CITY PLAN DEPARTMENT 165 CHURCH STREET, 5 TH FLOOR, NEW HAVEN, CT 06510-2010
PHONE 203.946.6379 FAX 203.946.7815

Application for Development Permit

DATA

CHECK BOX ØWHERE APPROPRIATE. PRINT OR TYPE INFORMATION IN SPACE PROVIDED.

1. Proj 339 P A/K/A Tax N 247-0 Neare	ject Address(es) rospect Street A: fap-Block-Parcel(s) 395-00100 st Cross Street: Hillside Place	 ☐ Check Here if Fee Exen ☐ As-of Right ☐ Zoning Relief ☐ Development Permit This includes ☐ S ☐ Flood Development Per ☐ Performance Bond ☐ Building Permit 	THIS BOX IS FOR CITY USE ONLY File # Fee Paid Date [yy-mm-dd] #			
2. Pro	perty Owner Information & C	Consent				
Name	: Yale University	1	Davtime Phone: (203) 432-9878			
Firm:	By J. Michael Bellamy, Vice Presid	ent, Facilities & Campus D	Development 🖾 Business 🗍 Home 🗍 Answering Servic			
Street	Address: 2 Whitney Avenue	, I	□ Fax: □ Cell:			
City: I	New Haven State: CT	ZIP: 06520-8297	⊠ E-Mail: jmike.bellamy@yale.edu			
As OV 1. I c	As OWNER OF THE PROPERTY I hereby authorize this development permit application, and: 1. I consent to necessary and proper inspections of the above property by agents of the City at a reasonable time after an					
ар 2. I с	ertify that I am familiar with all of	the information provided ir	in this application, and			
3. I a an	 I am aware that any permit obtained through deception, inaccurate or misleading information is subject to revocation and penalties, and 					
4. I c	ertify that this project conforms to	zoning or has applied for or	or been granted zoning relief.			
Dated	: September 20, 2023	Ţ	Signature of PROPERTY OWNER			
3 Apr	licant Information & Certification	n IX Check here i	if SAME AS OWNER (Fill in only if not same as Owner)			
J. TAPP Name			Davtime Phone:			
Firm		г Г	Business Home Answering Service			
Street	Address	ſ	\Box Fax: \Box Cell			
City	State	ZIP` [□ E-Mail:			
As Al throug	PPLICANT I am familiar with all o gh deception, inaccurate or misleadin	f the information provided is a subject to re	in this application and aware that any permit obtained revocation and penalties.			
Dated	;, 20					
,		<u>.</u>	Signature of APPLICANT			
4. Auth	norized Agent Information	Check here i	if SAME AS OWNER (Fill in only if not same as Owner.			
Name	: Stephen Brown	I	Daytime Phone: (203) 432-6721			
Firm:	Yale University	Ľ	⊠ Business ☐ Home ☐ Answering Service			
Street	Address: 2 Whitney Avenue	[Fax: Cell:			
City: I Check	New Haven State: CT	ZIP: 06520-8297 E	⊠ E-Mail: stephen.m.brown@yale.edu pment Application is:			
Les	see Attorney Architect Engineer	Real Estate Agent Contracto	tor Other-Specify Assoc. Director, Planning Administration			
As AU obtain	As AUTHORIZED AGENT I am familiar with all of the information provided in this application and aware that any permi obtained through deception, inaccurate or misleading information is subject to revocation and penalties.					
Dated	: September 20, 2023	Ē	Signature of AUTHORIZED AGENT			

CITY PLAN DEPARTMENT | 165 CHURCH STREET, 5TH FLOOR, NEW HAVEN, CT 06510-2010

PHONE 203.946.6379 FAX 203.946.7815

Application for Development Permit

WORKSHEET

- 1. Calculate LOT AREA as defined by the New Haven Zoning Ordinance excluding the following categories:
 - Wetlands and Watercourses as defined in Sections 22a-38 15&16) C.G.S. and appearing on New Haven County USDA Soil Conservation Service Soil Survey.
 - State-designated Tidal Wetlands defined and mapped under Sections 22a-29(a)(2) and 22a-30 C.G.S.
 - Any parcel area below the Mean High Water Mark.

