

Syracuse Zoning Administration

Application for Certificate of Suitability

City Hall Commons* Room 101* 201 East Washington Street* Syracuse, NY 13202-1426* 315-448-8640

Please Print or Type Information

For office use only

<input type="text"/>	<input type="text"/>	<input type="text"/>
District	Filing Date	Case #

This application applies to **non-owner occupied** properties

SUBJECT PROPERTY

Address: 745 Euclid Ave, Syracuse, NY

Number of Units: 1

OWNER/CURRENT TITLEHOLDER

Name(s): EXPERIENCE HOUSING

Mailing Address: 9102 Whistling Swan Way, Manlius, NY

Zip: 13104

Daytime Phone:

Home Phone:

e-mail (alternate contact for additional information request): steve.vassallo@gmail.com

CONTRACT PURCHASER (if applicable) If Contract Purchaser box is checked, then a copy of Contract to purchase must be included with this application.

Contract Purchaser Co-applicant

Name:

Mailing Address:

Zip:

Daytime Phone:

Home Phone:

e-mail (alternate contact for additional information request):

PROPERTY MANAGER or other Representative (if applicable)

Name:

Mailing Address:

Zip:

Contact Phone:

Relationship:

Please answer the following QUESTIONS:

1) Is land contract applicable to this property? Yes No - If yes, a copy of the land contract must be provided.

2) Is the land contract recorded? Yes No Date of anticipated transfer of title:

3) Will there be structural changes (including heating, plumbing, electrical or carpentry work) and/or changes to the grounds and parking arrangement? Yes No Explain: SEE ATTACHED DRAWING

Are there any circumstances or decisions (Variances, etc.) that you wish to call attention which bear on grandfathered or nonconforming features of the subject property? Yes No

Explain:

REQUIRED SUBMITTALS

One full size copy and one reduced copy (no larger than 11" by 17") of the following items must be submitted as part of this application; the application will not be considered complete without them.

- PROPERTY SURVEY** – Copy of the latest survey drawn by a licensed surveyor; survey must be accurate, illustrate all of structures on the property, and drawn to scale.
- SITE PLAN** – Site plan must be drawn at same scale as survey showing the location and dimensions of all driveways and parking areas, screening devices, walls, and hedges flanking the driveways and parking areas (If such information is shown on the survey, no site plan is necessary)
- FLOOR PLANS** – for each floor of habitable space (MUST BE DRAWN TO SCALE)
 - a. Scale not less than 1/8" = 1'
 - b. Each dwelling unit clearly outlined
 - c. Each room labeled with dimensions and intended use
 - d. Location of all doors and closets
 - e. Location of all plumbing fixtures (sinks, toilets, showers, etc.)
 - f. Location of all cooking facilities (stoves, hotplates, ovens, etc.)

** Floor plans need not be drawn by a professional if plans are accurate, drawn to scale, dimensioned, and have lines drawn with a straightedge.*

- STATE ENVIRONMENTAL QUALITY REVIEW ACT FORM** – Part I filled out completely and signed by applicant or owner

** If this form is being filled out on-line, you must print an original copy, sign it and submit it to our office.*

DECLARATION

I understand that false statements made herein are punishable as a Class A Misdemeanor, pursuant to section 210.45 of the Penal Law of the State of New York. I declare that, subject to the penalties of perjury, any statements made on this application and any attachments are the truth and to the best of my knowledge correct.

CURRENT PROPERTY OWNER SIGNATURE

As listed on the City of Syracuse Tax Assessment Roll. If not listed as the owner on the current rolls, please include a proof of ownership, for example, a copy of the deed. Attorney's signing on behalf of the owner must include a one page letter describing the legal representative arrangement. Architects, engineers, contractors, tenants, etc. cannot sign on behalf of the property owner. If property owner is a Corporation or an Organization, then the person signing must provide verification they are a member of such, and can sign on the owners' behalf.

