



## **DEPARTMENT OF CODE ENFORCEMENT**

118 Broadway, P.O. Box 345, Fort Edward, N.Y. 12828

Phone (518) 502-4146 Fax (518) 684-2242

[code@villageoffortedward.com](mailto:code@villageoffortedward.com)

June 30, 2025

To: **Adam Mullin**  
**281 Selfridge Rd.**  
**Gansevoort, NY 12831**

Location 130 Broadway  
Tax Map No. 171.6-1-36  
Zone C1, Commercial

RE: **Proposed Kitchen and Bath Show Room and Store.**

This letter is this office's zoning determination relative to the above referenced project. The property is located in the **above referenced** zoning district in the Village of Fort Edward Zoning Law found at Chapter 350 of the Code of the Village of Fort Edward. In reviewing the proposed project under Chapter 350, I find the following:

☐ The proposed is in violation of the following section of village code:

☐ The project is not a permitted use in the zone in which it is located:

☐ The project does not meet the area/density requirements required by the Village of Fort Edward Zoning Law as follows:

☐ Does not meet the area/density requirements as follows: \_\_\_\_\_

☒ The project requires site plan review from the zoning board:

☐ The division of the parcel requires subdivision review from the zoning board.

☐ The project requires a special use permit from the zoning board.

Please note that if you disagree with this zoning determination as to allowed uses and/or density requirements, you have the right to appeal this determination to the Zoning Board of Appeals within 60 days of the date of this determination. In the event of an area and/or use denial, you also have the right to appeal to the Zoning Board of Appeals for a variance as applicable. These options have legal implications and we cannot provide you legal advice.

Thank you.

David Armando  
Code Enforcement Officer

**SITE PLAN REVIEW APPLICATION**  
**GENERAL INFORMATION**

**APPLICANT/OWNER INFORMATION (If Applicant is NOT Owner, Submit Authorization)**

**Applicant Name** Adam Mullin  
**Applicant Address** 130 Broadway  
Fort Edward

**Phone Number** (518) 796-8381 **Fax Number** \_\_\_\_\_

**Owner Name (if not applicant)** \_\_\_\_\_  
**Owner Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Fax Number** \_\_\_\_\_

**APPLICANT'S REPRESENTATIVE (Submit Authorization)**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Fax Number** \_\_\_\_\_

**PROPERTY INFORMATION**

**Project Location** 130 Broadway, Fort Edward

**Tax Map #** 171.6-1-36

**Current Lot Size** 54' x 147' 7938 SQUARE FEET

**Portion of Lot Currently Developed (sq. ft)** ~~100%~~ 4578 SQUARE FEET

**Percentage of Lot Currently Developed** ~~100%~~ 58%  
(Portion of Lot Currently Developed/Lot Size)

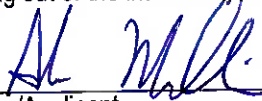
**Portion of Lot to be Developed (sq. ft)** ~~0~~

**Total Percent of Lot to be Developed After Project** ~~0~~ 58%  
(Portion of Lot Developed + Portion of Lot to be Developed/Lot Size)

**Description of Proposed Use of Property** Kitchen & Bath Store

**SIGNATURES**

The undersigned, being the owner of the property that is the subject of the foregoing application including all maps, plats, reports and other documentation supporting same, does hereby state that he/she/it has reviewed the foregoing application including all maps, reports and other documentation supporting same, and that the information provided thereon is true and accurate. The undersigned specifically understands that the Village of Fort Edward Planning Board will rely on the truth and sufficiency of the information provided and the undersigned agrees to indemnify, defend and hold the Village of Fort Edward Planning Board and the Village of Fort Edward, its agents, employees and representatives harmless from any and all claims, suits, demands, losses, judgments or orders arising out of the inaccuracy or insufficiency of any of the information supplied by the undersigned or its agents.

  
\_\_\_\_\_  
Owner/Applicant

6/27/2025  
\_\_\_\_\_  
Date

***If the Owner is not the applicant, then the following must be executed by the owner:***

The undersigned is the lawful owner of the property which is the subject of the foregoing application and consents to the application and any and all conditions that might be imposed by the Village of Fort Edward Planning Board concerning said site plan review. This application may be treated as if the owner himself/herself/itself submitted same. The applicant as noted on this application has my permission to agree to any reasonable conditions and to otherwise take such actions as are necessary to obtain the approval for the proposal requested herein.