LOT AREA CALCULATION WORKSHEET				
ZONING LOT AREA = TAX PARCEL AREA MINUS STEP 1 TOTAL				
STEP 1 Add Items A. through C. below:	STEP 2: Subtract STEP 1 TOTAL from Tax Parcel			
Area:				
A. Tidal Wetlands <u>0</u> SF	TAX PARCEL AREA: 312,325 SF			
B. Area below Mean High Water Mark 0 SF				
C. Inland Wetlands & Watercourses <u>0</u> SF	MINUS STEP 1 TOTAL: SF			
$= STEP 1 TOTAL _ 0 SF$	ZONING LOT AREA: $312,325$ SF			

2. ZONING TABLE(Fill in below or include on submission drawing cover sheet.)

RESIDENTIAL PROJECTS SEE PLANS

ZONING DISTRICT: Not Applicable =	Standard[Permitted or Required]	Proposed [or Allowed by BZA]	
1. ZONING LOT AREA [Calculate Above]	Sq. Ft.	Sq. Ft.	
2. NUMBER OF DWELLING UNITS	Units	Units	
3. LOT AREA PER DWELLING UNIT	Sq. Ft./DU	Sq. Ft./DU	
4. IMPERVIOUS SURFACE	Sq. Ft. %	Sq. Ft. %	
5. FRONT YARD	Feet	Feet	
6. SIDE YARDS	Feet and Feet	Feet and Feet	
7. REAR YARD	Feet	Feet	
8. BUILDING HEIGHT	Feet	Feet	
9. PARKING	#Spaces	#Spaces	

COMMERCIAL OR INDUSTRIAL PROJECTS

ZONING DISTRICT: Not Applicable =	Standard[Permitted or Required]	Proposed [or Allowed by BZA]
1. ZONING LOT AREA [Calculate Above]	Sq. Ft.	Sq. Ft.
2. TOTAL FLOOR AREA (ALL FLOORS):	Sq. Ft.	Sq. Ft.
3. FLOOR AREA RATIO (FAR = B/A)	FAR	FAR
4. IMPERVIOUS SURFACE	Sq. Ft. %	Sq. Ft. %
5. PARKING	Spaces	Spaces
6. LOADING	Spaces	Spaces

3. MATERIAL (SOIL, ROCK OR FILL) TO BE MOVED, REMOVED OR ADDED

CALCULATE MATERIAL TO BE MOVED, REMOVED OR ADDED (Calculate below - Enter sizes in feet). Length x Width x Depth = Cubic Feet $\div 27$ **Cubic Yards** \Box No \boxtimes Yes MATERIAL TO BE MOVED: ÷ 27 500 ____ X Х ⊠ No □ Yes MATERIAL TO BE ADDED: _____ x ____ 0 Х \square No \boxtimes Yes MATERIAL TO REMOVED: _____ x Х ÷ 27 1.000 TOTAL MATERIAL TO BE MOVED, REMOVED OR ADDED = 1,500

REGRADING OF SITE

□ No ⊠ Yes Are more than 800 cubic yards soil, rock or fill to be **MOVED**, **REMOVED** OR ADDED?

⊠ No ☐ Yes Is more than 30% of the lot area proposed to be **REGRADED** by more than 2 feet? (do following calculation).

REGRADED AREA IN SQUARE FEET _____ + TOTAL LOT AREA _____ IN SQUARE FEET = _____ PERCENT

[Area to be re-graded by more than 2 feet divided by Total Lot Area equals Percentage of Lot to be re-graded]

CITY PLAN DEPARTMENT | 165 CHURCH STREET, 5TH FLOOR, NEW HAVEN, CT 06510-2010 PHONE 203.946.6379 FAX 203.946.7815

Application for Development Permit: Site Plan Review

SITE

A NARRATIVE IS REQUIRED

NARRATIVE: A description of the proposed project in sufficient detail to determine that it complies with the New Haven Zoning Ordinance and State of Connecticut Soil Erosion and Sediment Control Standards. (Attach NARRATIVE or include it on the submitted SITE PLAN).

- 1. State the purpose and intended use of the project. See Attachment A
- 2. Describe the structure(s) and construction activities. See Attachment A

3. State the construction Start and End Dates/Provide a Construction Staging Plan/If phased provide Time Estimates for Each Phase.

See Attachment A and Site Logistics Plan

4. List any Federal or State Permits required and their status. Furnish copy of permits issued or applications filed.

CHECK \blacksquare Here if None \boxtimes _____

5. Provide Board of Zoning Appeals Decision Letter(s) if zoning relief has been secured. Plan must be in compliance with the New Haven Zoning Ordinance to receive Site Plan approval.