Stephen J. Vassallo

7/21/20

CURRENT PROPERTY OWNER SIGNATURE

DATE

STEPHEN VASSALLO *OWNER*

Please legibly PRINT SIGNATURE NAME and TITLE

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

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

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

Part 1 – Project and Sponsor Information				
Name of Action or Project: Foundation Housing				
Project Location (describe, and attach a location map): 745 Euclid Ave., Syracuse, NY				
Brief Description of Proposed Action: Repairs and alterations to existing residence				
Name of Applicant or Sponsor: David P. Colegrove		Telephone: 315-476-9935 E-Mail: dcolegrove@labellapc.com		
Address: 1860 Erie Blvd E.				
City/PO: Syracuse		State: NY	Zip Code: 13210	
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: City of Syracuse			NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		.14 acres		
b. Total acreage to be physically disturbed?		.07 acres		
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.42 acres		
4. Check all land uses that occur on, are adjoining or near the proposed action:				
<input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input 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				

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<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?	<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? 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? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? 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? 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? 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? 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"/>	
	<input checked="" type="checkbox"/>	<input 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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

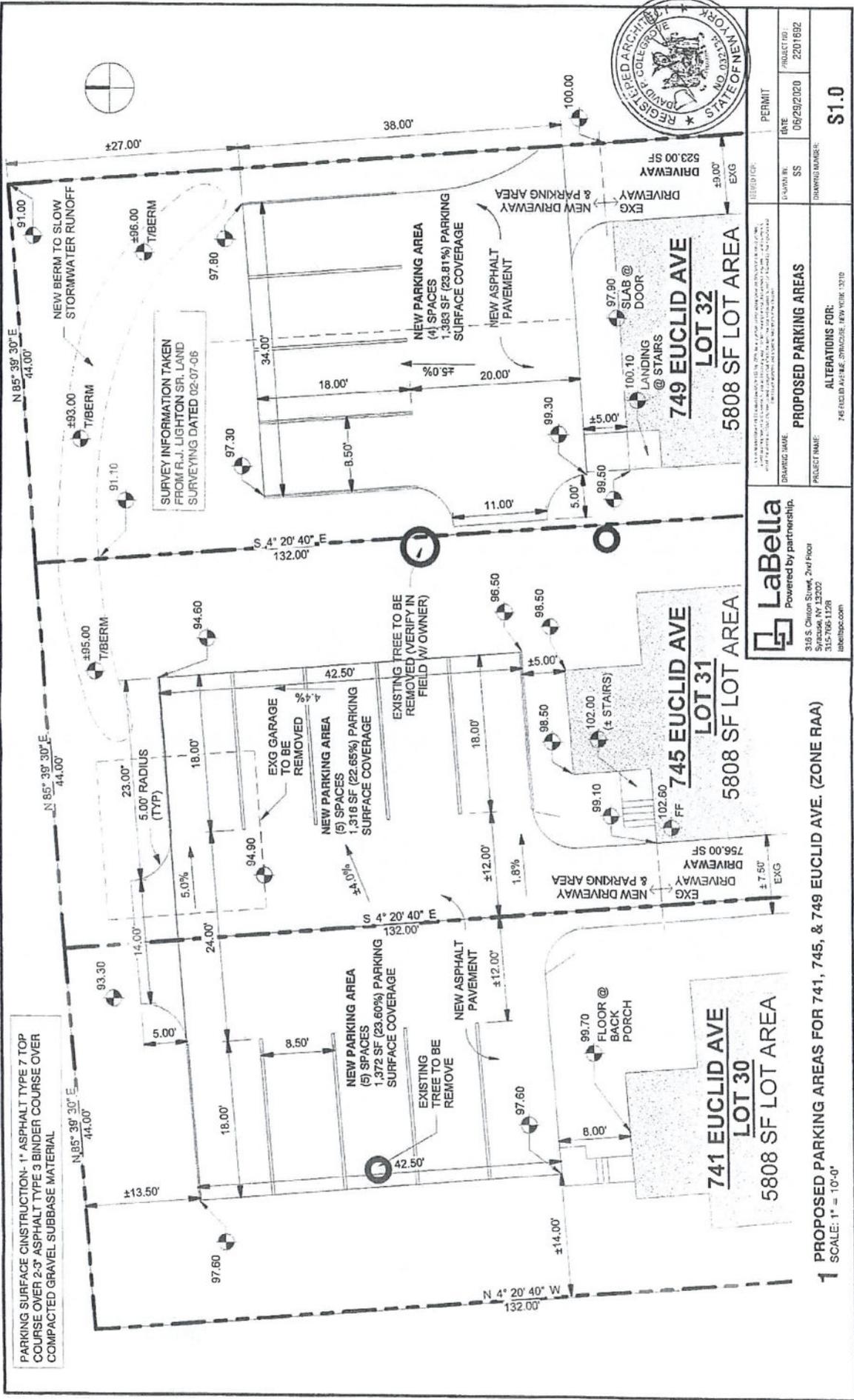
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" 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 type="checkbox"/>	YES <input checked="" 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 type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input type="checkbox"/>	<input type="checkbox"/>

