

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: 3ONS014B (CK22-3525)		
Project Location (describe, and attach a general location map): 2846 Belgium Rd, Baldwinsville, NY 13027		
Brief Description of Proposed Action (include purpose or need): T-Mobile proposes the modification of an existing wireless telecommunications facility. Specifically, antennas will be removed and replaced, and new equipment will be installed in an existing 10 x 10 foot ground space within the existing equipment compound, and a new equipment and mounts will be installed to modify the existing facility.		
Name of Applicant/Sponsor: T-Mobile Northeast, LLC		Telephone: (315) 461-0345 E-Mail: N/A
Address: 103 Monarch Drive		
City/PO: Liverpool	State: NY	Zip Code: 13088
Project Contact (if not same as sponsor; give name and title/role): Kelley Cross		Telephone: (657) 237-9590 E-Mail: kcross@clinelc.com
Address: 750 West Center Street, Suite 301		
City/PO: West Bridgewater	State: MA	Zip Code: 02379
Property Owner (if not same as sponsor): T-Mobile Northeast, LLC (same as Applicant/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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	Planning Board - Site Plan Review and Building Permit	ASAP
c. City, Town or <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Village Zoning Board of Appeals	Zoning Board - Site Plan Review and Building Permit	ASAP
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NY SHPO	ASAP
h. Federal agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FCC License	ASAP
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 Yes No only approval(s) which must be granted to enable the proposed action to proceed?

- 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):

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

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?

PUD - Planned Unit Development

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? Baldwinsville Central School District

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

Baldwinsville Police Department

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

Baldwinsville Fire Department

d. What parks serve the project site?

N/A

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)? Modification of an existing unmanned wireless telecommunications facility.

b. a. Total acreage of the site of the proposed action? .01 acres

b. Total acreage to be physically disturbed? .01 acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? .01 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: _____ 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? If Yes, show numbers of units proposed.				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<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)? If Yes,				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
i.	Total number of structures _____ 1			
ii.	Dimensions (in feet) of largest proposed structure: _____ 2 height; _____ 10 width; and _____ 10 length			
iii.	Approximate extent of building space to be heated or cooled: _____ n/a 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?			
•	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? If yes, describe. _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
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: _____ 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: _____
- 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
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<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? _____ 	
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): _____	
vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>If Yes:</p> <p>i. How much impervious surface will the project create in relation to total size of project parcel?</p> <p>____ Square feet or ____ acres (impervious surface) ____ Square feet or ____ acres (parcel size)</p> <p>ii. Describe types of new point sources. _____</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)? _____	
<ul style="list-style-type: none"> If to surface waters, identify receiving water bodies or wetlands: _____ 	
<ul style="list-style-type: none"> Will stormwater runoff flow to adjacent properties? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>If Yes, identify:</p> <p>i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) <u>Heavy equipment only during construction phase</u></p> <p>ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)</p> <p>iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)</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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<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) <input type="checkbox"/> Yes <input type="checkbox"/> No</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 Hydroflourocans (HFCs) ____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs) 	

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
If Yes:	<ol style="list-style-type: none"> i. Estimate methane generation in tons/year (metric): _____ ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____
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
If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____ _____	
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
If Yes:	<ol style="list-style-type: none"> 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 _____. ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____
iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____	
iv. Does the proposed action include any shared use parking?	<input type="checkbox"/> Yes <input type="checkbox"/> No
v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe:	
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
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
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
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
If Yes:	<ol style="list-style-type: none"> i. Estimate annual electricity demand during operation of the proposed action: _____ ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____ iii. Will the proposed action require a new, or an upgrade, to an existing substation? <input type="checkbox"/> Yes <input type="checkbox"/> No
l. Hours of operation. Answer all items which apply.	
i. During Construction:	<ul style="list-style-type: none"> • Monday - Friday: _____ 8 hours • Saturday: _____ • Sunday: _____ • Holidays: _____
ii. During Operations:	<ul style="list-style-type: none"> • Monday - Friday: _____ 24 hrs (unmanned) • Saturday: _____ 24 hrs (unmanned) • Sunday: _____ 24 hrs (unmanned) • Holidays: _____ 24 hrs (unmanned)

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
If yes:	
i. Provide details including sources, time of day and duration:	
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
Describe: _____	
n. Will the proposed action have outdoor lighting?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes:	
i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:	
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
Describe: _____	
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
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____	
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
If Yes:	
i. Product(s) to be stored _____	
ii. Volume(s) _____ per unit time _____ (e.g., month, year)	
iii. Generally, describe the proposed storage facilities: _____	
q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Describe proposed treatment(s): _____ _____	
ii. Will the proposed action use Integrated Pest Management Practices?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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
If Yes:	
i. Describe any solid waste(s) to be generated during construction or operation of the facility:	
• Construction: _____ tons per _____ (unit of time)	
• Operation : _____ tons per _____ (unit of time)	
ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:	
• Construction: _____	
• Operation: _____	
iii. Proposed disposal methods/facilities for solid waste generated on-site:	
• 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 Yes No waste?
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): _____

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	.01	.01	0
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____			

c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, i. Identify Facilities: _____ _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e. Does the project site contain an existing dam? 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: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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? If Yes: i. Has the facility been formally closed? • If yes, cite sources/documentation: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Describe any development constraints due to the prior solid waste activities: _____	
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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? 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: <input type="checkbox"/> Yes – Spills Incidents database Provide DEC ID number(s): _____ <input type="checkbox"/> Yes – Environmental Site Remediation database Provide DEC ID number(s): _____ <input type="checkbox"/> Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? If yes, provide DEC ID number(s): C734085 iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): <u>C- Completed; the Department has determined that remediation has been satisfactorily completed under a remedial program.</u> _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

v. Is the project site subject to an institutional control limiting property uses?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<ul style="list-style-type: none"> • 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? <input type="checkbox"/> Yes <input type="checkbox"/> No • Explain: _____ _____ _____ 		
E.2. Natural Resources On or Near Project Site		
a. What is the average depth to bedrock on the project site? _____		n/a feet
b. Are there bedrock outcroppings on the project site? If Yes, what proportion of the site is comprised of bedrock outcroppings? _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No %
c. Predominant soil type(s) present on project site: _____		gravel 100 % _____ % _____ %
d. What is the average depth to the water table on the project site? Average: _____ n/a feet		
e. Drainage status of project site soils:		<input type="checkbox"/> Well Drained: _____ % of site <input checked="" type="checkbox"/> Moderately Well Drained: 100 % of site <input type="checkbox"/> Poorly Drained: _____ % of site
f. Approximate proportion of proposed action site with slopes:		<input checked="" type="checkbox"/> 0-10%: 100 % of site <input type="checkbox"/> 10-15%: _____ % of site <input type="checkbox"/> 15% or greater: _____ % of site
g. Are there any unique geologic features on the project site? If Yes, describe: _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
h. Surface water features.		
i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ii. Do any wetlands or other waterbodies adjoin the project site?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iv. For each identified regulated wetland and waterbody on the project site, provide the following information:		
<ul style="list-style-type: none"> • Streams: Name _____ Classification _____ • Lakes or Ponds: Name _____ Classification _____ • Wetlands: Name _____ Approximate Size _____ • Wetland No. (if regulated by DEC) _____ 		
v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, name of impaired water body/bodies and basis for listing as impaired: _____		
i. Is the project site in a designated Floodway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
j. Is the project site in the 100-year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
k. Is the project site in the 500-year Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:		
i. Name of aquifer: _____		

m. Identify the predominant wildlife species that occupy or use the project site:	<hr/> <hr/>
n. Does the project site contain a designated significant natural community?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Describe the habitat/community (composition, function, and basis for designation):	<hr/>
ii. Source(s) of description or evaluation:	<hr/>
iii. Extent of community/habitat:	
• Currently: _____ acres	
• Following completion of project as proposed: _____ acres	
• Gain or loss (indicate + or -): _____ acres	
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
i. Species and listing (endangered or threatened):	<hr/> <hr/>
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
If Yes:	
i. Species and listing:	<hr/> <hr/>
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
If yes, give a brief description of how the proposed action may affect that use:	<hr/> <hr/>
E.3. Designated Public Resources On or Near Project Site	
a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, provide county plus district name/number:	<hr/>
b. Are agricultural lands consisting of highly productive soils present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i. If Yes: acreage(s) on project site? _____	<hr/>
ii. Source(s) of soil rating(s): _____	<hr/>
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
If Yes:	
i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature	<hr/>
ii. Provide brief description of landmark, including values behind designation and approximate size/extent:	<hr/> <hr/>
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
If Yes:	
i. CEA name: _____	<hr/>
ii. Basis for designation: _____	<hr/>
iii. Designating agency and date: _____	<hr/>

