Species - Name]	Northern Long-eared Bat, Least Bittern
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]	Somers Hamlet Historic District
E.3.f. [Archeological Sites]	Yes
E.3.i. [Designated River Corridor]	No

STATE OF NEW YORK
TOWN OF SOMERS

In the Matter of the Extension of
“Heritage Hills Special Water District”
in the
Town of Somers, County of Westchester, and
State of New York

**PETITION FOR
EXTENSION OF
WATER DISTRICT**

**TO THE TOWN BOARD OF THE TOWN OF SOMERS,
COUNTY OF WESTCHESTER, STATE OF NEW YORK:**

1. **REGENCY CENTERS (“Petitioner”)**, being the owner of all of the taxable real property situated in the proposed expansion area of the Heritage Hills Special Water District (**“Water District”**) described herein, and owning in the aggregate all of the assessed valuation of all of the taxable real property situated in the proposed expansion area as shown on the latest completed assessment roll in the Town of Somers, County of Westchester, State of New York (**“Town”**), does hereby petition the Town Board, pursuant to New York Town Law Sections 190 and 190-a, for the expansion of the Water District (**“Proposed Expansion”**) covering the property designated on the Town Tax Map as Section 17.15, Block 1, Lot 13, and further described in the annexed **Exhibit “A” (“Petitioner’s Property”)**. There are no resident owners of any taxable real property in the Proposed Expansion area. Petitioner’s Property is situated wholly within the Town, and is outside of any city or incorporated village and outside of any water district or extension thereof. Accompanying this Petition and submitted herewith as **Exhibit “B”** is a Map, prepared by JMC Planning, Engineering, Landscape Architecture & Land Surveying, PLLC (**“JMC”**), consulting engineers, duly licensed by the State of New York, showing the boundaries of the Proposed Extension (See “Heritage Hills Water District Expansion Map, Drawing No. D-1,” prepared by JMC, dated August 7, 2025 (**“Map”**), Exhibit “B”).

2. Accompanying this Petition and submitted herewith as **Exhibit “C”** is an Engineering Report – Water Connection, last revised August 7, 2025 (“**Report**”), together with the supporting plans (“**Plans**”), which show the existing water line the proposed connection thereto, as well as the location and general description of all other public works (*See* Report and Plans, Exhibit “C”).

3. It is proposed that said water flows from the plant owned and operated by Veolia North America (“**Veolia**”) through water mains into the Proposed Expansion area of the Water District. Petitioner has been in discussions with Veolia and anticipates receipt of a letter confirming that Veolia will supply domestic water to this project and that Veolia has adequate pressure and supply to do so.

4. Petitioner’s Property is presently improved as a shopping center, known as the Towne Centre at Somers, with ±76,000 square feet of commercial structures, comprising retail, office, and service uses. It has frontage along New York State Route 100 and US 202. Petitioner’s Property is located in the Town’s Neighborhood Shopping (NS) Zoning District, and within the Town’s Groundwater Protection Overlay District (GPOD).

5. The Proposed Extension is desirable and in the public interest because in order to comply with the Regulation of Part 5 of the New York State Sanitary Code, upgrades are required to the existing Public Water Supply at Petitioner’s Property. These upgrades have a substantial financial burden to design and construct as well as to manage into the future. It has been determined that it is in the best interest of Petitioner to abandon this existing public water supply that they manage themselves and to connect to the existing Public Water Supply that borders Petitioner’s Property.

6. Pursuant to the provisions of N.Y. Town Law Section 202(2), Petitioner requests that the expense of expansion and construction of the Proposed Expansion shall be borne by local assessment upon the lands which the Town Board shall determine and specify to be especially benefited by the improvement, so much upon and from each as shall be in just proportion to the amount of benefit which the improvement shall confer upon the same. Petitioner requests that the proposed benefit formula for all charges relating to the District be in conformance with a standard that is acceptable to all parties, including the Town, Veolia, and the Petitioner.

7. There will be no public monies expended in connection with the expansion and construction of the Proposed Expansion. As is customary in District expansion, all costs in connection with the Proposed Expansion will be borne by the Petitioner, in a manner contemplated in the Map, Plans, and Report and agreed to by the parties, which may include yearly capital assessments, sewer rents, or other agreed-upon methods.

8. This Petition is signed and acknowledged in the same manner as a deed to be recorded, as set forth on the pages attached hereto and submitted herewith.