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

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>DAVID P. COLEGROVE</u> Date: <u>7/21/2020</u> Signature: <u>D.P.C.</u> Title: <u>Architect</u>		



PARKING SURFACE CONSTRUCTION- 1" ASPHALT TYPE 7 TOP COURSE OVER 2-3" ASPHALT TYPE 3 BINDER COURSE OVER COMPACTED GRAVEL SUBBASE MATERIAL

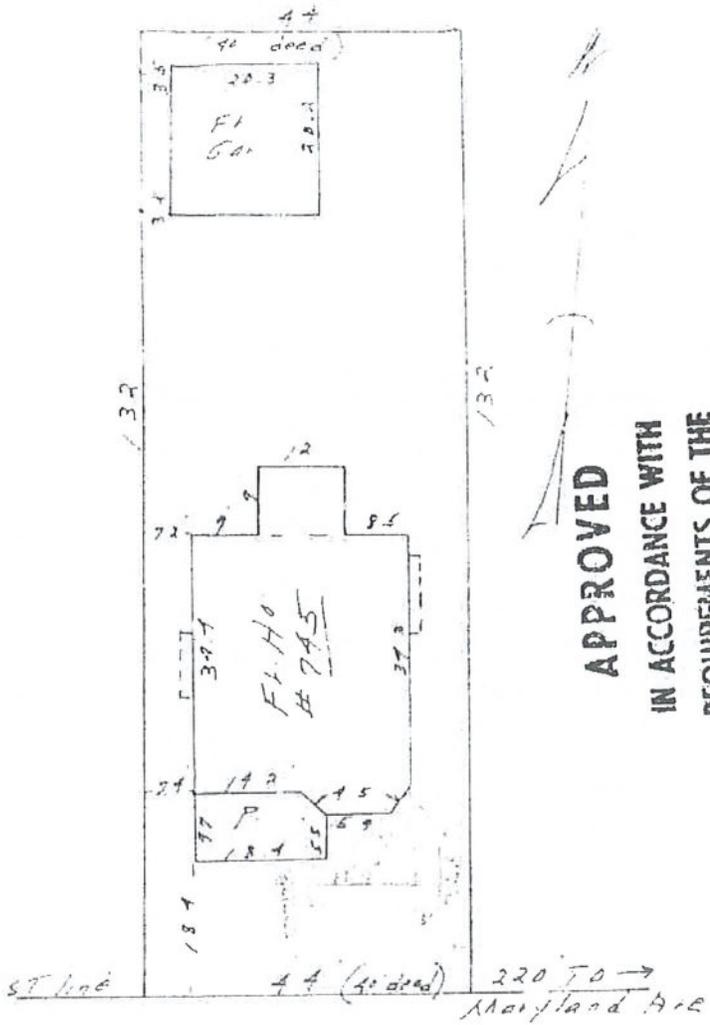
SURVEY INFORMATION TAKEN FROM R.J. LIGHTON SR. LAND SURVEYING DATED 02-07-05



PERMIT	DATE	PROJECT NO.
SS	06/29/2020	2201632
DRAWING NUMBER:	PROJECT NAME:	ALTERATIONS FOR:
	745 EUCLID AVE, SYRACUSE, NEW YORK 13210	

LaBella
 Powered by partnership.
 318 S. Clinton Street, 2nd Floor
 Syracuse, NY 13202
 315-766-1128
 labellapc.com

1 PROPOSED PARKING AREAS FOR 741, 745, & 749 EUCLID AVE. (ZONE RAA)
 SCALE: 1" = 10'-0"



Euclid Ave.