SITE PLAN SUBMISSION REFER TO "SITE PLAN GUIDELINES" AT CITYOFNEWHAVEN.COM

SURVEY

- 1. 🖾 A-2 Survey of property boundary, right-of-way, street, building and/or setback lines, easement lines.
- 2. A-2 Survey not required. Staff has determined this project is: Exempt Unregulated Minor Application.
- 3. Show Coastal Management District Boundary, Flood Zones, wetlands, watercourses, (soil types if pertinent).

SITE PLAN DATA Please use the checklist below and SESC REGULATIONS as a guide to provide required data.

- 4. 🖾 SITE PLAN [1" = 20' or larger is preferred] with north arrow, scale, date prepared, and name of preparer.
- 5. \boxtimes General Location Map at a scale of 1 inch = 600 feet, with North Arrow.
- 6. I Buildings and improvements on abutting parcels within 50 feet of the property lines
- 7. I Names of abutting Property Owners.
- 8. I Driveways, aprons, sidewalks, curbs, walkways, parking layout, loading facilities, and utilities.
- 9. I Provide applicable standard City details.

- 12. ☑ Proposed site alterations including cleared, excavated, filled or graded areas.
- 13. Existing trees with diameters of 8 inches or greater, and changes proposed, including protection measures.
- $14. \boxtimes$ Edge of wooded areas.
- 15. ☑ Proposed landscaping keyed to a plant list. Include size and planting detail.
- 17. I Proposed building plans and elevations.
- 18. In New property lines & improvements: signs, fences, walls, dumpsters, outdoor storage area, lighting.

ENGINEERING DATA. Please provide the following data using the checklist as a guide.

- 19. Storm Drainage details including roof leaders.
- $20.\boxtimes$ Existing and proposed grades and construction materials.
- 21. ☑ Support Data and Drainage Calculations to show adequacy of pipe sizes, flow, slope, invert and top of grate connections [*Not* required because: □ Exempt □ Unregulated □ Minor Application].

CITY PLAN DEPARTMENT | 165 CHURCH STREET, 5TH FLOOR, NEW HAVEN, CT 06510-2010 PHONE 203.946.6379 FAX 203.946.7815

SESC Application for Development Permit: Soil Erosion and Sediment Control Review

Please fill out DATA, WORKSHEET, and SITE SECTIONS in addition to the following items:

SITE PLAN

On a Scaled Site Plan prepared by a Connecticut Registered Architect, Landscape Architect, Civil Engineer, or Licensed Soil Scientist, show the following:

I Construction details for proposed SESC measures and storm water management facilities in accord with standard city details. I Location and design details for all proposed SESC measures and storm water management facilities over the period of construction.

SOIL EROSION AND SEDIMENT CONTROL DATA

Print or type information in space provided, or Check I appropriate box below if information is not filled in on this form. Shown on SITE PLAN, or

Described in SEPARATE ATTACHMENT.

1. Describe proposed Soil Erosion & Sediment Control Measures.

The proposed soil erosion and sediment control measures will include stabilized construction entrances, inlet protection on both existing and proposed drainage structures, perimeter fencing, fiber roll perimeter controls and diversion berms and ditches. These measures will be phased and modified as construction progresses on-site. All site work will be constructed using best management practices in accordance with the 2002 Connecticut Guidelines for Soil Erosion and Sediment Control and the 2004 Connecticut Stormwater Quality Manual.

2. Schedule of Grading and Construction activities. Include start and stop dates and duration of activity.

Anticipated construction duration is from early 2024 to the summer of 2024.

$\mathbf{3}$. Describe the Sequence for Final Stabilization of the site.

Permanent soil stabilization measures will be applied to all graded areas within 7 days of establishing final grade. A temporary stabilization seeding mix will be applied to areas where final grading will be delayed more than 30 days. All erosion control measures will remain in place until the site is stabilized, and vegetation is established.

4. Outline the Operations and Daily Maintenance Program.

Erosion and sediment control measures will be inspected at least weekly while construction activities are on-going and after every storm event which results in the deposition of precipitation greater than 0.5 inches in a 24-hour period. Stabilization of all regraded areas and soil stockpiles will be initiated and maintained during all phases of construction. The site will be swept daily, and excess accumulated sediment will be disposed of properly.