[Intentionally left blank]

WHEREFORE, your Petitioner respectfully submits this Petition for further consideration in accordance with applicable law, and requests the Town Board to make such determinations as it deems just and proper, and take all actions provided by law, to provide sewer service to the Petitioner's Property.

Dated: Somers, New York
August 7, 2025

Respectfully submitted,

REGENCY CENTERS

By:

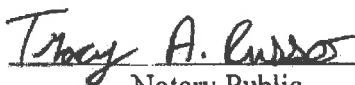

Andrew Albrecht

STATE OF NEW YORK, COUNTY OF WESTCHESTER ss:

On the 7th day of August, 2025, before me, the undersigned, a notary public in and for said state, personally appeared

Andrew Albrecht, of REGENCY CENTERS

personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.



Notary Public

TRACY A. RUSSO

Notary Public, State of New York

No. 01RU6364241

Qualified in Westchester County

Commission Expires 9/11/2029

SCHEDULE A

EXHIBIT A

DESCRIPTION OF PARCEL 1

Parcel 1 – is the parcel of land located in the Town of Somers, County of Westchester, State of New York described as follows:

BEGINNING at a point on the westerly side of Somerstown Turnpike at the dividing point of lands leased to Landlord and lands of Episcopal Church of Somers;

THENCE southerly along westerly side of Somerstown Turnpike South 22 degrees 01 minutes 00 seconds West 150.00 feet;

THENCE westerly North 76 degrees 43 minutes 10 seconds West 121.35 feet;

THENCE southerly South 37 degrees 24 minutes 45 seconds West 196.36 feet;

THENCE westerly North 82 degrees 04 minutes 50 seconds West 427.56 feet;

THENCE northerly North 2 degrees 16 minutes 40 seconds West 790.16 feet to the southerly side of Somers Road, a/k/a Route 202;

THENCE easterly along Somers Fire District;

THENCE southerly South 5 degrees 18 minutes 20 seconds West 204.49 feet;

THENCE easterly South 85 degrees 32 minutes 10 seconds East 149.86 feet to lands reserved to the Episcopal Church of Somers;

THENCE southerly South 5 degrees 21 minutes 02 seconds East 260.00 feet;

THENCE easterly along Episcopal Church South 77 degrees 59 minutes 36 seconds East 275.00 feet and South 76 degrees 43 minutes 10 seconds East 184.93 feet to point of BEGINNING, for a total of 6.712 ac.

EXHIBIT B

DESCRIPTION OF PARCEL 2

Parcel 2 – is the parcel of land located in the Town of Somers, County of Westchester, State of New York described as follows:

BEGINNING at a point in the westerly side of Somerstown Turnpike (also known as New York Route 100) said point is located 520.68 plus or minus feet along said westerly line of Somerstown Turnpike in a southerly direction from the intersection of said westerly line of Somerstown Turnpike with the southerly right-of-way line of Peekskill Road(also known as New York Route 116 & 202;

THENCE southerly along westerly side of Somerstown Turnpike South 22 degrees 01 feet 00 seconds West 150.00 feet to the point of beginning; THENCE

1. South 22 degrees 01 minutes 00 seconds West along said westerly line of Somerstown Turnpike (Route 100) 466.69 feet; THENCE
2. South 22 degrees 46 minutes 10 seconds West along said westerly line of Somerstown Turnpike(Route 100) 53.11 feet; THENCE
3. North 66 degress 03 minutes 07 seconds West, 500.00 feet; THENCE
4. North 02 degrees 16 minutes 40 seconds est 209.84 feet; THENCE
5. South 82 degrees 04 minutes 50 seconds East, 427.50 feet; THENCE
6. North 37 degrees 24 minutes 45 seconds East, 196.36 feet; THENCE
7. North 76 degrees 43 minutes 10 seconds, West 121.35 feet to the point of beginning for a total of 4.051 acres.

ENGINEERING REPORT – WATER DISTRICT EXTENSION

TOWN CENTRE AT SOMERS

**325 ROUTE 100
TOWN OF SOMERS
WESTCHESTER COUNTY, NEW YORK**

Prepared for:

Regency Centers, Inc.
321 Railroad Avenue
Greenwich, CT 06830

Prepared by:



JMC Project 16059-1

Date:

August 7, 2025



<https://jmcpc.sharepoint.com/sites/16059/Shared Documents/Admin/Somers Water Report 08-07-2025.docx>

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	B. Proposed System	2
III.	WATER DISTRICT CAPACITY	2
<u>APPENDICES</u>	<u>DESCRIPTION</u>	
A.	Site Location Map	
B.	Water Service Connection Plan	

I. INTRODUCTION

This Engineering Report has been prepared for the 10.79 acre Town Centre at Somers site, located in the Town of Somers, Westchester County, New York. The site is bordered by Somers Road (Route 202) to the North, Somers Town Turnpike (Route 100) to the east, and the Somers Crossing development to the South. This report has been prepared for the Town of Somers review and approval.