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 type="checkbox"/> Yes <input checked="" 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: _____	
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 type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	
i. Identify resource: <u>Beaver Lake Nature Center</u>	
ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): <u>Nature center</u>	
iii. Distance between project and resource: _____ 5 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 checked="" type="checkbox"/> No

F. Additional Information

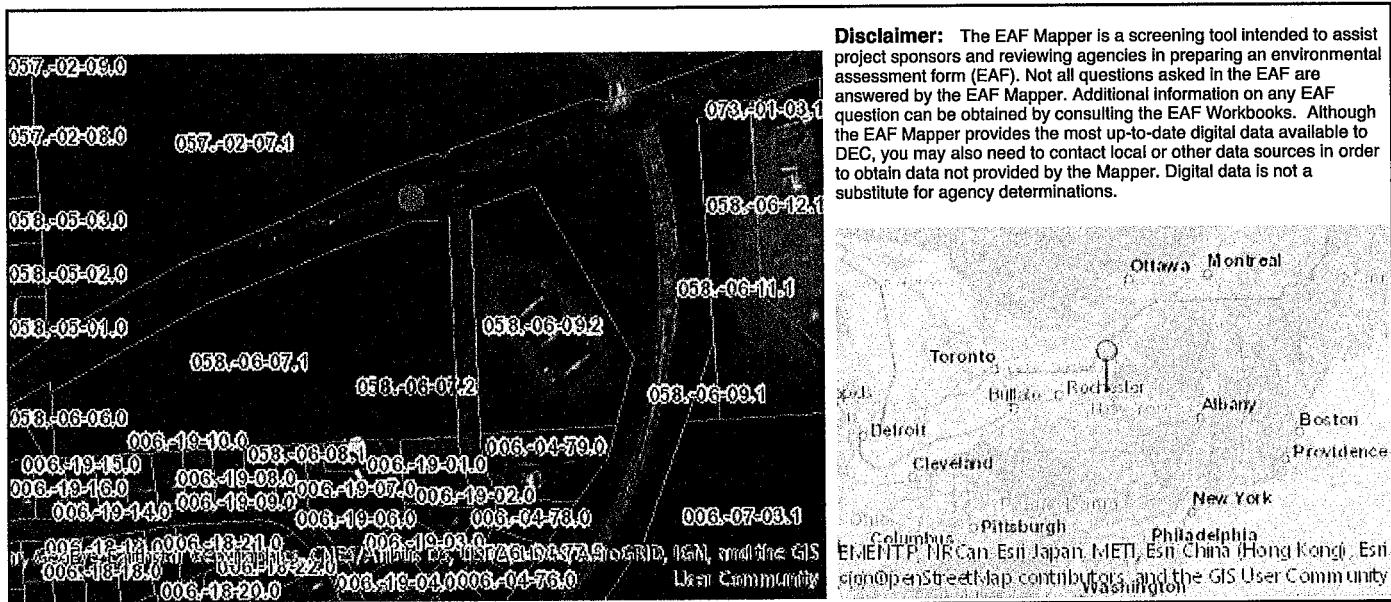
Attach any additional information which may be needed to clarify your project.

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

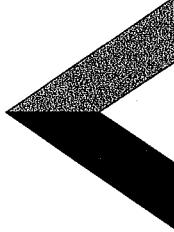
I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Gio Del Rivero, Nova Group GBC Date 4/7/2022
 Signature E. Cesar Del Rivero Title Consultant



B.I.i [Coastal or Waterfront Area]	No
B.I.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	Yes
E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID]	C734085
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	No
E.2.h.ii [Surface Water Features]	No
E.2.h.iii [Surface Water Features]	No
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.l. [Aquifers]	No
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	No

E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.3.f. [Archeological Sites]	No
E.3.i. [Designated River Corridor]	No



AMERICAN TOWER®

ATC SITE NAME: BALDWINSVILLE NY SQA
ATC SITE NUMBER: 413161
T-MOBILE SITE NAME: BVILLE EAST
T-MOBILE SITE NUMBER: 30NS014B
SITE ADDRESS: 2846 BELGIUM RD
BALDWINSVILLE, NY 13020

T-MOBILE ANCHOR ANTENNA AMENDMENT PLAN 67D5997DB 6160 CONFIGURATION



AMERICAN TOWER

GENERAL CONSTRUCTION NOTES:



Kimley » Horn

of New York, P.C.

COA: 80369
1 NORTH LEXINGTON AVE, SUITE 505
NEW YORK, NY 10036

REV. DESCRIPTION BY DATE
A PRELIM. S/N: 2407221
A ISSUED FOR CONSTRUCTION S/N: 2407221
A REVISED FOR CLIENT S/N: 0930241

ATC SITE NUMBER: 413161

ATC SITE NAME:
BALDWINSVILLE NY SQA
TACKLE SITE NAME:
BVILLE EAST
SITE ADDRESS:
2848 BELGIUM RD
BALDWINSVILLE, NY 13027



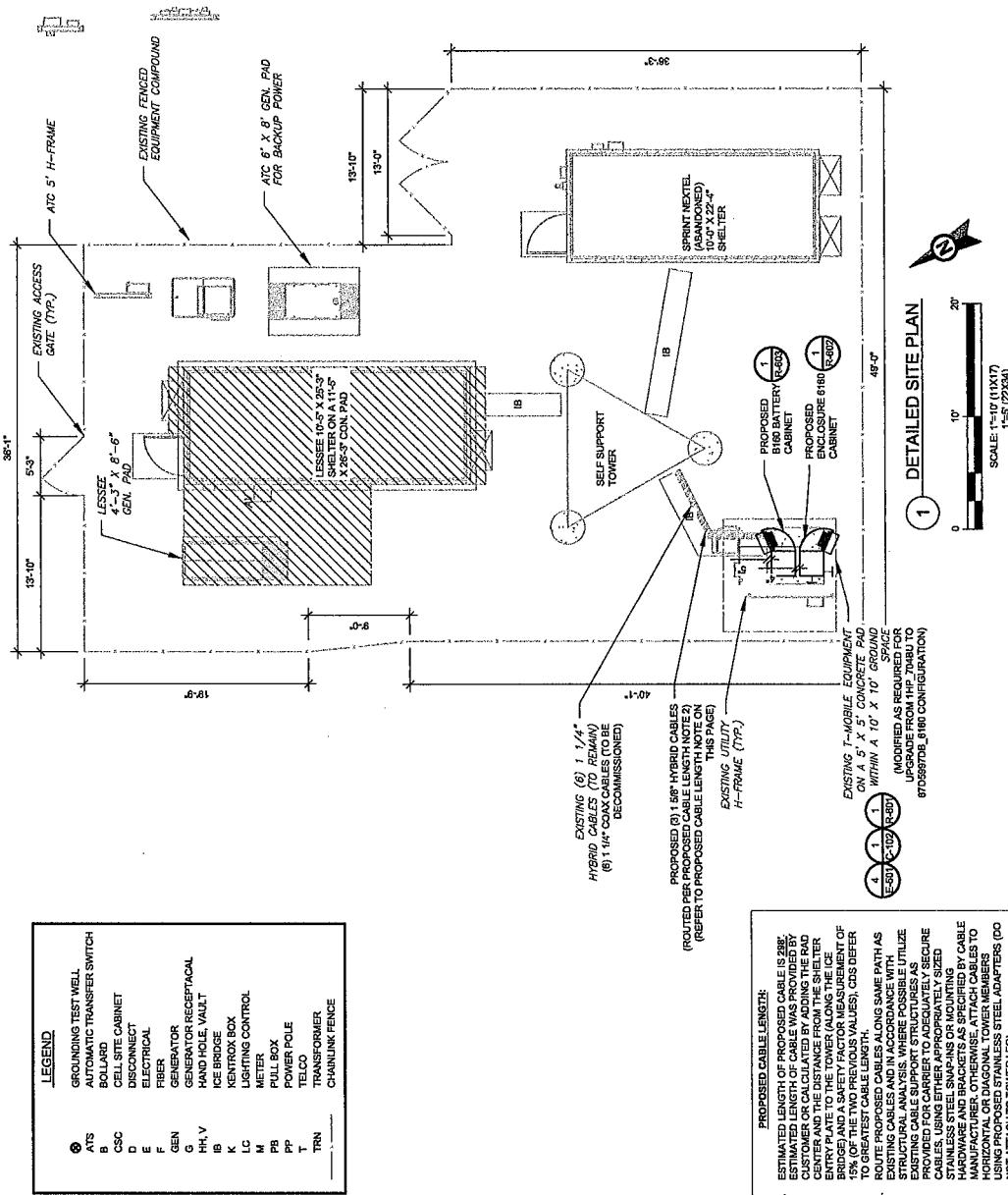
SEAL:

EXP. 4/30/23

T-Mobile®
DETAILED SITE PLAN

SHEET NUMBER: C-101 REVISION: 1

- SITE PLAN NOTES:**
- THIS SITE PLAN REPRESENTS THE BEST PRESENT KNOWLEDGE AVAILABLE TO THE ENGINEER AT THE TIME OF THIS DESIGN. THE CONTRACTOR SHALL VISIT THE SITE PRIOR TO CONSTRUCTION AND VERIFY ALL EXISTING CONDITIONS RELATED TO THE SCOPE OF WORK FOR THIS PROJECT.
 - ICE BRIDGE, CABLE, LADDER, COAX, PORT, AND COAX CABLES ARE SHOWN FOR REFERENCE ONLY. CONTRACTOR SHALL CONFIRM THE EXACT LOCATION OF ALL PROPOSED AND EXISTING EQUIPMENT AND STRUCTURES DEPICTED ON THIS PLAN BEFORE UTILIZING EXISTING CABLE SUPPORTS. COAX PORTS, INSTALLING NEW PORTS OR ANY OTHER EQUIPMENT, CONTRACTOR SHALL VERIFY ALL ASPECTS OF THE COMPONENTS MEET THE ATC SPECIFICATIONS.
 - NO ELECTRICAL SCOPE IS INCLUDED IN THIS PROJECT.

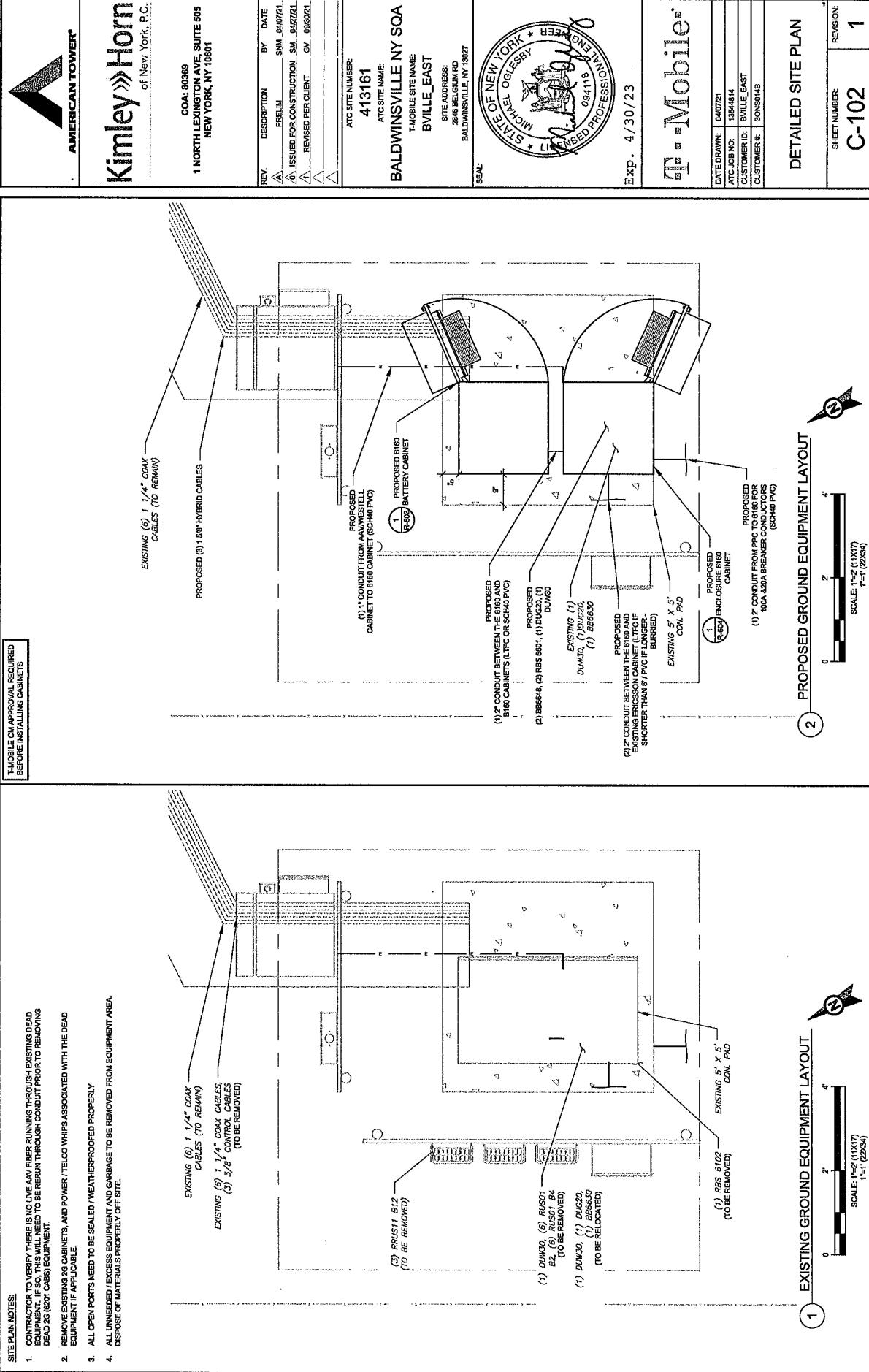




AMERICAN TOWER®

Kimley Horn

of New York, P.C.

MOBILE CM APPROVAL REQUIRED
BEFORE INSTALLING CABINETS



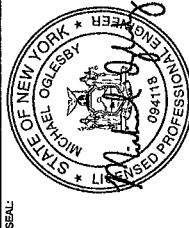
Kimley » Horn

of New York, P.C.

COA: 80369
1 NORTH LEXINGTON AVE, SUITE 505
NEW YORK, NY 10001

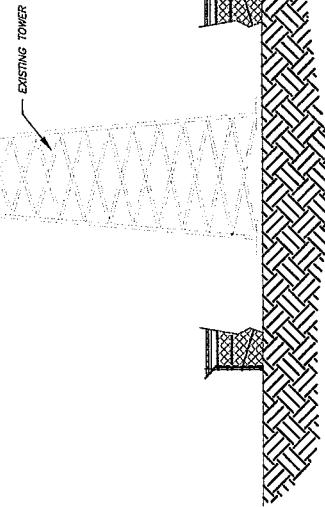
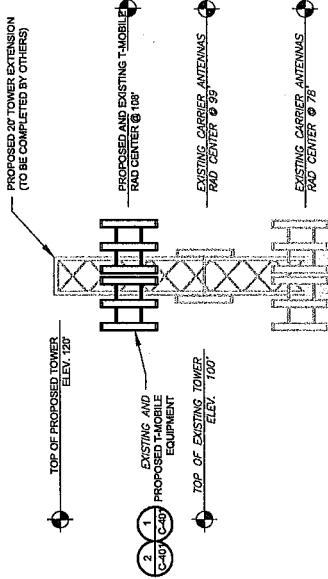
REV. DESCRIPTION BY DATE
A PRELIM. SNM. 04/07/21.
A ISSUED FOR CONSTRUCTION. SN. 04/27/21.
A REVISED FOR CLIENT. GL. 05/04/21.
A
A
A

ATC SITE NUMBER: 413161
ATC SITE NAME: BALDWINSVILLE NY SQA
TOWER SITE NAME: BVILLE_EAST
SITE ADDRESS: 2848 BEIGUIN RD
BALDWINSVILLE NY 13027
SEAL:



ATC SITE NUMBER: 413161
ATC SITE NAME: BALDWINSVILLE NY SQA
TOWER SITE NAME: BVILLE_EAST
SITE ADDRESS: 2848 BEIGUIN RD
BALDWINSVILLE NY 13027
SEAL:

TOWER NOTE:
1. IS THE CONTRACTOR'S RESPONSIBILITY TO
CONFIRM WITH THE PROJECT MANAGER THAT
THEY HAVE THE MOST RECENT VERSION OF THE
STRUCTURAL ANALYSIS BEFORE COMMENCING
WORK. EXISTING AND PROPOSED TOWER
APERTURES, MOUNTS, AND ANTEENAS ARE
SHOWN AS REFERENCE ONLY. NO CHANGES ARE
TO BE MADE TO THE EXISTING TOWER.
2. WHERE APPLICABLE, ALL NEW ANTENAS,
EQUIPMENT MOUNTS, CABLINGS, ETC. SHALL BE
PAINTED/PAINTED TO MATCH EXISTING EQUIPMENT
IN ACCORDANCE WITH FAA, JURISDICTION, AND/OR
OTHER LOCAL REQUIREMENTS.
3. ROUTE PROPOSED CABLES ALONG SAME PATH AS
EXISTING CABLES. IF PROPOSED CABLES DO NOT UTILIZE
EXISTING CABLE SUPPORT STRUCTURES, A
PROVIDED FOR CARRIER TO ADEQUATELY SECURE
CABLES, USING EITHER APPROPRIATELY SIZED
STAINLESS STEEL SNAPS OR MOUNTING
HARDWARE AND BRACKETS AS SPECIFIED BY
CABLE MANUFACTURER. USE OF CONCRETE
MEMBERS IS NOT ALLOWED. TOWER LEG
ADAPTERS (DO NOT ATTACH TO TOWER LEG).
4. TOWER ELEVATIONS ARE MEASURED FROM TOP
OF BASE PLATE TO MATCH STRUCTURAL
ANALYSIS. ELEVATIONS DO NOT SELECT TRUE
ABOVE GROUND LEVEL (A.G.L.)



