

APPLICANT INFORMATION:

(Copy of contract to purchase must be included with application)

Contract Purchaser(s) Tenant Co-Applicant Other (please state):

Name(s): Devine, Inc. (Danielle Mercuri)

Mailing Address: 411 Sycamore Terrace; Syracuse, NY

Zip: 13214 Home phone: Day Phone:

E-mail: risenshinediner@gmail.com

REPRESENTATIVE INFORMATION:

(Only if involved in this application)

Attorney Architect Contractor Other

Name(s): William Pitcher, Pitcher Architect PLLC

Mailing Address: 124 Feigel Avenue; Syracuse, NY

Zip: 13203 Telephone: 315-474-1219 E-mail: jobspitarch@gmail.com

DESCRIPTION OF OPERATION:

Days of week open: seven days

Hours of operation: 6:00 am to 2:00 pm; 4:00 pm to midnight.

Maximum number of employees on premises at one time: 15

Number of off-street parking available (site plan required to indicate location): 14

Other uses currently on the property: FIRST FLOOR: proposed diner

SECOND FLOOR: real estate office OTHER FLOORS: none

Indicate types and uses of other structures on the property if any (i.e. garage, storage building, etc.):

none

SIGNAGE INFORMATION:

Size and location of all existing AND proposed signage (use additional sheet if necessary)

A sign plan is required, see attachment (Wall, Ground, Projecting, Window)

Size: Location: SEE ATTACHED Type:

Size: Location: Type:

Size: Location: Type:

SPECIAL PERMIT FUNCTIONS: (Check all that apply)

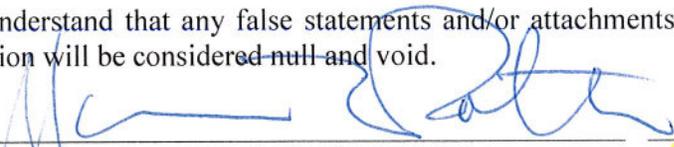
- Dining room Bar Service Drive-thru
- Entertainment Stage DJ Booth
- Light Duty auto repair Heavy Duty auto repair
- Car Wash Facility New Auto Sales Used Auto Sales

Has owner obtained or applied for a Certificate of Use: Yes No

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.

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



Signature of CURRENT PROPERTY OWNER
(or owner's LEGAL representative)

Date

NORMAN ROTH

PRINT NAME OF PROPERTY OWNER

***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) _____

.....

2015 P.A. 1040



124 Feigel Avenue
Syracuse, NY 13203
315.474.1219
JobsPitArch@gmail.com

January 14, 2019

Zoning Administration
201 E. Washington Street
Syracuse, NY 13202

Subject: Summary of Signage, 500 Westcott Street, SP-07-12M
Modification of Special Permit

To Whom It May Concern:

Proposed signage is shown on sheet L-2 and sheet A-2.

SIGN	TEXT	SIZE	SQ. FT.
A	Existing Traffic Sign (ground sign). Remove "Papa John" :& "University Hill" from sign.	5'-0 x 4'-6 one side	45
B	Existing ground sign. Encroaching ROW. Rotate sign 180-degrees, change text to "Rise N Shine"	3'-4 x 2'-5 two sides	8.33
C	East side of building, wall sign. Individual 14"h. plastic letters, "Rise N Shine on Westcott"	31'-0 x 1'-2 one side	32.7
D	North (Dell Street), wall sign. Individual 12"h. plastic letters, "Rise N Shine"	8'-0 x 1'-0	8.0
E	North (Dell Street), wall sign. Opaque sign mounted on exterior of wall "University Hill..."	2'-6 x 2'-6	6.25

Sincerely yours,

William J. Pitcher, R.A.

617.20
Appendix B
Short Environmental Assessment Form

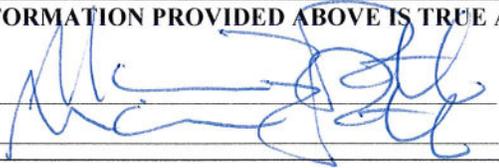
Instructions for Completing

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: Rise N Shine on Westcott				
Project Location (describe, and attach a location map): 500 Westcott Street at corner of Dell Street; Syracuse, NY 13210				
Brief Description of Proposed Action: Constructing and an addition to an existing building. Installing a new kitchen, and expanding the first floor seating area.				
Name of Applicant or Sponsor: Devine, Inc. (Danielle Mercui) d.b.a. Rise N Shine restaurant		Telephone: E-Mail: risenshine@gmail.com		
Address: 411 Sycamore Terrance, Syracuse, NY				
City/PO:		State:	Zip Code:	
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	YES
			<input checked="" type="checkbox"/>	<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: City of Syracuse: Planning Commission & Building Permits.			NO	YES
			<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		_____ 0.1 acres		
b. Total acreage to be physically disturbed?		_____ 0.1 acres		
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ 0.1 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				

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES		
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES		
	<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: _____	NO	YES		
	<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: _____	NO	YES		
	<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: _____	NO	YES		
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
b. Is the proposed action located in an archeological sensitive area?	NO	YES		
	<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?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	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"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban				
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
16. Is the project site located in the 100 year flood plain?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES			