5. Contingency Provisions. Describe your procedures if unforeseen erosion or sedimentation problems arise.

Should unforeseen problems arise, the contractor will maintain an emergency stockpile of soil erosion and sediment control measures, including silt fencing, geotextile fabric stakes, crushed stone, and equipment to place or install these measures for use during heavy rains or other events. The individual responsible for monitoring SESC control measures and the on-site monitor of SESC control measures installation and maintenance will be contacted to determine the course of action to address any issues.

6. Individual Responsible for Monitoring SESC Control Measures

Name: Timothy Onderko, PE			Daytime Phone: 203-562-5771		
Firm: Langan Engineering & Environmental Services, Inc			🗵 Business 🗌 Home	Answering Service	
Street Address: 555 Long Wharf Drive			☐ Fax:	Cell:	
City: New Haven	State: CT	ZIP 06511	⊠ E-Mail: tonderko@langan.com		
			Nighttime/Emergency: 203-435-8665		

7. On Site Monitor of SESC Control Measure Installation and Maintenance

Name: Christian Meyer			Daytime Phone:	
Firm: Turner Construction Company			🗌 Business 🗌 Home	Answering Service
Street Address: 50 Waterview Driv	e		Fax:	⊠ Cell: 203-627-4494
City: Shelton	State: CT	ZIP 06484	⊠ E-Mail: cmeyer@tcc	o.com
License # MCO.0900358 Nighttime/Eme			ergency:	

Attachment A

This project involves the expansion of an existing Yale University parking lot known as Lot 15. Lot 15 is located at 339 Prospect Street within the University's Central/Science Campus. The site is on the east side of Prospect Street to the north of Edwards Street and the Hillside Place intersection. A net total of 20 parking spaces will be added to the lot, with five existing spaces being converted to a total of four ADA spaces. Lot 15 is bounded to the north and south by other property of the University, and is located in an RM-2 zoning district. This is an enabling project to provide additional parking for the future impacts associated with the development of a new physical sciences and engineering building on the Science Hill block.

Project work includes the following:

- installation of asphalt pavement and bituminous concrete curbing
- creation of four (4) ADA accessible parking spaces
- installation of stormwater infrastructure
- installation of pole-mounted lighting
- installation of landscape improvements
- installation of electric vehicle charging stations and supporting infrastructure

The existing curb cut to Prospect Street will be shifted to the north and widened slightly.

The project will meet the City's stormwater management, reflective heat and lighting standards.

No parking is required for the project under Section 12(b)(1)(g) of the Zoning Ordinance since it will not expand the University's existing student body, no faculty or employees will be added, and no new places of assembly will be created.

Subject to approvals, it is anticipated that construction will commence in early 2024 and be completed in summer 2024.





Justin Elicker

Mayor

ENGINEERING DEPARTMENT City of New Haven 200 Orange Street, Rm 503 New Haven, CT 06510 www.newhavenct.gov



Giovanni Zinn, P.E. City Engineer

Storm Water Management Plan Cover Sheet

This form is to be completed by Applicant when compliance with Section 60 of the City's Zoning Ordinance is required and/or when compliance with GNHWPCA's stormwater regulations are triggered. This form shall be submitted with the Applicant's Storm Water Management Plan and must be updated, as needed, to reflect any changes made to the Plan as part of the Site Plan Review process.

Date: September 20, 2023

Site Address: <u>339 PROSPECT ST</u>

Anticipated Construction Start Date: Early 2024 End Date: Summer 2024

Parcel Area (acres): <u>±0.30 ac (13,233 sf)</u> - 1 Inch Retention Area

Existing Impervious Area (acres): <u>±0.08 ac (3,379 sf)</u> - 1 Inch Retention Area

Proposed Impervious Area (acres): <u>±0.18 ac (7,784 sf</u>) - 1 Inch Retention Area

Meets Section 60 (Y/N?) ____Y

Meets GNHWPCA Regulations (Y/N?) _____Y

If retention system proposed, please provide the area of impervious cover draining to that system (in acres):

6,360 sf of total site area drains to the proposed system inclusive of previous and impervious area.

Retention Volume Provided (CF): <u>1" over total project area of 13,233 sf is 1,103 cubic feet</u>. The proposed system exceeds 1,168 cubic feet.

Type(s) of BMP/GI installed: Landscaped areas, sumped catch basins, isolator row, and underground stormwater retention system.