1 TOWER ELEVATION
SCALE: 1/16"

SHEET NUMBER: C-201
REVISION: 1



AMERICAN TOWER®
Kimley Horn

of New York, P.C.

PER MOUNT ANALYSIS IS COMPLETED BY AMERICAN
 TOWER. DATED MARCH 22, 2021. THE PROPOSED
 MOUNTS CAN NOT SUPPORT THE
 PROPOSED CODING.

COA: 80369
 1 NORTH LEXINGTON AVE, SUITE 506
 NEW YORK, NY 10021

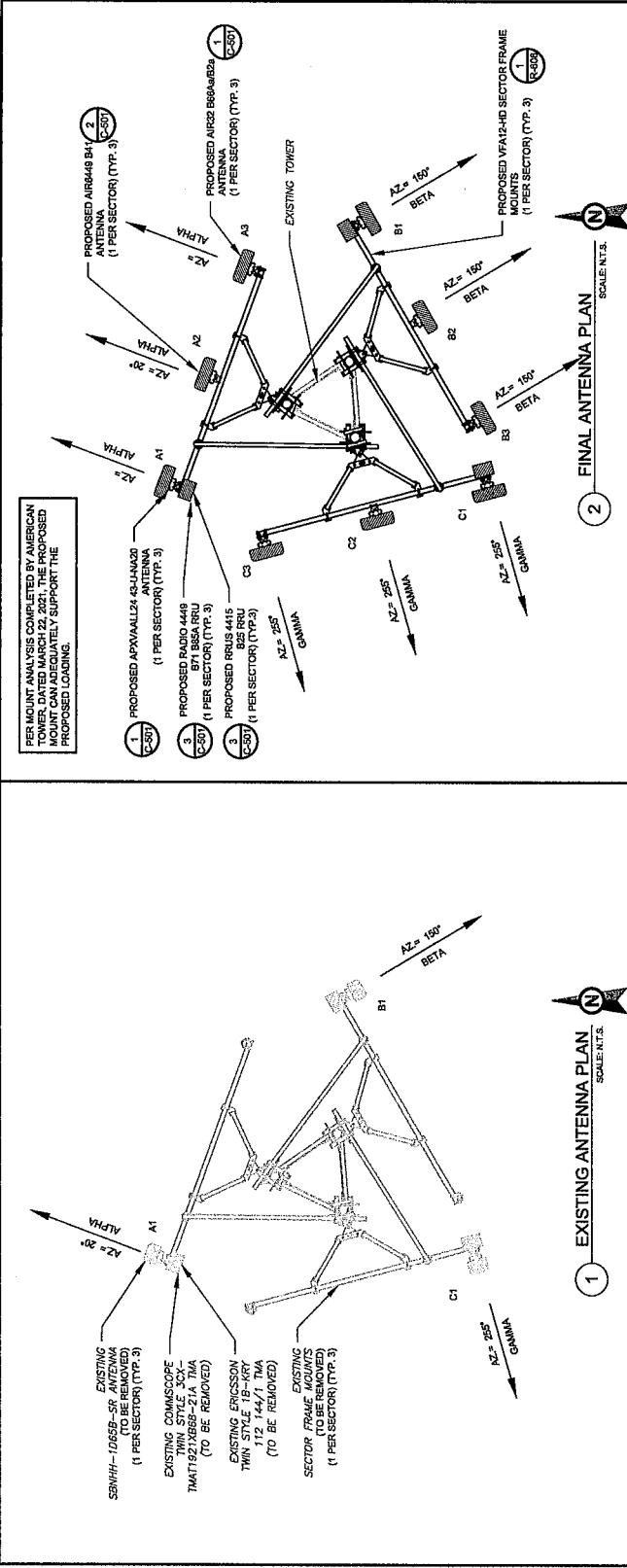
REV. DATE
 PRELIM. SNM 040721
 ISSUED FOR CONSTRUCTION SNM 040721
 REVISED PER CLIENT GV 080321

ATC SITE NUMBER:
 413161
 ATC SITE NAME:
 BALDWINSVILLE NY SQA
 MOBILE SITE NAME:
 BVILLE EAST
 SITE ADDRESS:
 2946 BELMONT RD
 BALDWINSVILLE, NY 13027

SERIAL NUMBER:
 094118
 STATE OF NEW YORK
 MICHAEL O'GLESBY
 * DIRECTOR
 * LICENSED PROFESSIONAL
 ENGINEER
 EXP. 4/30/23

■ ■ ■ Mobile ■ ■ ■

DATE DRAWN: 040721
 ATC JOB NO.: 1354814
 CUSTOMER ID: BVILLE EAST
 CUSTOMER #: 3033049
 SHEET NUMBER: C-401
 REVISION: 1



EXISTING ANTENNA SCHEDULE							
NON ANTENNA SUMMARY							
LOCATION	RAD	AZ	ANTENNA	BAND	MICHELEC STATUS	ADDITIONAL TOWER EQUIPMENT STATUS	NON ANTENNA SUMMARY
					D-TILT		
ALPHA	125°	20°	A1 SENNH-1065B-SR	L700	0/3	RAV	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA
BETA	108°	150°	B1 SENNH-1065B-SR	U1900, G1900	0/3	RAV	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA
Gamma	125°	225°	C1 SENNH-1065B-SR	L2100	0/3	RAV	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA

NOTES:

1. CONFIRM WITH MICHELEC REP FOR APPLICABLE REVISIONS AND UPDATES. MOST RECENT REVISIONS ARE DRIVEN BY THE EQUIPMENT MANUFACTURER. THIS IS NOT A FULL LIST OF ALL UNLISTED PROBLEMS.
2. CONFIRM SPACING OF PROPOSED EQUIPMENT DOES NOT CAUSE TOWER CONFLICTS IN CASE OF LOWER CLIMBERS OR HIGH WIND FRICTION.

STATUS ABBREVIATIONS:

- RAV: TO BE REMOVED
- RIN: TO BE INSTALLED
- RCM: TO BE RELOCATED
- ADD: TO BE ADDED
- DECOM: DECOMMISSIONED

JUNCTION BOX TO TRAILER: 15' RRU TO ANTENNA: 0'

FINAL ANTENNA SCHEDULE							
NON ANTENNA SUMMARY							
LOCATION	RAD	AZ	ANTENNA	BAND	MICHELEC STATUS	ADDITIONAL TOWER EQUIPMENT STATUS	NON ANTENNA SUMMARY
					D-TILT		
ALPHA	108°	20°	A1 AP/N/H-1065B-SR	L1900, U1900	0/3	ADD	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA
BETA	108°	150°	B1 AP/N/H-1065B-SR	N2500, L2500	0/3	ADD	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA
Gamma	108°	225°	C1 AP/N/H-1065B-SR	N2500, L2500	0/3	ADD	TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA TMAT722/X65B-214 TMA KRY 112 144/1 TMA

NOTES:

1. CONFIRM WITH MICHELEC REP FOR APPLICABLE REVISIONS AND UPDATES. MOST RECENT REVISIONS ARE DRIVEN BY THE EQUIPMENT MANUFACTURER. THIS IS NOT A FULL LIST OF ALL UNLISTED PROBLEMS.
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STATUS ABBREVIATIONS:

- RAV: TO BE REMOVED
- RIN: TO BE INSTALLED
- RCM: TO BE RELOCATED
- ADD: TO BE ADDED
- DECOM: DECOMMISSIONED

JUNCTION BOX TO TRAILER: 15' RRU TO ANTENNA: 0'