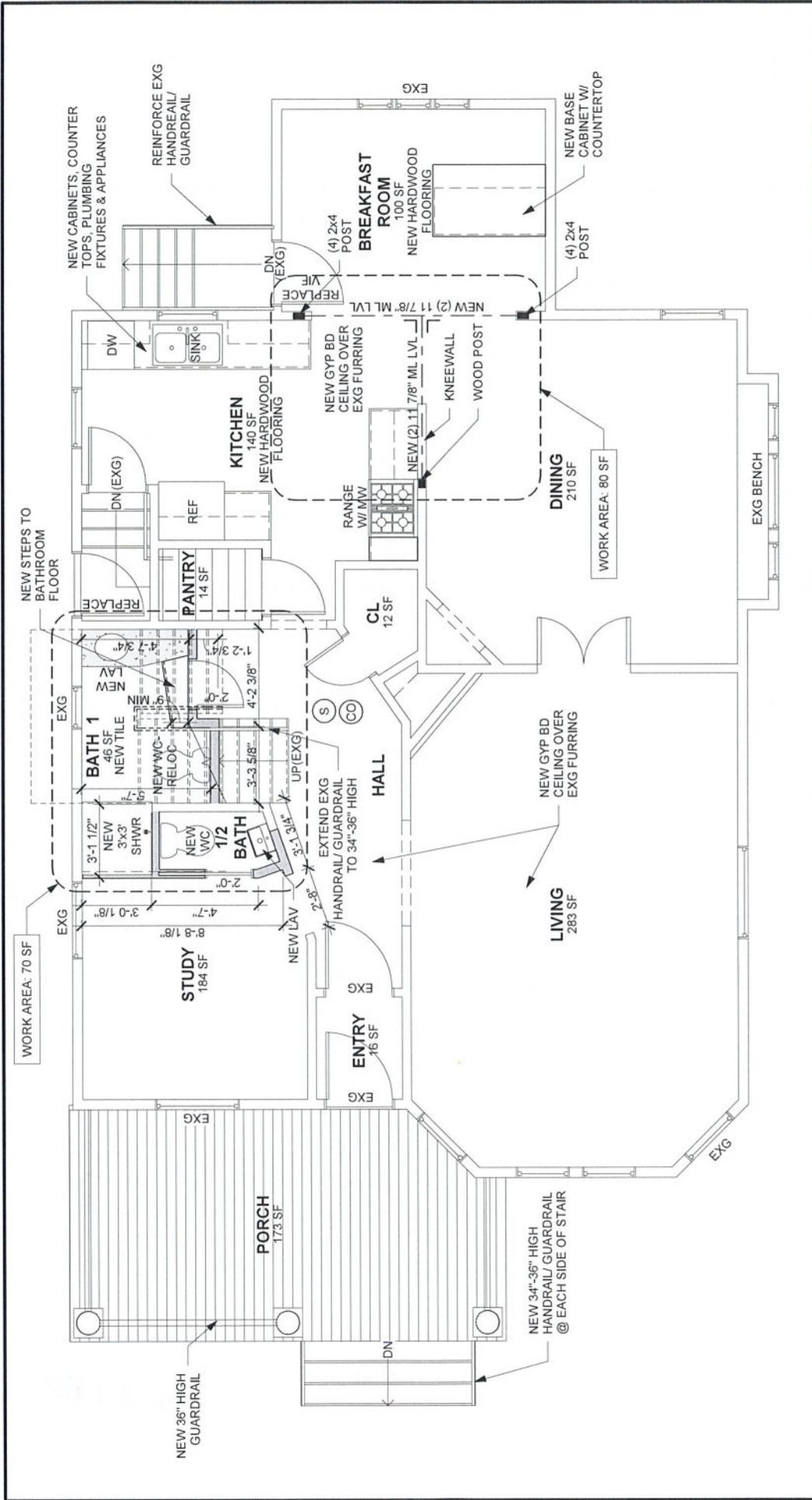
APPROVED
 IN ACCORDANCE WITH
 REQUIREMENTS OF THE
 ZONING ORDINANCE

CITY PLAN COMM
 [Signature]
 ZONING ADMINISTRATOR

Lot 31 B/K. 8
 Westminster Tract, 7809 Ave.
 Syracuse, N.Y.
 Scale 1"=20'