\_\_\_\_\_  
Owner/Applicant

\_\_\_\_\_  
Date

***If the applicant or owner has an agent, the following must be executed:***

The undersigned, being the applicant/owner of the property which is the subject of the foregoing application, does hereby authorize the following person and/or firm, to represent me with regard to the foregoing application at all meetings before the Village of Fort Edward Planning Board and further promise to the Village of Fort Edward Planning Board that said person and/or firm has the authority to make statements and representations on my behalf to the Planning Board and to agree to conditions of said Planning Board.

Designated Agent \_\_\_\_\_

Agent's firm \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

\_\_\_\_\_  
Owner/Applicant

\_\_\_\_\_  
Date

## Short Environmental Assessment Form

### Part 1 - Project Information

#### Instructions for Completing

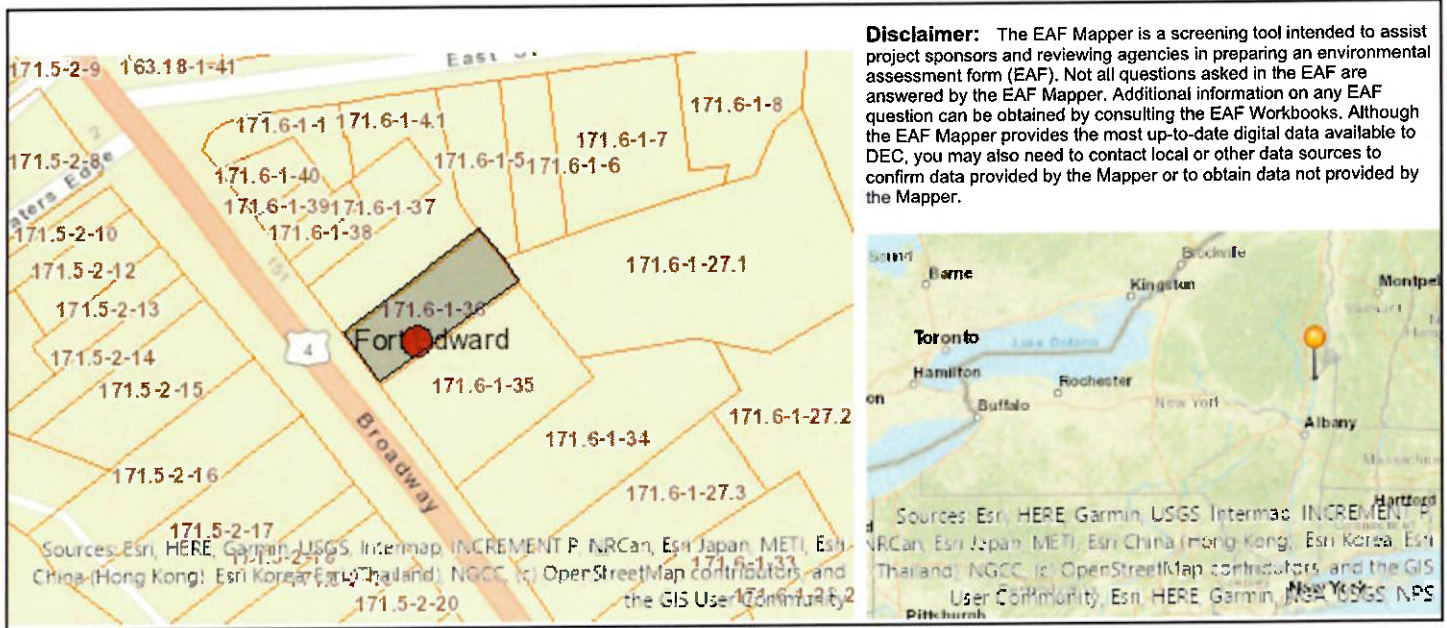
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available.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

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

<b>Part 1 – Project and Sponsor Information</b>			
Kitchen and bath storefront			
Name of Action or Project: Storefront			
Project Location (describe, and attach a location map): 128 Broadway Fort Edward			
Brief Description of Proposed Action: Currently, there is a barber shop on the first floor located at 128 Broadway. We would like to open up storefront A as a kitchen and bath storefront.			
Name of Applicant or Sponsor: Adam Mullin		Telephone: 518-796-8381	
		E-Mail:	
Address: 281 Selfridge Road			
City/PO: South Glens Falls Granseville		State: NY	Zip Code: 12828 12831
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 checked="" type="checkbox"/> YES <input 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? _____ acres b. Total acreage to be physically disturbed? _____ acres c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, 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 type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): <input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	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: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
<hr/> <hr/>		
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor/name: <u>Adrian Mullin</u>		Date: <u>6/30/2025</u>
Signature: <u><i>Adrian Mullin</i></u>		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]	No
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	Yes