FINAL FIBER DISTRIBUTION / O/P BOX							
EXISTING CABLING SUMMARY							
MODEL NUMBER	STATUS	COAX	HYBRID	STATUS	COAX	HYBRID	STATUS
-	-	(6) 1 1/4"	-	-	R/W	(3) 1 5/8"	ADD
-	-	(6) 1 1/4"	-	-	R/W	(6) 1 1/4"	R/W
-	-	(3) 3/8"	CONTROL CABLE	-	R/W	(6) 1 1/4"	DECOM

■ ■ ■ Equipment Schedules ■ ■ ■

3



Kimley»Horn

COA: 80369
1 NORTH LEXINGTON AVE, SUITE 505
NEW YORK, NY 10001

REF.	DESCRIPTION	BY DATE
▲	PRELIM.	SINN, RANDI 07/07/21
△	ISSUED FOR CONSTRUCTION.	SINN, RANDI 08/20/21
△	REVISED FOR CLIENT.	GX_08/20/21
△		

ATC SITE NUMBER:	413161
ATC SITE NAME:	BALDWINSVILLE NY SQA
MOBILE SITE NAME:	BVILLE EAST
SITE ADDRESS:	264 BELGIUM RD, BALDWINSVILLE, NY 13027
SEAL:	

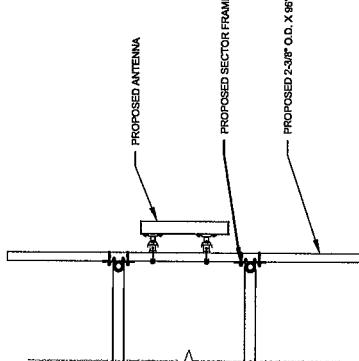
EXP. - 4/30/23

T. Mobile

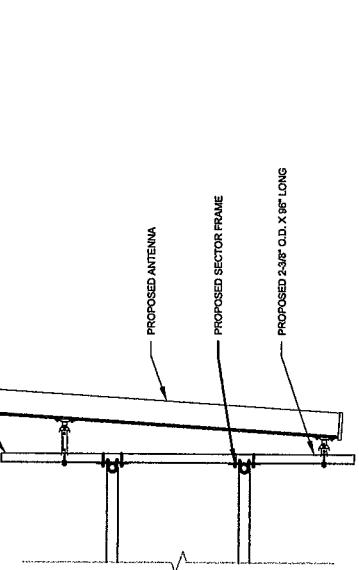
DATE DRAWN:	04/07/21
ATC DBN NO:	1354484-1
CUSTOMER ID:	BVILLE-EAST
CUSTOMER #:	30NS014B

CONSTRUCTION DETAILS

SHEET NUMBER:	C-501
REVISION:	1

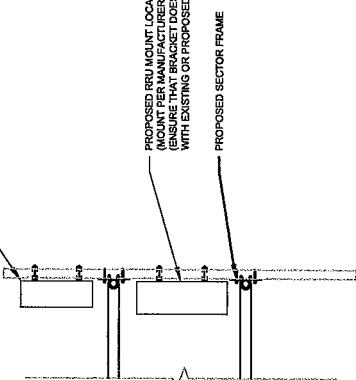


2 PROPOSED 5G ANTENNA MOUNTING DETAIL - TYPICAL
SCALE: N.T.S.

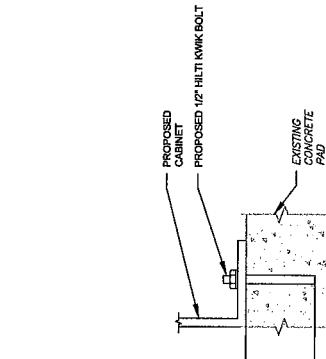


1 PROPOSED ANTENNA MOUNTING DETAIL - TYPICAL
SCALE: N.T.S.

PROPOSED RRU MOUNT LOCATION (OPTION 1)
(MOUNT PER MANUFACTURER'S SPEC)
(ENSURE THAT BRACKET DOES NOT CONFLICT
WITH EXISTING OR PROPOSED EQUIPMENT)



3 PROPOSED RRU MOUNTING DETAIL - TYPICAL
SCALE: N.T.S.



NOTE:
INSTALL HILTI KWIK BOLT ANCHORS STRICTLY PER
INSTALLATION INSTRUCTIONS INCLUDED WITH PRODUCT OR
FOUND ONLINE AT WWW.US.HILTI.COM. PROPER
INSTALLATION IS CRITICAL FOR FULL PERFORMANCE.

