

For office use only: District: BA Filing Date: 8/6/18 Case #: R-18-40
[] Resubdivision [] Lot Alteration

SUBJECT PROPERTY ADDRESS(ES):

1115, 1119, 1125-27 W. Genesee Street

TAX MAP NUMBERS: (of each property involved)

Section: 108.2 Block: 06 Lot: 8 Section: 108.2 Block: 06 Lot: 9
Section: 108.2 Block: 06 Lot: 10 Section: Block: Lot:

PROPERTY OWNER(S): (If more than one owner, attach additional pages)

NAME: Specialty Properties, LLC
MAILING ADDRESS: 1200 State Fair Blvd
ZIP: 13209 DAYTIME PHONE:
HOME PHONE: E-MAIL: Jim@unitedautosupply.com

REPRESENTATIVE: Attorney or Other contact: James Trasher, PE (Engineer)
(Complete only if a representative is involved with this application)

NAME: CHA Consulting, Inc.
MAILING ADDRESS: 300 S. State Street
ZIP: 13202 TELEPHONE: 315-471-3920 E-MAIL: Jtrasher@chacompanies.com

CURRENT LAND USES ON ALL INVOLVED PROPERTIES:
Autobody repair, Gymnastic studio, Office

CURRENT DESCRIPTION OF ALL STRUCTURES ON ALL INVOLVED PROPERTIES:
Currently there is a U-Shaped structure which expands across the 3 lots involved. A portion of the building is two story.

DESCRIBE THE REASON FOR YOUR REQUEST and YOUR OVERALL PROJECT IN DETAIL:

A project is proposed to tear down the Eastern poriton of building, followed by renovation of the remaining structure to for use as a daycare facility. The structure will be connected across a property line and thus it is requested to combine the properties to eliminate building code violation

IS THIS RESUBDIVISION/LOT ALTERATION PART OF A LARGER OVERALL PROJECT?
[X] YES [] NO

*NOTE: IF THE PROPOSED USE DOES NOT COMPLY WITH APPLICABLE ZONING LAWS
ADDITIONAL APPLICATIONS MAY BE NECESSARY.

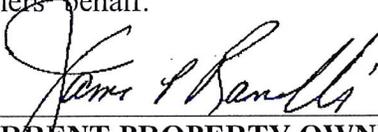
DECLARATION

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 are correct.

I also understand that any false statements and/or attachments presented knowingly in connection with this application will be considered null and void.

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.



8-2-18

CURRENT PROPERTY OWNER SIGNATURE

DATE

Jim Ranalli (Owner)

Please legibly PRINT SIGNATURE NAME and TITLE

REQUIRED SUBMITTALS

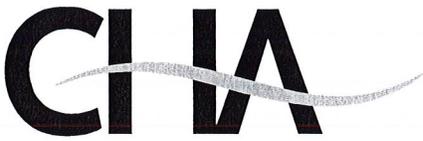
- APPLICATION** – Must be **completely filled out** including tax map numbers, and current and proposed uses of property/properties and must be signed by the property owner(s) or legal representative(s).
- SHORT ENVIRONMENTAL FORM** – Must be completely filled out (side one only) and signed.
- MAPS – RESUBDIVISION/LOT ALTERATION MAPS –**
 - a. **7 COPIES** – Drawn by a licensed land surveyor on paper. If maps are larger than 11 x 17, then a reduced copy must also be submitted.
 - b. Must show existing and proposed lot lines along with addresses and new lot numbers (see attached example). Must also illustrate all existing and any proposed physical features on the property (i.e. driveways, walkways, retaining walls, fences, etc.)
 - c. Must also contain a location map for the subject property.
 - d. Please have your land surveyor contact the Onondaga County Health Department at 315-435-6600 prior to drawing your resubdivision/lot alteration map for map requirements.

***Please note that if referrals are necessary for this application, additional copies of all required materials will be requested.**

FOR STAFF USE ONLY

REFERRAL NEEDED

- ONONDAGA COUNTY PLANNING BOARD
- SYRACUSE LANDMARK PRESERVATION BOARD (This project is located within _____ Historic District; is listed individually in the National Register of Historic Places; is Eligible for inclusion in the National Register of Historic Places; or is architecturally significant).
- OTHER CITY/COUNTY/STATE AGENCY OR DEPARTMENT(S) _____



August 3, 2018

Syracuse Zoning Administration
City Hall Commons
201 East Washington Street
Syracuse, New York 13202

**RE: Peace Daycare Facility – Lot Alteration Application
1115, 1119, 11125-27 W. Genesee Street
CHA Project No. 23278**

Dear Syracuse Zoning Administration:

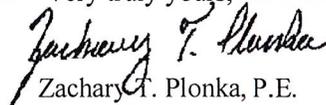
CHA, on behalf of the applicant, is pleased to submit the following Lot Alteration application for the above referenced properties. The proposed lot alteration is requested to allow proposed Peace Daycare Facility project on property which is currently divided into 3 lots. The combination of the three lots into one eliminates issues associated with having a building that crosses a property line.

A project site review application has been approved (PR 18-18).