The Towne Centre at Somers seeks to expand the existing Heritage Hills Water District to construct a water service connection to the neighboring Somers Crossing development that is within the current Heritage Hills Water District operated by Veolia. The Somers Crossing development has installed an 8" Watermain along the western edge of the Towne Centre at Somers site. Our site will connect to this 8" main with a new 2" service connection as coordinate with Veolia. The proposed water improvements will serve the site as a whole and result in the abandonment of the existing on site public water supply.

II. WATER SERVICE CONNECTIONS

A. Existing System

The site is currently served under a NYS Public Water Supply, PWS 590683. This public water supply is currently operated by the shopping center's owner Regency. It treats approximately 5,100 gallons per day based upon water records that are taken daily and were reviewed by our office.

There is an existing on site well that pumps the water into the main existing building where the water is treated and ultimately distributed throughout the site.

B. Proposed System

The proposed water connection to the Somers Crossing Development will provide water to existing buildings on site from a new 2" water service connection from the existing 8" water main. A new water meter pit is proposed in accordance with Veolia standards to house a water meter. After the water meter, the water will continue to the building where a reduced pressure zone (RPZ) backflow preventer will be installed to comply with Westchester County Department of Health Department regulations prior to connecting to the site's existing water distribution system.

The existing on site well will be abandoned in compliance with Westchester County Department of Health and New York State Department of Environmental Conservation requirements and the existing Public Water Supply will be extinguished.

III. WATER DISTRICT CAPACITY

The applicant has been communicating with Veolia, the operator of the Heritage Hill Water District and they have confirmed sufficient excess capacity to supply the anticipated demand of 5,100 gallons of water per day without any required upgrades to their current system.

APPENDIX A
SITE LOCATION MAP



TOWNE CENTER AT SOMERS

325 ROUTE 100

TOWN OF SOMERS, NEW YORK

SITE LOCATION MAP

DATE: 06/21/2016

JMC PROJECT: 16059

FIGURE: 01

SCALE: 1" = 1000'



120 BEDFORD RD
ARMONK
NY 10504

(914) 273-5225
fax 273-2102

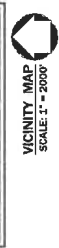
JMCP LLC.COM



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APPENDIX B

WATER SERVICE CONNECTION PLAN

[illegible]

202

HERITAGE HILLS



Sent to:
TB, TC, TA
TB
8/11/25

At a meeting of the Town Board of the Town of Somers at the Town Hall, 335 Route 202, Somers, New York in the Town of Somers, Westchester County, New York, on the 14th day of August, 2025, at 7:00 p.m.

P R E S E N T :

Hon. Robert Scorrano
Anthony Ciriaco
William Faulkner
Richard Clinchy
Thomas Garrity

-----X
In the Matter of the Extension of the Heritage Hills Special Water District in the Town of Somers, Westchester County, New York, pursuant to Article 12-a of the Town Law.

ORDER CALLING
PUBLIC HEARING

-----X
WHEREAS, a map, plan and report have been prepared by Woodard and Curran in such manner and in such detail as has heretofore been determined by the Town Board relating to the extension of the Heritage Hills Special Water District, and

WHEREAS, said map, plan and report have been duly filed in the office of the Town Clerk of said Town, and

WHEREAS, said map, plan and report have been prepared by an engineer, duly licensed by the State of New York, showing the boundaries of the proposed extension and a general plan of the water system connection, and

WHEREAS, said map shows the transmission mains and appurtenant facilities to be connected to the existing water mains, and

WHEREAS, the boundaries of the proposed extension to said district to be known as the "295 Route 100 Extension" are as follows:

SEE SCHEDULE A

WHEREAS, the cost of the improvements, including professional fees, will be paid for by the Town, and

WHEREAS, the cost to the property owner will be the cost to connect a service line to the newly installed water main and the on-going fees^o charged for water consumption, and

WHEREAS, said map, plan and report describing said improvements remain on file in the Town Clerk's office and are available for public inspection during normal business hours.