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: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<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	YES
	<input checked="" type="checkbox"/>	<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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: _____	Signature: 	Date: <u>1/15/19</u>

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:		
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT

4 SPECIAL FENCE: SEE SHEET A-2 FOR SIGNS "A" THROUGH "E" SIZES.
 5 DELETE PROPOSED 2-FT PLANTING BED OF 1-14-19.
 REVERT TO APPROVED 8-FT BED, 11-14-2018

NEW PLANTINGS:
 EMERALD ARBORVITAE

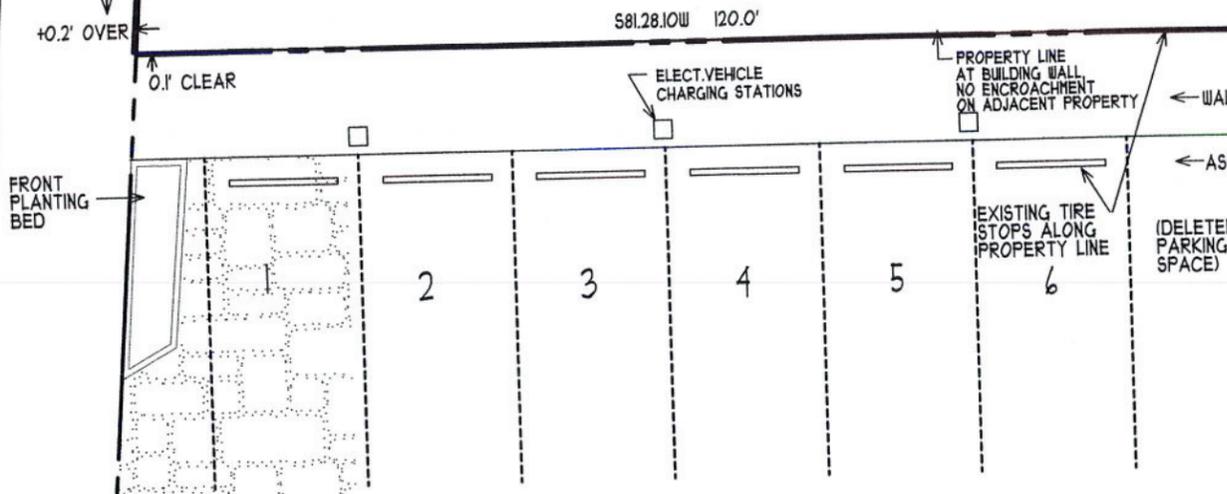


SURVEY KNOWN AS 508-510 WESTCOTT STREET, 8/22/2010.
 ADJACENT BUILDING IS 0.2 FOOT OVER FRONT RIGHT-OF-WAY LINE,
 AND 0.1 FOOT CLEAR OF SHARED PROPERTY LINE

ADJACENT EXISTING ONE-STORY BUILDING

ZONED "BA"