The following materials are enclosed:

One (1) copy – Lot Alteration Application
One (1) copy – Short EAF Form
Seven (7) copies – Plat Map (Plus One (1) ½ Size)

Should you require any additional copies of these items, or have any questions related to the submission, please do not hesitate to contact me at 315-471-3920 or Zplonka@chacompanies.com

Very truly yours,

Zachary T. Plonka, P.E.
Project Engineer IV

Enclosures

Cc:

V:\Projects\ANY\K2\23278\CADD\Concept\1115-1127 W. Genesee St\PEACE SITEPLAN\Corres\Applications\Lot Alteration_8-2-18\0 - Lot Combination-8-3-18.doc

Short Environmental Assessment Form

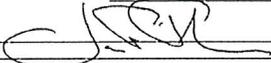
Part 1 - Project Information

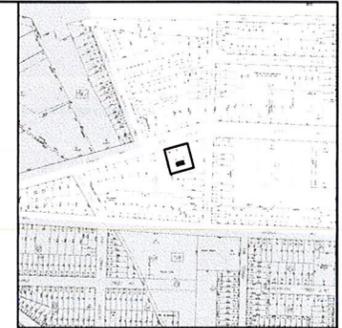
Instructions for Completing

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.

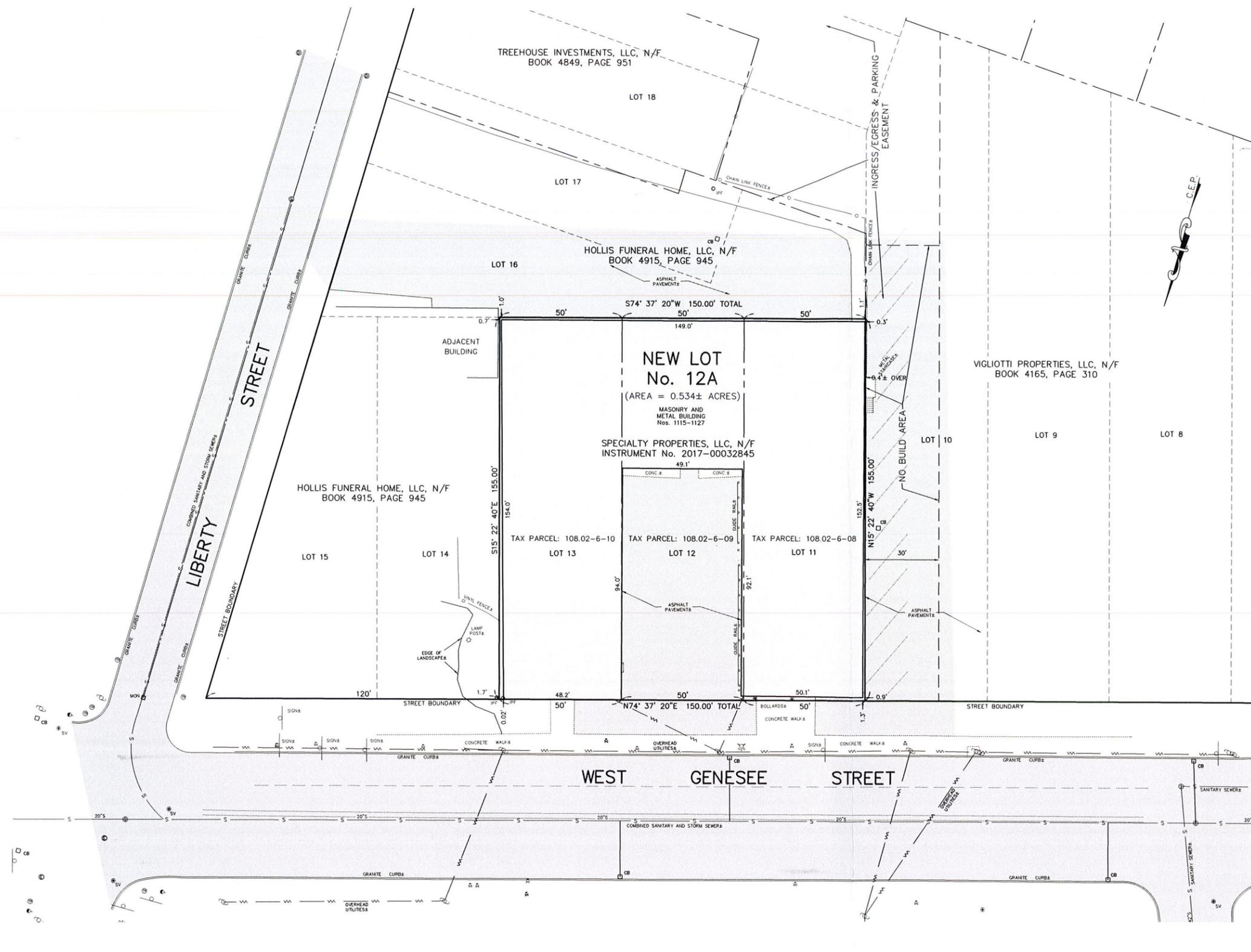
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