4 CABINET ATTACHMENT DETAIL
SCALE: NOT TO SCALE



Kimley » Horn

COA: 80369
1 NORTH LEONARD AVE, SUITE 505
NEW YORK, NY 10031

REV. DESCRIPTION BY DATE
A PRELIM. SAN JACINTO
A ISSUED FOR CONSTRUCTION, SAN JACINTO
A REVISED PER CLIENT SAN JACINTO

ATC SITE NUMBER:
413161

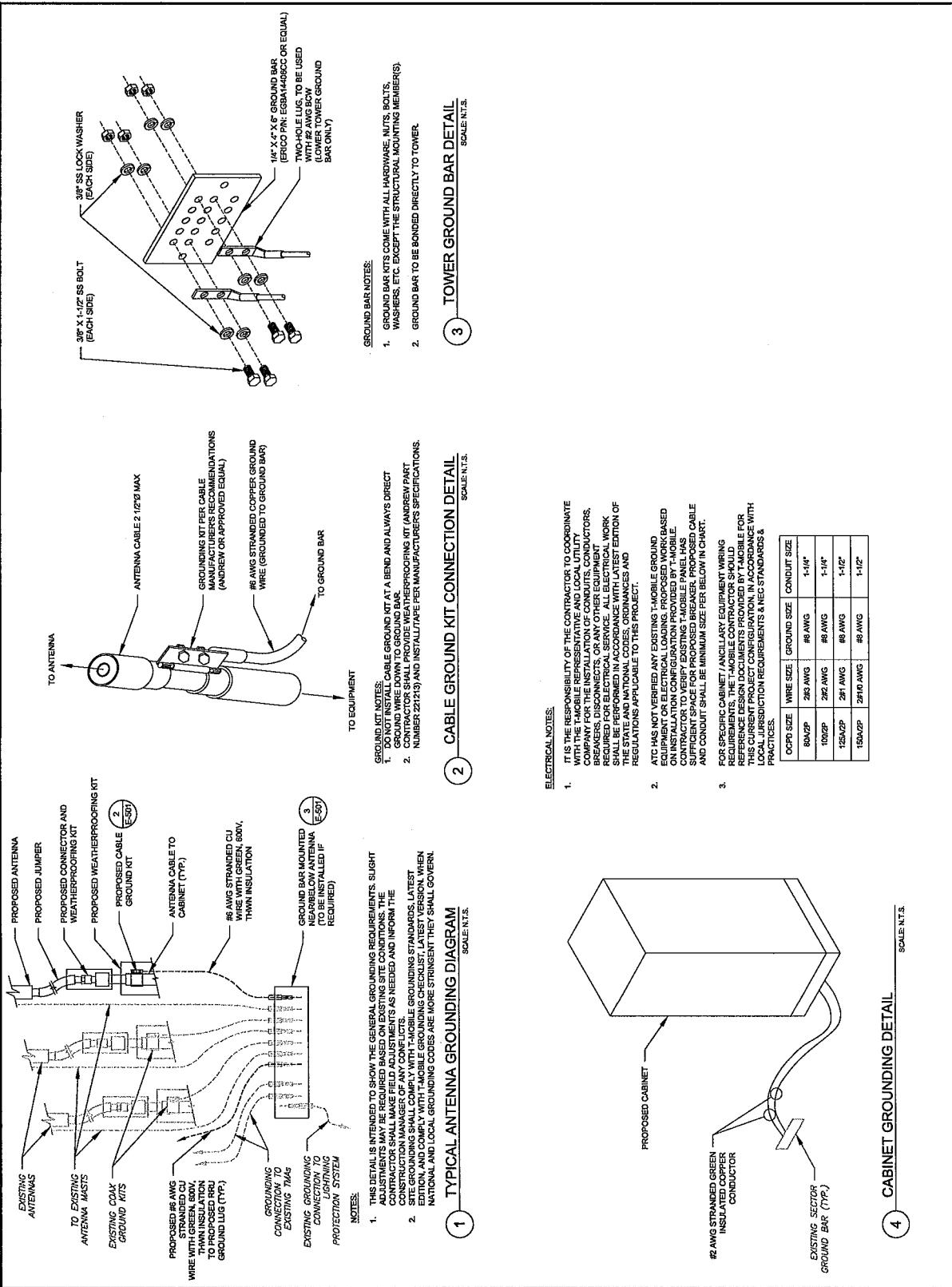
ATC SITE NAME:
BALDWINSVILLE NY SOA

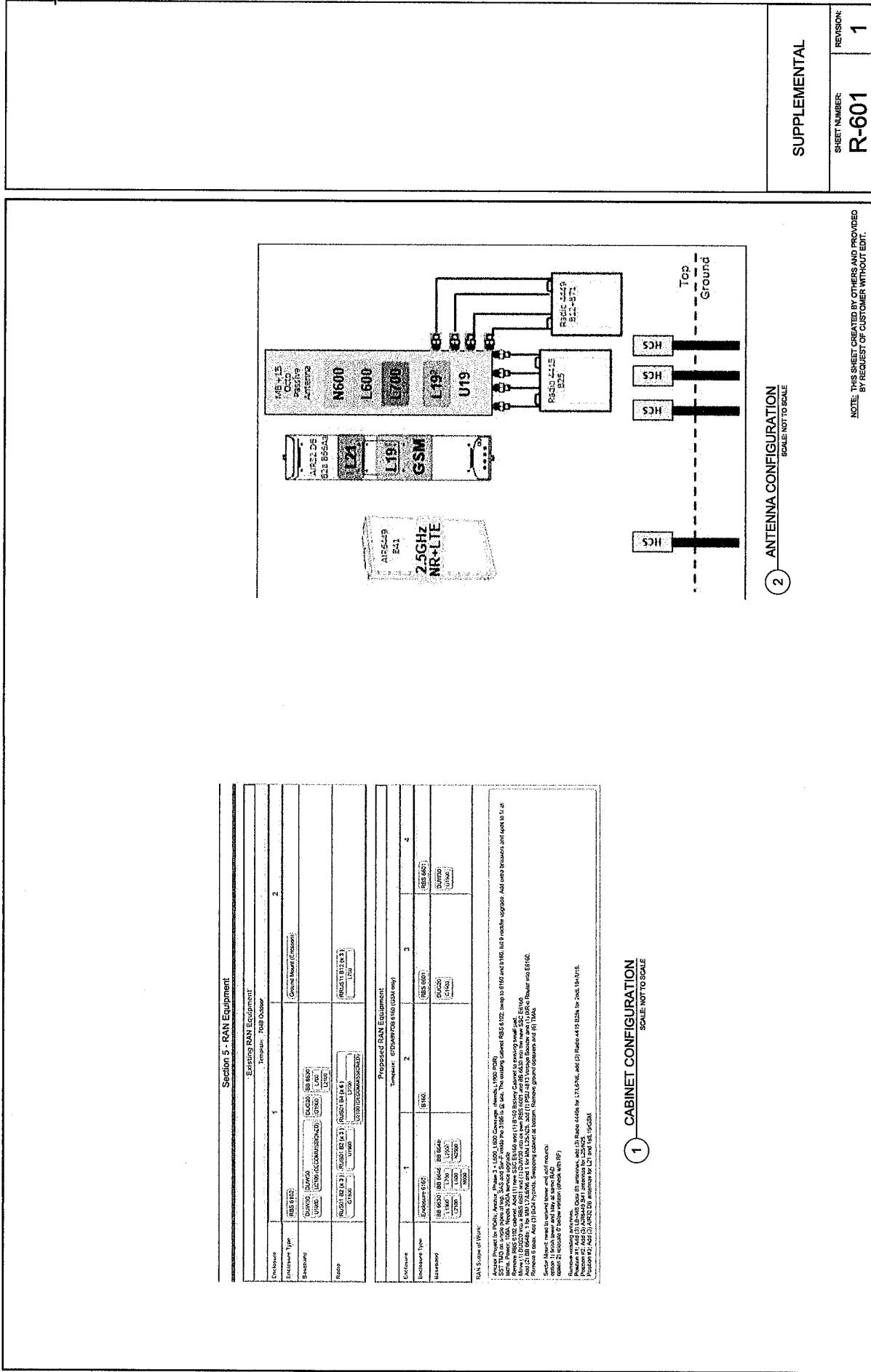


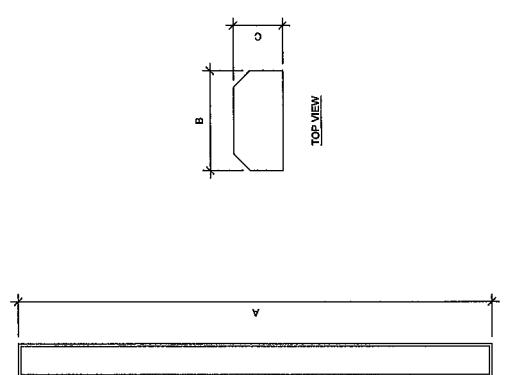
REV. DESCRIPTION BY DATE
A PRELIM. SAN JACINTO
A ISSUED FOR CONSTRUCTION, SAN JACINTO
A REVISED PER CLIENT SAN JACINTO

DATE DRAWN: 04/07/2014
ATC/ADN NO.: 13544614
CUSTOMER ID: BVILLE_EAST
CUSTOMER #: 30302148

SHEET NUMBER: **E-501** REVISION: **1**

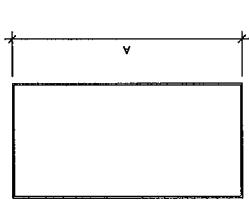




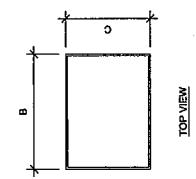


1 ANTENNA SPECIFICATIONS
FOR ILLUSTRATIVE PURPOSES ONLY - NOT TO SCALE

ANTENNA SPECIFICATIONS				WEIGHT (LBS)
ANTENNA MODEL	A	B	C	
APWA1124-45-LN420	55.9"	24.0"	8.5"	122.8
AIR3449 B41	33.1"	20.6"	8.6"	104.0
AIR32 BBBAW2A	56.5	12.9"	8.7"	132.2



FRONT VIEW



TOP VIEW

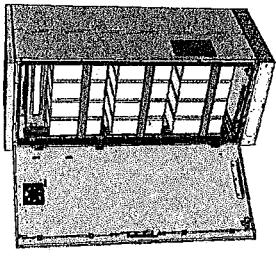
2 RRU SPECIFICATIONS
FOR ILLUSTRATIVE PURPOSES ONLY - NOT TO SCALE

RRU SPECIFICATIONS			
RRU MODEL	A	B	C
RADIO 4449 B71 BB5A	15.0"	13.2"	10.5"
RRUS 4415 B25	16.5"	13.4"	5.9"

SUPPLEMENTAL

SHEET NUMBER: R-602
REVISION: 1

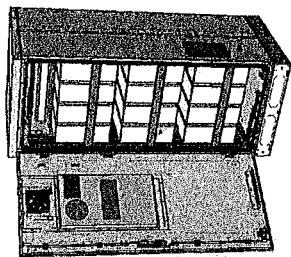
Enclosure B160



Enclosure B160
AirCon + VRLA

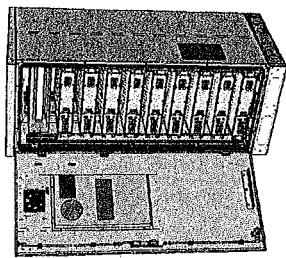
PdL | 2014-02-01 | Enclosure B160 | Page 2

Enclosure B160



Enclosure B160
AirCon + Li-Ion

PdL | 2014-02-01 | Enclosure B160 | Page 2



Enclosure B160
Convection Cooling
+ VRLA

- | | | | |
|--------------------------|---|-----------------------------|--------------------|
| Capacity | 100Ah / 150Ah / 170Ah / 190Ah / 220Ah | Environmental specification | VDE A/Sodium IP44 |
| — | VRU A 12V | — | Li-Ion IP55 |
| — | Li-Ion: | — | 15-100% |
| — | Scadium-Nickel: | — | Reactive humidity: |
| — | 3k F1ANM | — | Climate system: |
| Electrical specification | | — | Air Conditioner |
| — | DC Output: | — | — |
| — | -48VDC/200A | — | Fan type: |
| — | Battery breakers: | — | DC |
| — | 2x 125/2P | — | 50@11 @35/135 |
| — | Door open, Limite failure, MCB Connection | — | Cooling capacity: |
| Mechanical specification | | — | Convection cooling |
| — | Alarms: | — | — |
| — | 134kg | — | Emergency fan |
| — | Dimensions: | — | |
| — | 63 x 26 x 26 in. (incl. Base frame) | — | |
| — | Base frame height: | — | |
| — | 6 in. | — | |
| — | Material: | — | |
| — | Galvanized steel (108g/m ²) | — | |
| — | Powder paint ICS 2802-B | — | |
| — | Color: | — | |
| — | Front access | — | |
| — | Door: | — | |
| — | Locking type: | — | |
| | Pad lock / Cylinder | | |