WESTCOTT ST

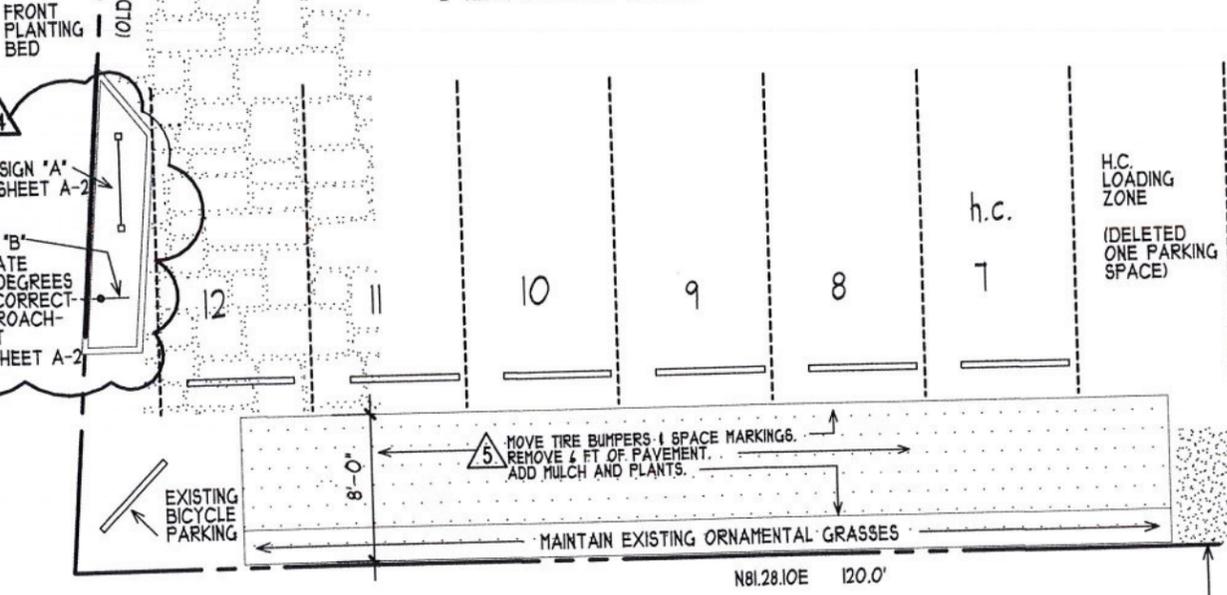
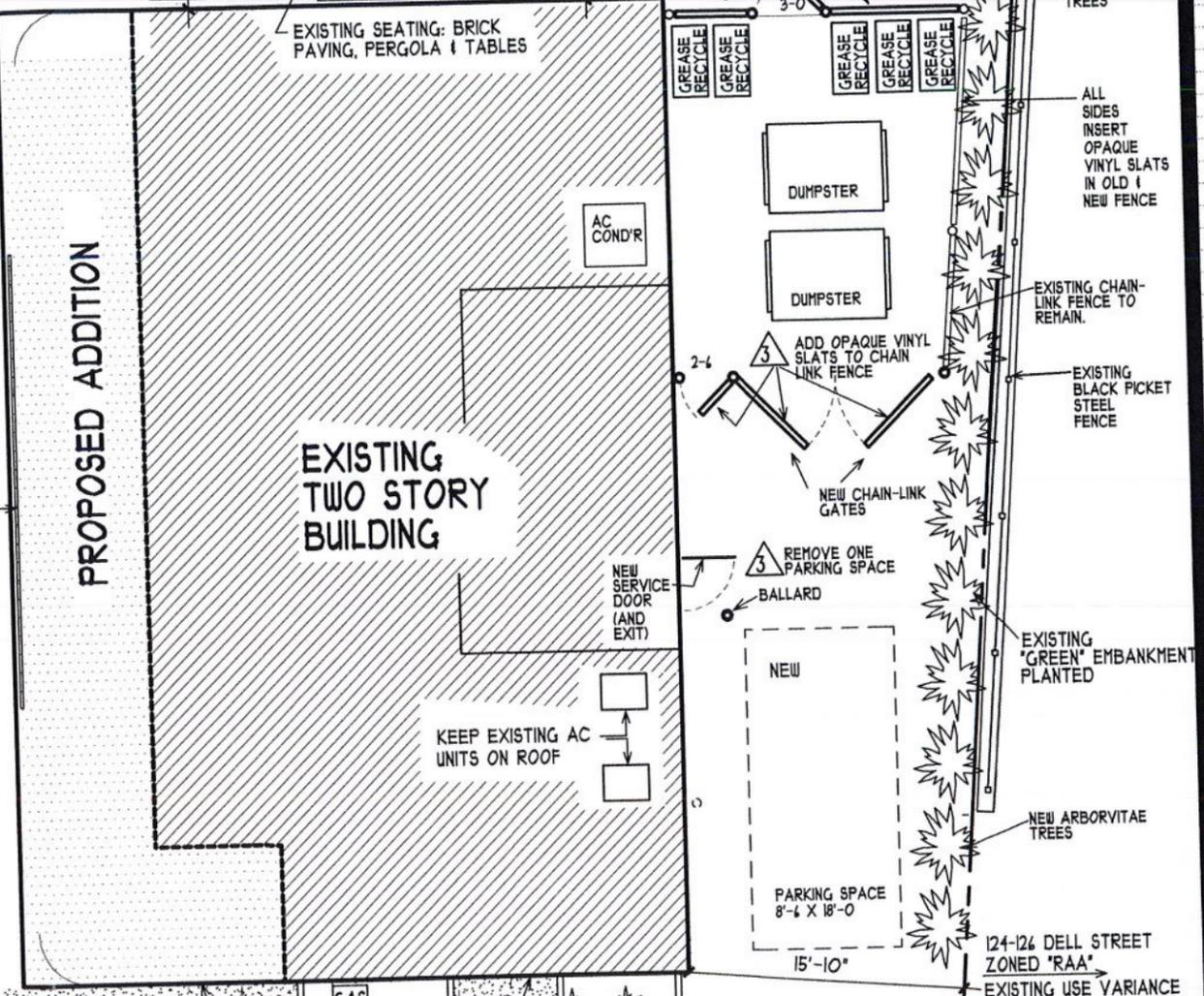


ZONING:
 500-504 WESTCOTT STREET = "BA" BUSINESS
 124-126 DELL STREET = "RAA" RESIDENTIAL, EXISTING USE VARIANCE

"BA" BUSINESS: B-III-2
 B-III-2.5: WHERE "BA" DOES NOT ABUTT "R" PROPERTIES --
 "B" LOT SETBACKS ARE 0' (ZERO FEET) ON ALL SIDES.
 B-III.2.5.a.2.(b): WHERE REAR OF "B" ABUTS SIDE OF "R" --
 "B" REAR SETBACK DISTANCE = "R" SIDE SET BACK

"R" RESIDENTIAL: B-1-4
 B-1-4.4.b.(1): MINIMUM 4' (FOUR FEET) SIDE YARD SETBACK

THEREFORE:
 "B" FRONT AND SIDE SETBACKS, 0' (ZERO FEET)
 "B" REAR SETBACK, 4'-0 (FOUR FEET)