| Part 1 - Project and Sponsor Information | | | | |
|--|--|--|---|--|
| Name of Action or Project: Peace Daycare Facility (Lot Alteration Application) | | | | |
| Project Location (describe, and attach a location map): 1115-1119 W. Genesee Street | | | | |
| Brief Description of Proposed Action: Proposed project includes demolition or one existing structure on site followed by remodeling the remaining structure for use as a daycare facility. Site work will include new parking and driveways along with incidental sidewalk and ROW work. Existing utilities will be utilized. Lot combination is required to eliminate building code violations for a structure crossing property line. | | | | |
| Name of Applicant or Sponsor: Sponsor - CHA Consulting Inc (C/O James Trasher, PE) | | Telephone: 315-471-3920 E-Mail: JTrasher@chacompanies.com | | |
| Address: 300 S. State Street | | | | |
| City/PO: Syracuse, | | State: NY | Zip Code: 13202 | |
| 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 governmental Agency? If Yes, list agency(s) name and permit or approval: NYS DOT | | | NO <input type="checkbox"/> | YES <input checked="" type="checkbox"/> |
| 3.a. Total acreage of the site of the proposed action? | | .534 acres | | |
| b. Total acreage to be physically disturbed? | | .333 acres | | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | | .534 currently acres | | |
| 4. Check all land uses that occur on, adjoining and near the proposed action. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" 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 | | | | |

| | | |
|--|---|--|
| <p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____</p> | <p>NO</p> <p><input checked="" type="checkbox"/></p> | <p>YES</p> <p><input type="checkbox"/></p> |
| <p>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: _____ _____ _____</p> | <p>NO</p> <p><input checked="" type="checkbox"/></p> | <p>YES</p> <p><input type="checkbox"/></p> |
| <p>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: _____ DEC ID No 734039 (Syracuse Fire Training School, V00222 (Mann Realty @ West Bear and Liberty) are in vicinity of site. _____ _____</p> | <p>NO</p> <p><input type="checkbox"/></p> | <p>YES</p> <p><input checked="" type="checkbox"/></p> |
| <p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: James Trasher, PE _____ Date: 6-15-18 _____</p> <p>Signature:  _____</p> | | |



LOCATION PLAN
Scale: 1" = 500'



NOTES:

Total area: 0.534 ± acres
 Total number of lots: three(3) existing, one(1) proposed
 Location of underground utilities taken by field measurement where practicable, otherwise taken from various other sources and are approximate only.
 Tax Map Nos. 108.02-6-08, 108.02-6-09 & 108.02-6-10

TRACT MAP
 BY: R. GRIFFIN C.E.
 FILED: JULY 26, 1985
 MAP NO. 866

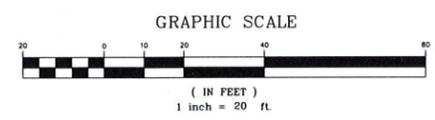
LEGEND:

- indicates light stand
- indicates utility pole, anchor & overhead lines
- indicates iron pipe and/or monument found
- indicates bollard
- indicates sign
- indicates storm culvert
- indicates gas main, gas valve & gas line marker
- indicates water main, water valve & hydrant
- indicates storm sewer, catch basin & manhole
- indicates sanitary sewer, sewer vent & manhole
- indicates underground telephone line, manhole & box
- indicates underground electric line & manhole
- indicates underground television cable & box
- indicates boundary line
- indicates adjacent parcel line
- indicates old/original parcel line
- indicates easement line
- indicates centerline road

THE UNDERSIGNED HEREBY CERTIFIES THAT THIS IS A CORRECT MAP MADE FROM AN ACTUAL SURVEY.

N.Y.S. Licensed Land Surveyor

Subject to any statement of facts on accurate and up to date abstract of title will show.
 Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-section 2 of the New York State Education Law.



| | | | | |
|-------------------------------|---------------------------------------|--------------------------------------|-----------------------------|-----------------------------|
| CITY OF SYRACUSE FINANCE DEPT | CITY OF SYRACUSE DEPT. OF ENGINEERING | CITY OF SYRACUSE PLANNING COMMISSION | CITY OF SYRACUSE ASSESSMENT | ONONDAGA COUNTY HEALTH DEPT |
|-------------------------------|---------------------------------------|--------------------------------------|-----------------------------|-----------------------------|

| | | | |
|-----------|---|--|--------------------------------|
| REVISIONS | RE-SUBDIVISION MAP OF LOT Nos. 11, 12, & 13 PART OF BLOCK No. 111 INTO NEW LOT No. 12A | | |
| | SPECIALTY PROPERTIES TRACT CITY OF SYRACUSE ONONDAGA COUNTY, NEW YORK | | |
| | IANUZI & ROMANS LAND SURVEYING, P.C. 5251 WIZ DRIVE NORTH SYRACUSE, NY 13212 PHONE: (315) 457-7200 FAX: (315) 457-9251 | DATE: JUNE 14, 2018 SCALE: 1" = 20' FILE NO.: 2544.016 | SHEET NO. F.B. NO. 1600 |