- | | | | |
|--------------------------|---|-----------------------------|--------------------|
| Capacity | 100Ah / 150Ah / 170Ah / 190Ah / 220Ah | Environmental specification | VDE A/Sodium IP44 |
| — | VRU A 12V | — | Li-Ion IP55 |
| — | Li-Ion: | — | 15-100% |
| — | Scadium-Nickel: | — | Reactive humidity: |
| — | 3k F1ANM | — | Climate system: |
| Electrical specification | | — | Air Conditioner |
| — | DC Output: | — | — |
| — | -48VDC/200A | — | Fan type: |
| — | Battery breakers: | — | DC |
| — | 2x 125/2P | — | 50@11 @35/135 |
| — | Door open, Limite failure, MCB Connection | — | Cooling capacity: |
| Mechanical specification | | — | Convection cooling |
| — | Alarms: | — | — |
| — | 134kg | — | Emergency fan |
| — | Dimensions: | — | |
| — | 63 x 26 x 26 in. (incl. Base frame) | — | |
| — | Base frame height: | — | |
| — | 6 in. | — | |
| — | Material: | — | |
| — | Galvanized steel (108g/m ²) | — | |
| — | Powder paint ICS 2802-B | — | |
| — | Color: | — | |
| — | Front access | — | |
| — | Door: | — | |
| — | Locking type: | — | |
| | Pad lock / Cylinder | | |

PdL | 2014-02-01 | Enclosure B160 | Page 2

SHEET NUMBER:	R-603
REVISION:	1

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SUPPLEMENTAL

Enclosure 6160 AC

The Enclosure 6160 is a multi-purpose site cabinet designed to support a multitude of equipment such as ERPs, Basebands, Transistor, Li-Ion battery and SPP vendor equipment. It also provides a highly capable power system and battery back-up - all in a streamlined design and minimized footprint to support cost efficient expansion of mobile broadband.

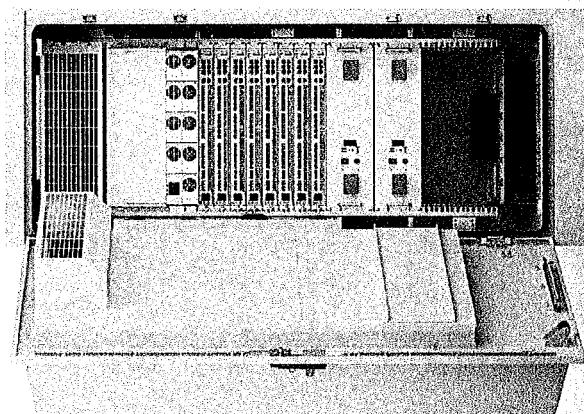
Being an all-in-one enclosure, the Enclosure 6160 is a very fitting choice for all types of sites where the capacity need is large or room for future expansion is needed. It is ideally used for maintaining existing sites or in emergency scenarios to match both current and future needs.

With a robust design IP55 compliance and a sealed front Exchanger (IEC climate system), the Enclosure 6160 ensures optimal environmental protection of the active equipment - enabling them for a long-lasting service. The complete system is also integrated and verified for the entire Ericsson Radio System and ensures best-in-class service.

The power system offers 21 bays of power that can provide 24kW of 48V DC power for both internal and external consumers.

The equipment space allows 1RU of rack space ensuring well enough capacity for existing need and future expansion.

One of the main advantages of the Enclosure 6160 is its default integration with ENM, allowing for advanced remote monitoring and control such as a fault management (failure, inventory, management and performance) measures. The cabinet also provides an open O&M interface for integration to SPP Cloud systems.



Preliminary technical specification for Enclosure 6160 AC

MECHANICAL SPECIFICATION	
CAPACITY	Rack space user equipment 19U (15" rack)
Hardware capabilities	Power and CPRI support for multi-standard remote radios (RRU or AIR) ERS Baseband and Transport units Li-ion batteries SPP equipment
	Additional power feed available as option
WEIGHT	145 kg (excluding active equipment) 230 lbs (excluding active equipment)
Dimensions (H x W x D)	1600 x 650 x 650 mm (incl. Base frame) 63 x 26 x 26 in. (incl. Base frame)
Base frame height	150 mm
Mounting position	6 in.
Enclosure material	Ground Aluminum
Color	Power paint NCS 2002-6
Door	Front access
Rack type	19" (IEC 60297-3-100)
Locking type	Pad lock or Cylinder
POWER SYSTEM	
Input voltage	3P+N+PE 345/230-415/240 VAC 2P+N+PE 238/120-230/127 VAC 1P+N+PE 200-250 VAC
Input power	<3.3kW
Output feed (48VDC)	24kW
Total capacity (<48VDC)	31.5kW
AC SPD	Class 2/Type 2
DC SPD	Class 2/Type 2
PSU Slots	9x
Service outlet	Optional
Priary load	6x Circuit Breaker
LLVD 1	LLVD 1
LLVD 2	LLVD 2
CB ratings	CB ratings
Battery interface	2x Circuit Breaker
Battery/Circuit Breaker rating	125A/250 (200A)
PSU capacity	3500W

SUPPLEMENTAL

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SHEET NUMBER: R-604
REVISION: 1

AMERICAN TOWER[®]
CORPORATION



Eng. Number 13544814_C8_03
March 22, 2021
Page 1

AMERICAN TOWER[®]
CORPORATION

Antenna Mount Analysis Report

ATC Site Name : Baldwinsville NY SQA, NY
ATC Site Number : 413161
Engineering Number : 13544814_C8_03
Mount Elevation : 108 ft
Carrier : T-Mobile

Carrier Site Name : bville_east
Carrier Site Number : 3ONS148

Site Location : 2846 Belgium Rd
Baldwinsville, NY 13027-8839
43.163439, -76.311661
County : Onondaga
Date : March 22, 2021
Max Usage : 52%
Result : Pass

Prepared By:
Max Carter
Structural Engineer I



102024
LICENSED PROFESSIONAL ENGINEER
Max Carter
22 Mar 2021 10:39:28 COSIGN
Max Carter

COA: 0012746

A.T. Engineering Services, PLLC - 3500 Regency Parkway, Suite 300 - Cary, NC 27515 - 919.468.0112 Office - 919.465.5414 Fax - www.americantower.com

Introduction

The purpose of this report is to summarize results of the antenna mount analysis performed for T-Mobile at 108 ft.

Supporting Documents

Specifications Sheet	Site Pro 1 VFA12-HD, dated June 29, 2018
Radio Frequency Data Sheet	RFDS ID #3ONS0148, dated February 10, 2021

Analysis

This antenna mount was analyzed using American Tower Corporation's Mount Analysis Program and RISA-3D

Basic Wind Speed:	109 mph (3-Second Gust)
Basic Wind Speed w/ Ice:	140 mph (3-Second Gust) w/ 1 1/2" radial ice concurrent
Codes:	ANSI/IA-22-17 / 2018 IBC / 2020 New York Building Code
Exposure Category:	B
Risk Category:	II
Topographic Factor Procedure:	Method 2
Feature:	Flat
Crest Height (H):	0 ft
Crest Length (L):	0 ft
Spectral Response:	Ss = 0.13; St = 0.01
Site Class:	D - Stiff Soil
Live Loads:	Lm = 500 lbs, Ly = 250 lbs

Conclusion

Based on the analysis results, the antenna mount meets the requirements per the applicable codes listed above. The mount can support the equipment as described in this report.

- Analysis is based on Site Pro 1 VFA12-HD or approved equivalents.

If you have any questions or require additional information, please contact American Tower via email at Engineering@americantower.com. Please include the American Tower site name, site number, and engineering number in the subject line for any questions.