1 SITE PLAN
 L-2 1/10" = 1'-0"

DELL STREET

JOB#: 218-42
 DATE: 8-27-2018
 SPMT OK: 11-14-18
 S.P. REV.4: 1-14-19
 ZBAREV5: 2-6-19

124 Feigel Avenue
 Syracuse, N.Y. 13203
PITCHER architect
 315.474.1219

Rise N Shine on Westcott
 Mr Lady Bug LLC
 500 Westcott Street
 Syracuse, NY
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SITE PLAN, NOTES & DETAILS
 L-2



GRADING NOTES:

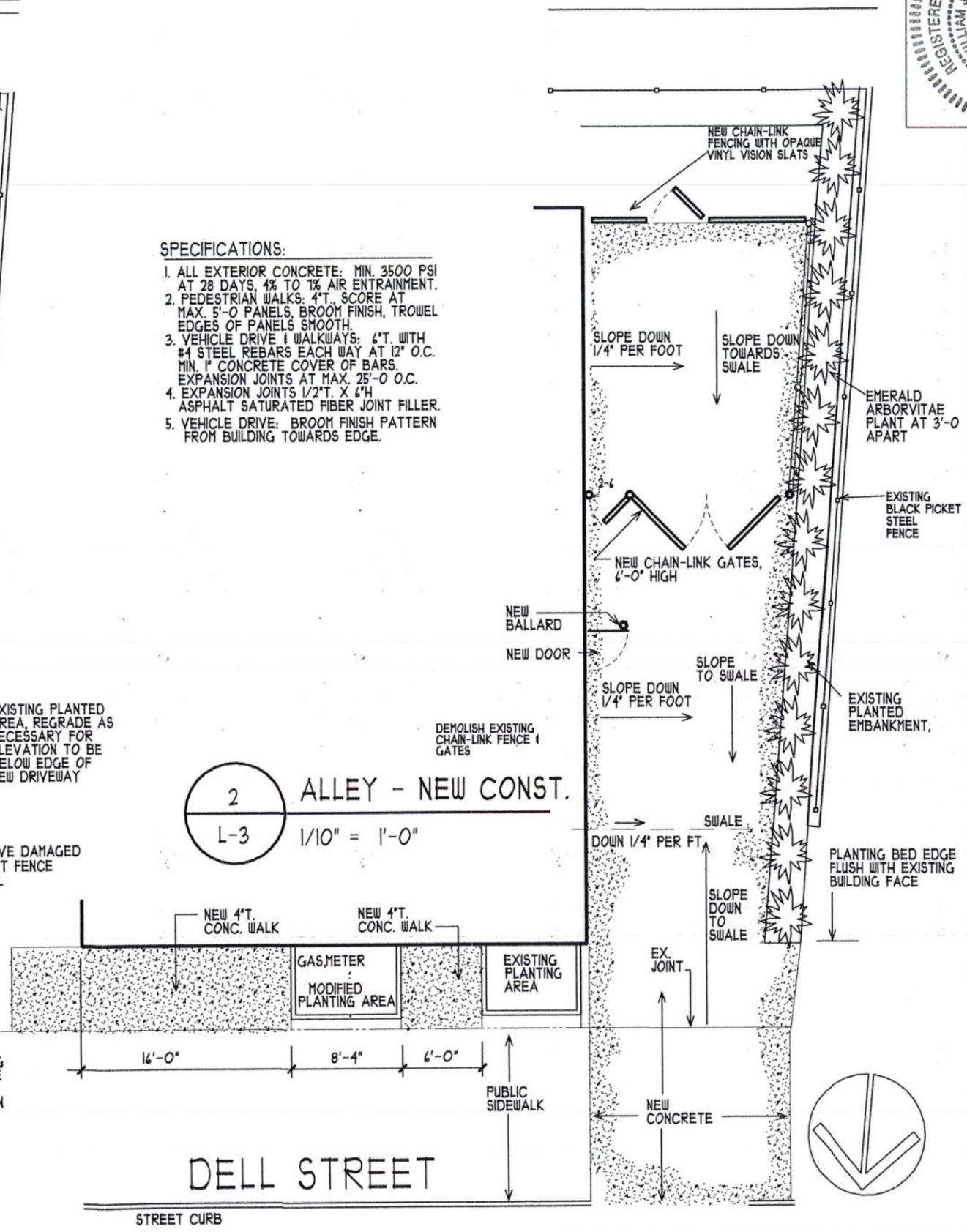
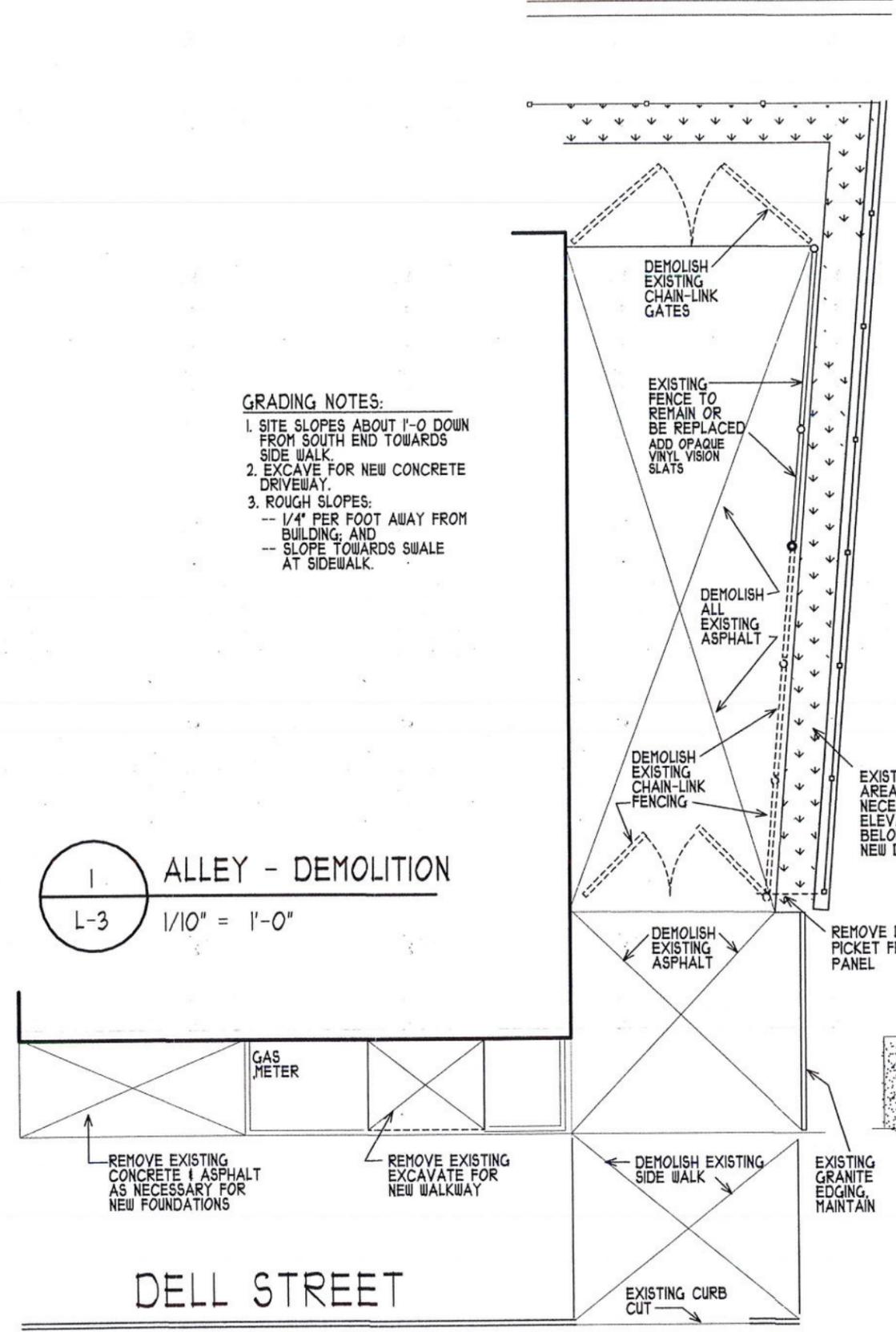
1. SITE SLOPES ABOUT 1'-0" DOWN FROM SOUTH END TOWARDS SIDE WALK
2. EXCAVE FOR NEW CONCRETE DRIVEWAY.
3. ROUGH SLOPES:
 - 1/4" PER FOOT AWAY FROM BUILDING; AND
 - SLOPE TOWARDS SWALE AT SIDEWALK.