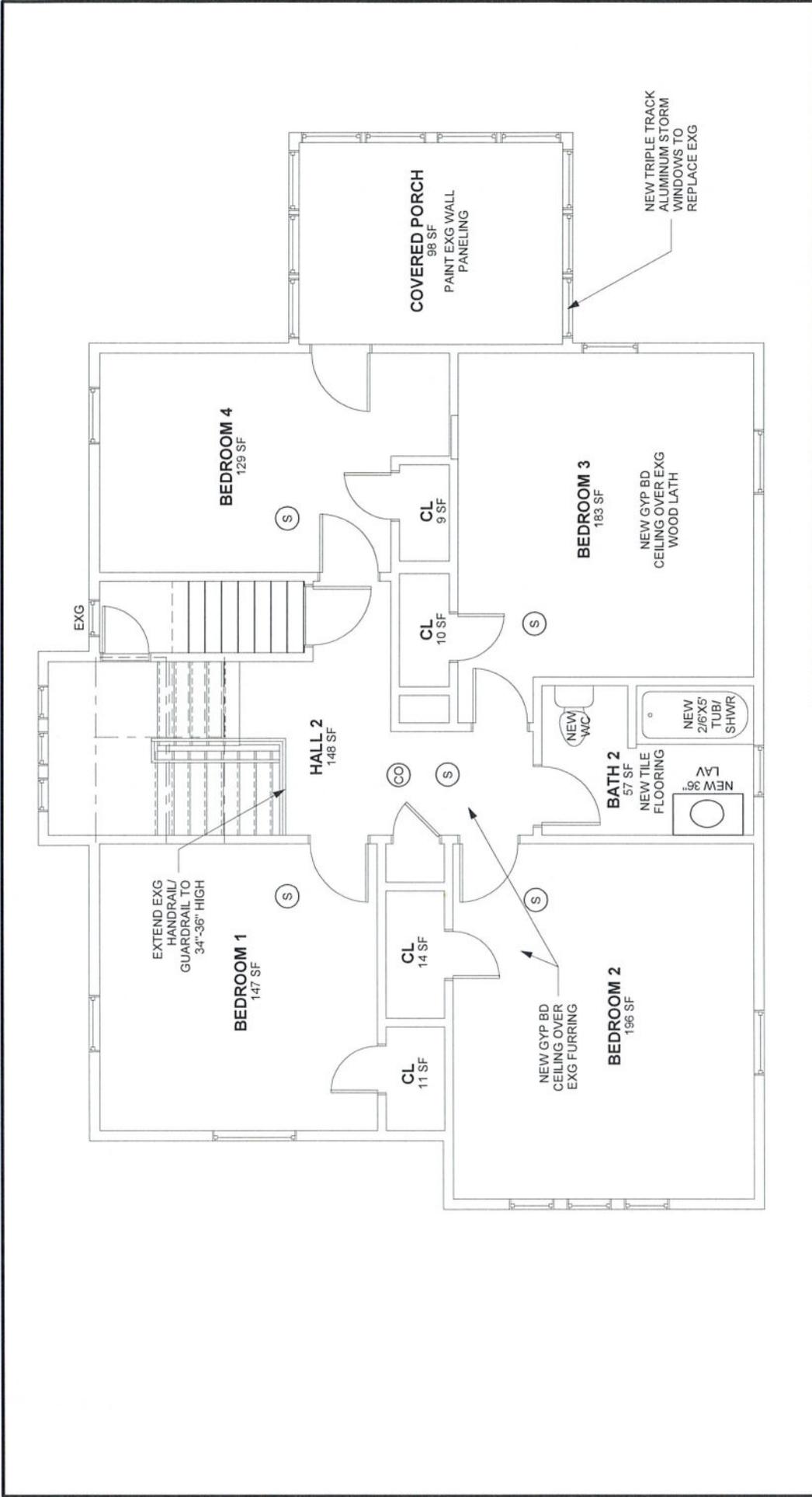
I hereby certify that this map is made from an actual survey of the property shown here, completed 7-16-87 and that both survey and map are correct.