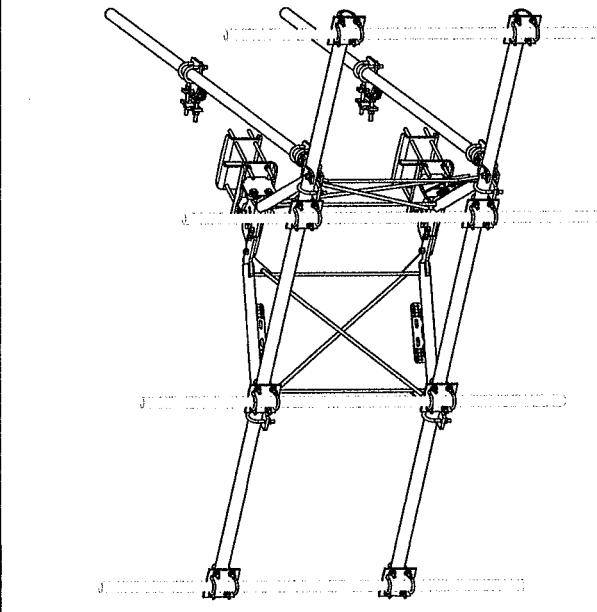
SUPPLEMENTAL

1 MOUNT ANALYSIS

NOTE: THIS SHEET WAS CREATED BY OTHERS AND PROVIDED AT THE REQUEST OF THE CUSTOMER
WITHOUT EDIT. PLEASE REFERENCE THE MOUNT ANALYSIS REPORT FOR COMPLETE MOUNT
ANALYSIS CALCULATIONS AND DETAILS. SUPPLEMENTAL PAGES INCLUDED IN THE
CONSTRUCTION DRAWINGS ARE FOR REFERENCE ONLY. GENERAL CONTRACTOR IS
TO VERIFY THEY HAVE THE MOST RECENT MOUNT ANALYSIS PRIOR TO CONSTRUCTION.

ITEM	CITY	PART NO.	PART DESC.	LENGTH	UNIVIT.	NET WT.
1	2	X-FAFW	SUPPORT ARM	71.44	145.81	
2	1	X-HDCAINTW	CLAMP/WELDMENT FOR BACKHOLD	33.88	33.88	
3	2	X-AMTPHD	MULTI-HOLE PLATE WELDMENT	36.24	36.24	
4	2	X-FAFPLA	VFA-HD PLATE PLATE	12 in	15.88	31.77
5	2	X-CLBPA	BENT BACKING PLATE	13 in	16.00	38.01
6	1	X-HDCAINTS	ANGLE ADJUSTMENT WELDMENT FOR BACKHOLD	16.39	16.39	
7	4	X-SPTB	SLIDING SPTE THE BACK PLATE	5.51 in	5.87	23.49
8	1	X-HDCAINTP	POSITIONING PLATE WELDMENT FOR BACKHOLD	2.58	2.58	
9	4	X-TCBKA	THE BACK CUP ANGLE	2.01	6.02	
10	8	SCZC	CROSSOVER PLATE	7 in	30.37	
11	4	WCF	CLAMP HALF (2 THICK, 1.58" LONG)	4.88	14.87	
12	6	DOP	1/2" THICK, 5/8" CENTER TO CENTER CLAMP HALF	8.75 in	2.59	
13	2	P225	2-3/8" X 1-1/2" (2" SCH 40) GALVANIZED PIPE	12.50 in	10.90	
14	2	P250	2-3/8" X 1-1/2" (2" SCH 40) GALVANIZED PIPE	12.50 in	40.75	61.50
15	4	A52672	3/8" X 2-1/2" UNC HEX BOLT (AS293)	2.92 in	0.45	1.82
16	4	C52679	3/8" X 1-1/2" UNC HEX WASHER	0.25 in	0.25	0.25
17	4	C52680	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
18	4	C52681	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
19	8	C52682	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
20	4	C52683	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
21	4	C52684	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
22	4	C52685	3/8" X 1-1/2" UNC SS SLAT WASHER	0.25 in	0.25	0.25
23	8	X-UB520	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT (USC T-12)	1.43 in	4.60	
24	2	C52692	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT HEAD	1.09 in	8.05	
25	1	C52693	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT GRS. FULL THREHEAD	1.41 in	0.70	
26	8	C52694	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT GRS. FULL THREHEAD	0.65 in	0.65	
27	4	C52695	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT TUBE	0.65 in	0.65	
28	8	A52114	5/8" X 2-1/2" (1/2" SCH 40) U-BOLT TUBE	0.23 in	0.23	
29	26	C52696	5/8" HDG U-BOLT WASHER	0.31 in	2.50	
30	68	C52698	5/8" HDG U-BOLT WASHER	0.19 in	0.19	
31	71	C52699	5/8" HDG HEAVY 2B HEX NUT	0.19 in	1.72	
32	32	X-UB520	12" X 2-3/8" X 2-1/2" GALV U-BOLT	0.74 in	9.22	
33	16	X-UB522	12" X 2-3/8" X 2-1/2" GALV U-BOLT (HARD)	0.60 in	23.54	
34	64	C512EW	1/2" HDG U-BOLT WASHER	0.03 in	0.03	
35	64	C512LW	1/2" HDG LOCKNUT WASHER	0.18 in	0.18	
36	64	Q12AUT	1/2" HDG HEAVY 2B HEX NUT	0.07 in	4.55	

PARTS LIST						
ITEM	CITY	PART NO.	PART DESC.	LENGTH	UNIVIT.	NET WT.
1	2	X-FAFW	SUPPORT ARM	71.44	145.81	
2	1	X-HDCAINTW	CLAMP/WELDMENT FOR BACKHOLD	33.88	33.88	
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13	2	P225	2-3/8" X 1-1/2" (2" SCH 40) GALVANIZED PIPE	12.50 in	40.75	61.50
14	2	P250	2-3/8" X 1-1/2" (2" SCH 40) GALVANIZED PIPE	12.50 in	16.39	78.06



TOLERANCE NOTES

12"-6" HEAVY DUTY
V-FRAME ASSEMBLY
WITH TWO STIFF ARMSSITES
PROEngineering
Services
1-868-752-7448
Alviantech
1000 University
Lane, Suite 100
Dallas, TXA Division of
Alviantech

www.sitespro.com

www.alviantech.com

Property Description Report For: 2846 Belgium Rd, Municipality of Town of Lysander

<i>No Photo Available</i>		Status: Active
		Roll Section: Utility/RR
		Swis: 313689
		Tax Map ID #: 058-06-07.2
		Property #:
		Property Class: 837 - Cell Tower
		Site: COM 1
		In Ag. District: No
		Site Property Class: 837 - Cell Tower
		Zoning Code: PUD
		Neighborhood Code: 00034
Total Acreage/Size:	1.13	School District: Baldwinsville
Land Assessment:	2022 - Tentative \$45,200 2021 - \$45,200	Total Assessment: 2022 - Tentative \$180,000 2021 - \$180,000
Full Market Value:	2022 - Tentative \$180,000 2021 - \$180,000	
Equalization Rate:	----	Property Desc: Cell Tower
Deed Book:	4023	Deed Page: 261
Grid East:	572392	Grid North: 1152718

Owners

Syracuse SMSA Ltd Ptnrshp
P.O. Box 2549
Addison TX 75001

Sales

Sale Date	Price	Property Class	Sale Type	Prior Owner	Value Usable	Arms Length	Addl. Parcels	Deed Book and Page
8/28/1995	\$57,100	311 - Res vac land	Land Only	Nys Urban Development	Yes	Yes	No	4023/261

Utilities

Sewer Type:	Comm/public	Water Supply:	Comm/public
Utilities:	Gas & elec		

Inventory

Overall Eff Year Built:	Overall Condition:	0
Overall Grade:	Overall Desirability:	3

Buildings

AC%	Sprinkler%	Alarm%	Elevators	Type	Eff	Year Built	Year Built	Condition	Gross Floor Area (sqft)	Num Stories	Indent Bldgs
					Basement						

Improvements

Structure	Size	Grade	Condition	Year
Misc. imprv.	1 x 0	Average	Normal	1995
Shed-machine	11 x 26	Average	Normal	1995
Fence-chn lk	6 x 164	Average	Normal	1995
Patio-concr	72.00 sq ft	Average	Normal	1995
Misc. imprv.	1 x 0	Average	Normal	1997
Misc. imprv.	1 x 0	Average	Normal	1999

Special Districts for 2022 (Tentative)

Description	Units	Percent	Type	Value
CSW13-Onon co san ns	1	0%		0
CWR50-County water e	0	0%		0
FR017-Belgium cold sprgs f	0	0%		0
LT032-Radisson Igt	0	0%		0
SW076-Radisson sew mainten	1	0%		0
WT002-Radisson wat sup	0	0%		0

Special Districts for 2021

Description	Units	Percent	Type	Value
CSW13-Onon co san ns	1	0%		0
CWR50-County water e	0	0%		0
FR017-Belgium cold sprgs f	0	0%		0
LT032-Radisson Igt	0	0%		0
SW076-Radisson sew mainten	1	0%		0
WT002-Radisson wat sup	0	0%		0

Exemptions

Year	Description	Amount	Exempt %	Start Yr	End Yr	V Flag	H Code	Own %
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Taxes

Year	Description	Amount
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*** Taxes reflect exemptions, but may not include recent changes in assessment.**