SPECIFICATIONS:

1. ALL EXTERIOR CONCRETE: MIN. 3500 PSI AT 28 DAYS, 4% TO 1% AIR ENTRAINMENT.
2. PEDESTRIAN WALKS: 4" T. SCORE AT MAX. 5'-0" PANELS, BROOM FINISH, TROWEL EDGES OF PANELS SMOOTH.
3. VEHICLE DRIVE & WALKWAYS: 6" T. WITH #4 STEEL REBARS EACH WAY AT 12" O.C. MIN. 1" CONCRETE COVER OF BARS. EXPANSION JOINTS AT MAX. 25'-0" O.C.
4. EXPANSION JOINTS 1/2" T. X 6" H ASPHALT SATURATED FIBER JOINT FILLER.
5. VEHICLE DRIVE: BROOM FINISH PATTERN FROM BUILDING TOWARDS EDGE.

1 ALLEY - DEMOLITION
L-3 1/10" = 1'-0"

2 ALLEY - NEW CONST.
L-3 1/10" = 1'-0"



JOB#: 218-42
DESIGN#: 1-14-2019

124 Feigel Avenue
Syracuse, N.Y. 13203
PITCHER architect inc.
315.474.1219

Rise N Shine on Westcott
Mr Lady Bug LLC
500 Westcott Street
Syracuse, NY
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REAR ALLEY & DEMOLITION & IMPROVEMENTS
L-3