ROBERT SHAFER
 Lic. Land Surveyor
 # 29519



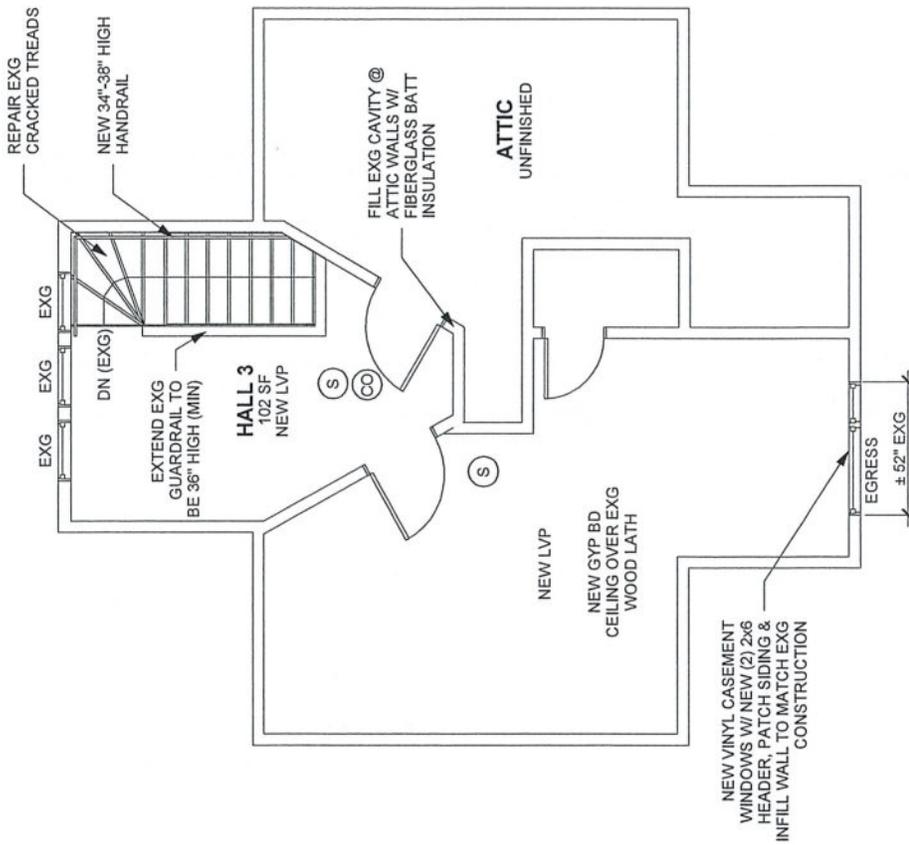
 LaBella Powered by partnership. 316 S. Clinton Street, 2nd Floor Syracuse, NY 13202 315-766-1128 labella@pc.com		SUBJECT FOR: PERMIT DATE: 06/29/2020 PROJECT NO.: 2201692 DRAWN BY: SS DRAWING NUMBER: A1.0
DRAWING NAME: FIRST FLOOR PLAN		ALTERATIONS FOR: 746 ELDRED AVENUE, SYRACUSE, NEW YORK 13210

1 FIRST FLOOR PLAN
 SCALE: 1/4" = 1'-0"



1 SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0"

 LaBella Powered by partnership. 316 S. Clinton Street, 2nd Floor Syracuse, NY 13202 315-766-1128 labellaapp.com	ISSUED FOR: PERMIT DRAWN BY: SS DATE: 06/29/2020 PROJECT NO.: 2201692
	DRAWING NAME: SECOND FLOOR PLAN PROJECT NAME: ALTERATIONS FOR: 746 EUCLID AVENUE, SYRACUSE, NEW YORK 13210 DRAWING NUMBER: A1.1



LIGHT & VENTILATION FOR BEDROOM 5 (185 SF)		
EXG	REQ'D	PROVIDED
LIGHT (8%)	7.22 SF	14.81 SF
VENT (4%)	10.00 SF	7.40 SF
		9.57 SF

*LIGHTVENT AREAS SHALL NOT BE LESS THAN EXG WINDOWS, BUT ARE NOT REQUIRED TO BE MORE THAN REQUIRED BY 2020 RCNYS



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Syracuse, NY 13202
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labellapc.com

1 ATTIC PLAN
SCALE: 1/4" = 1'-0"

ISSUED FOR:

CERTIFICATE OF SUITABILITY

DRAWING NAME:

ATTIC PLAN

PROJECT NAME:

ALTERATIONS FOR:
746 ELDRED AVENUE, SYRACUSE, NEW YORK 13210

DRAWN BY:

SS

DATE:

08/10/2020

PROJECT NO.:

22201692

DRAWING NUMBER:

A1.2