NOW, on motion of Councilman _____, seconded by Councilman _____, it is hereby

ORDERED, that the Town Board of the Town of Somers shall meet and hold a public hearing at the Somers Town Hall, 335 Route 202 in said Town on the ____ day of _____, 2025, at 7:00 p.m. in that day to consider said map, plan and report and to hear all persons interested in the subject thereof concerning the same and to take such action thereon as is required or authorized by law.

The adoption of the foregoing order was duly put to vote, and on a roll call the vote was as follows:

Hon. Robert Scorrano	voting Aye
Anthony Ciriaco	voting Aye
William Faulkner	voting Aye
Richard Clinchy	voting Aye
Thomas Garrity	voting Aye

and the order was thereupon declared duly adopted.

Dated: Somers, NY
August 14, 2025

BY ORDER OF THE TOWN BOARD
TOWN OF SOMERS

Patricia Kalba, *Town Clerk*

SCHEDULE A

1. 17.18-1-1.2

o

At a meeting of the Town Board of the Town of Somers at the Town Hall, 335 Route 202, Somers, New York in the Town of Somers, Westchester County, New York, on the 14th day of August, 2025, at 7:00 p.m.

P R E S E N T :

Hon. Robert Scorrano
Anthony Ciriaco
William Faulkner
Richard Clinchy
Thomas Garrity

-----X

In the Matter of the Extension of the Heritage Hills Special Sewer District in the Town of Somers, Westchester County, New York, pursuant to Article 12-a of the Town Law.

ORDER CALLING
PUBLIC HEARING

-----X

WHEREAS, a map, plan and report have been prepared by Woodard and Curran in such manner and in such detail as has heretofore been determined by the Town Board relating to the extension of the Heritage Hills Special Sewer District, and

WHEREAS, said map, plan and report have been duly filed in the office of the Town Clerk of said Town, and

WHEREAS, said map, plan and report have been prepared by an engineer, duly licensed by the State of New York, showing the boundaries of the proposed sewer district and a general plan of the sewer system connection, and

WHEREAS, said map shows the transmission mains and appurtenant facilities to be connected to the existing sewer mains, and

WHEREAS, the boundaries of the proposed extension to said district to be known as the "295 Route 100 Extension" are as follows:

SEE SCHEDULE A

WHEREAS, the cost of the improvements, including professional fees, will be paid for by the Town, and

WHEREAS, the cost to the property owner will be the cost to connect a service line to the newly installed sewer main and the on-going fees charged for sewer disposal, and

WHEREAS, said map, plan and report describing said improvements remain on file in the Town Clerk's office for public inspection during normal business hours.

NOW, on motion of Councilman _____, seconded by Councilman _____, it is hereby

ORDERED, that the Town Board of the Town of Somers shall meet and hold a public hearing at the Somers Town Hall, 335 Route 202 in said Town on the ____ day of _____, 2025, at 7:00 p.m. in that day to consider said map, plan and report and to hear all persons interested in the subject thereof concerning the same and to take such action thereon as is required or authorized by law.

The adoption of the foregoing order was duly put to vote, and on a roll call the vote was as follows:

Hon. Robert Scorrano	voting Aye
Anthony Ciriaco	voting Aye
William Faulkner	voting Aye
Richard Clinchy	voting Aye
Thomas Garrity	voting Aye

and the order was thereupon declared duly adopted.

Dated: Somers, NY
August 14, 2025

BY ORDER OF THE TOWN BOARD
TOWN OF SOMERS

Patricia Kalba, *Town Clerk*

SCHEDULE A

1. 17.18-1-1.2

Sent to: TB, A, TC 7/29/25 KD
Kim DeLucia

From: Alan Sorkowitz
Sent: Friday, July 11, 2025 2:16 PM
To: Kim DeLucia
Cc: Robert Scorrano; Rich Auerbach
Subject: Re: Affordable Housing Board - Expiring Term Letter

Follow Up Flag: Follow up
Flag Status: Flagged

Thank you for this. I would like to be reappointed. Regards to all.

On Mon, Jul 7, 2025 at 11:39 AM Kim DeLucia <kdelucia@somersny.gov> wrote:

Good morning Alan,

Hope all is well.

Please see the attached letter from Rob. The original is going out in today's mail.

Thank you,

Kim

Kim DeLucia

Executive Assistant to

Robert Scorrano, Town Supervisor

TOWN OF SOMERS

335 ROUTE 202

SOMERS, NY 10589

Phone: 914-277-3637

Fax: 914-276-0082

WWW.SOMERSNY.COM