PER NYS CODE, TECH BULLETIN 2010-01

OCCUPANTS					
ROOM	SQUARE FEET	SF/PERSON	PEOPLE	GROUP	TOILETS SINKS PER # OCC'S
FIRST FLOOR					
10 GROSS SF	2,191 GSF				A-2 1:15 1:200 B 1:50 1:80
1 EAST BOOTHS	242 SF	15 SFP	16.1	A-2	BY SF: 49.1 PEOPLE BY SEAT COUNT 92
2 EAST TABLES	11 SF	15 SFP	5.1	A-2	
3 CENTER TABLES	10 SF	15 SFP	4.7	A-2	
4 WEST BANQUETS	89 SF	15 SFP	5.9	A-2	
5 NORTH BANQUET	40 SF	15 SFP	2.7	A-2	
6 COUNTER	21 SF	15 SFP	1.8	A-2	
SEATING	529 NSF				
7 KITCHEN	611 SF	200 SFP	3.2	B	2 LAV 2 WC REQUIRED & PROVIDED
8 STAIRS	118 SF	100 SFP	1.2	B	
	763 SF				
GROUP "B", NET SF		100 SFP	9.0	B	
2,191 SF - 529 - 763 = 899 SF		TOTAL	49.1	B	
SECOND FLOOR					
OFFICE	1,134 GSF	100 SFP	11.3	B	11.34 PEOPLE 1 UNISEX = OK
BUILDING TOTAL					
	3,325 SF		61.0		

NEW YORK STATE BUILDING CODE 2015

[508.4] OCCUPANCY SEPARATIONS

A2 TO B, SPRINKLER: 1-HOUR

CONSTRUCTION TYPE 5-A

BUILDING SIZES

GROUP	CONST.	SPRINKLER	STORIES	FIRE SF
A-2	5A	N.S.	2	6,000
B	5A	N.S.	2	9,000

[F-903] SPRINKLERS REQUIRED IF:

GROUP A-2:

IF FIRE AREA > 5000SF = NO
IF FIRE AREA > 100 PEOPLE = NO
IF FIRE AREA NOT AT GRADE LEVEL = NO
SPRINKLERS ARE NOT REQUIRED.

[F-904] ALTERNATE EXTINGUISHING SYSTEMS

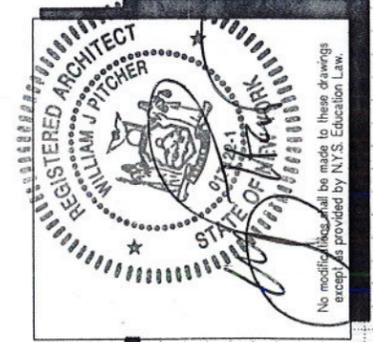
AT COMMERCIAL HOOD & DUCTS = REQUIRED

[F-901] FIRE DETECTION & ALARM

ALL GROUPS: ONE MANUAL ALARM TO HORN/STROBES
REQUIRED, REGARDLESS OF EXCEPTIONS

IF MORE THAN 300 PEOPLE: MANUAL ALARM ALSO
ACTIVATES VOICE ALARM SYSTEM = VOICE ALARM NOT REQUIRED.

NEW PANEL WITH ALARM DEVICES AND ONE MANUAL ALARM
IS REQUIRED. INTERCONNECT KITCHEN HOOD SYSTEM TO
PANEL.



JOB#: 218-42
DESIGN 2: 1-14-2019

124 Feigel Avenue
Syracuse, N.Y. 13203

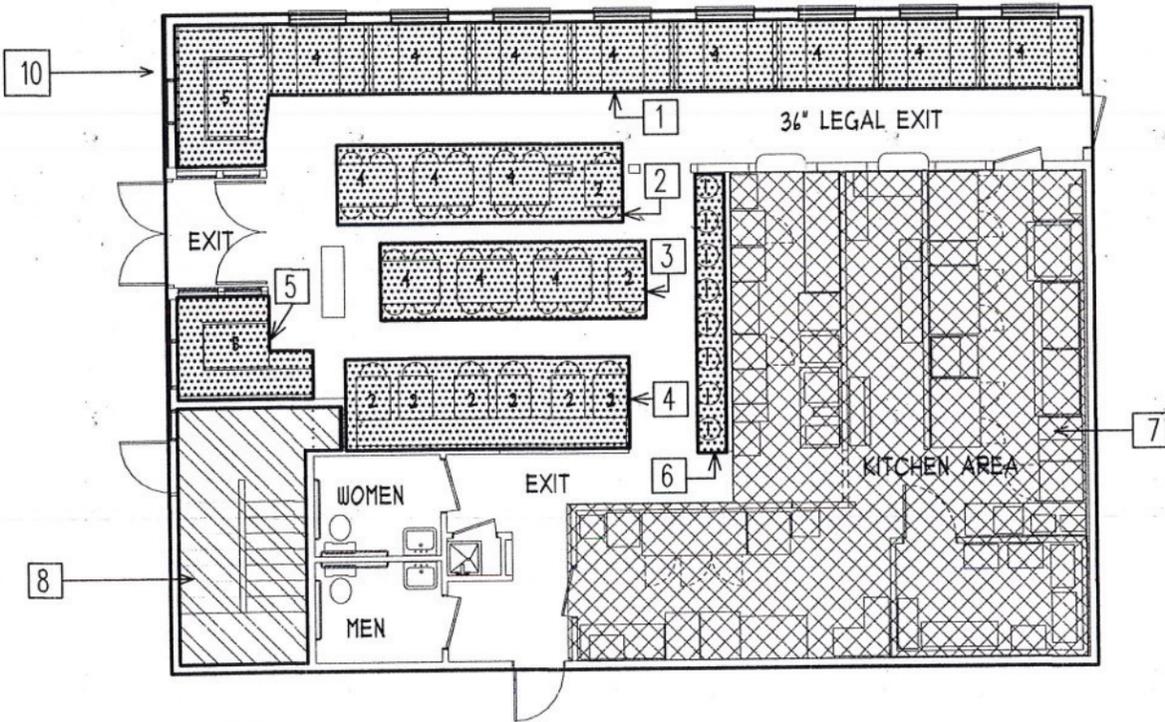


315.474.1219

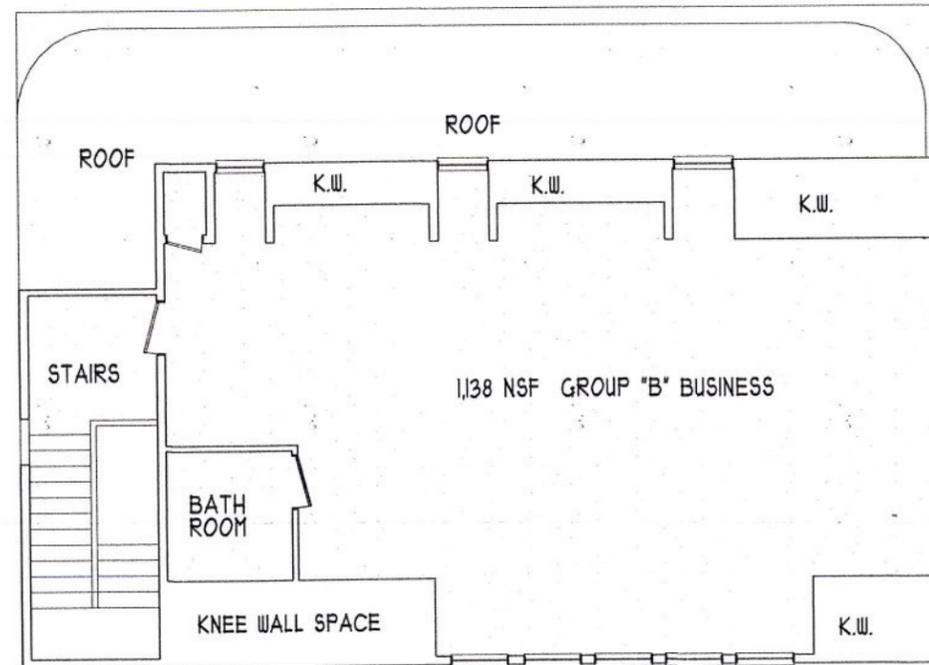
Rise N Shine on Westcott
Mr Lady Bug LLC
500 Westcott Street
Syracuse, NY

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BUILDING CODE
& ZONING
ANALYSIS &
NOTES
C-1



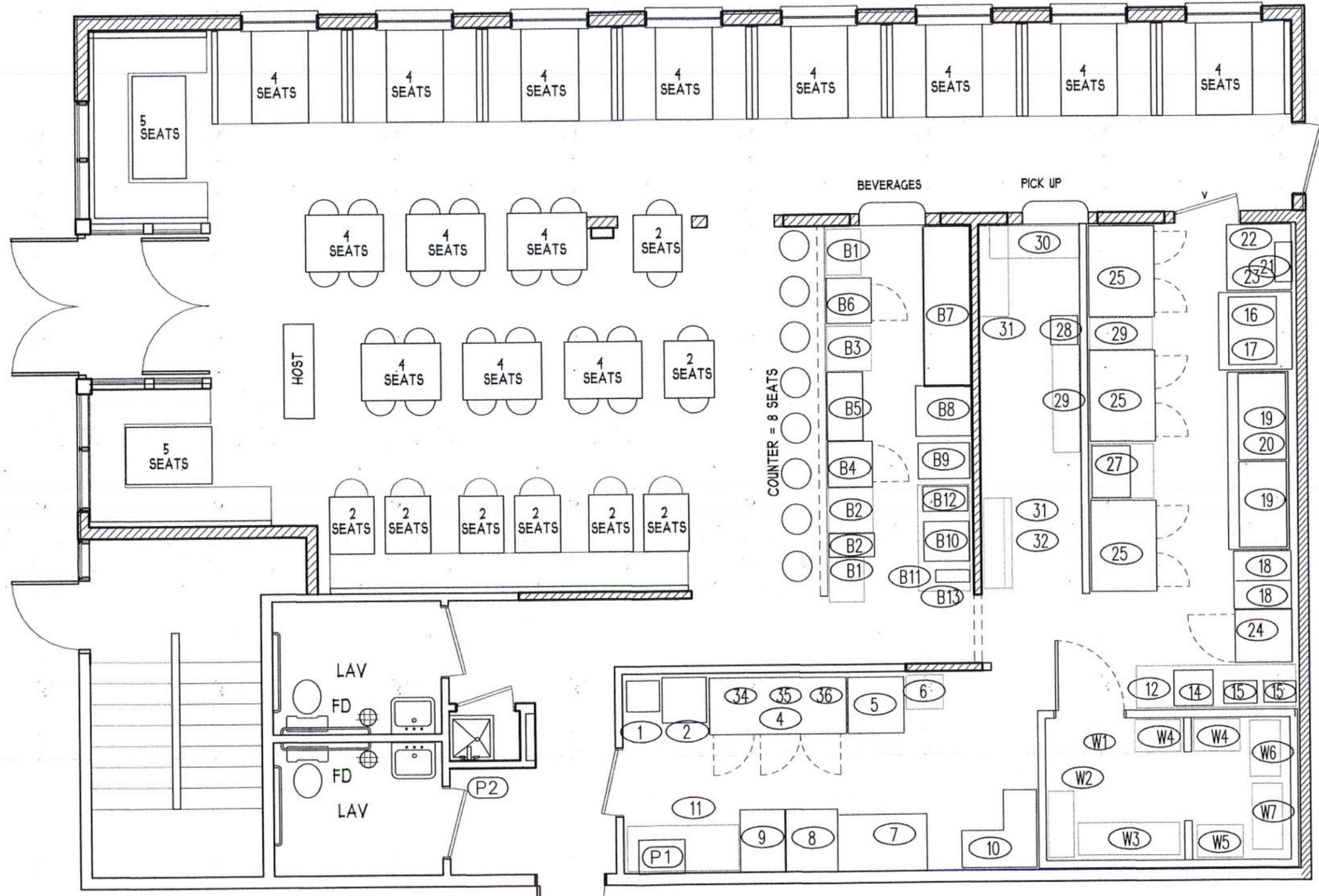
1 FIRST FLOOR PLAN
C-1 3/32" = 1'-0"



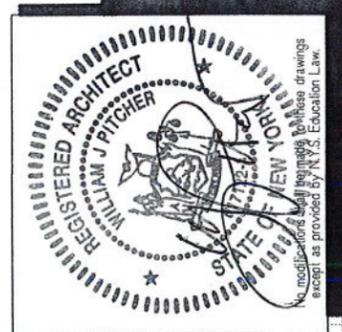
2 SECOND FLOOR PLAN
C-1 3/32" = 1'-0"

FILE: V218-04...RIGENSHINE... DESIGN 2 - VERSION 0

AA SEE SHEET Q-1 KITCHEN EQUIPMENT PLAN FOR INFORMATION ON EQUIPMENT



1' FIRST FLOOR PLAN
 C-2 3/16" = 1'-0"

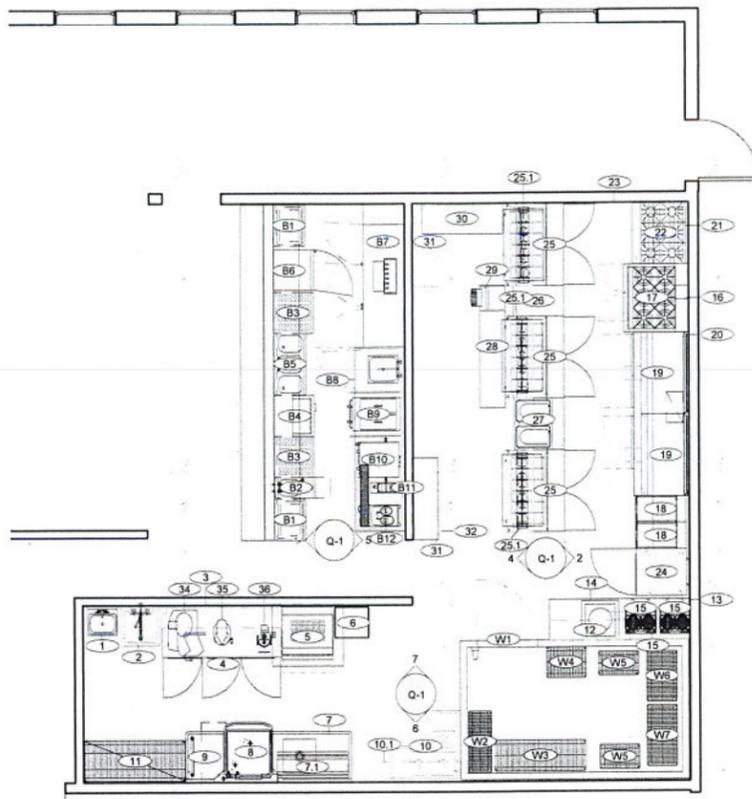


JOB#: 218-42
 DESIGN 2: 1-14-2019

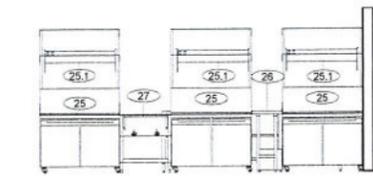
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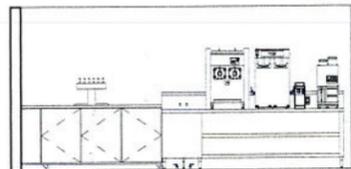
PROPOSED SEATING & EQUIPMENT PLAN
C-2



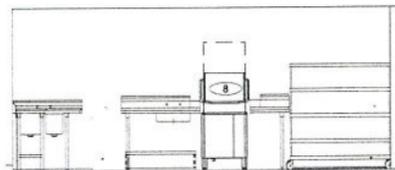
1 EQUIPMENT LAYOUT
1/4" = 1'-0"



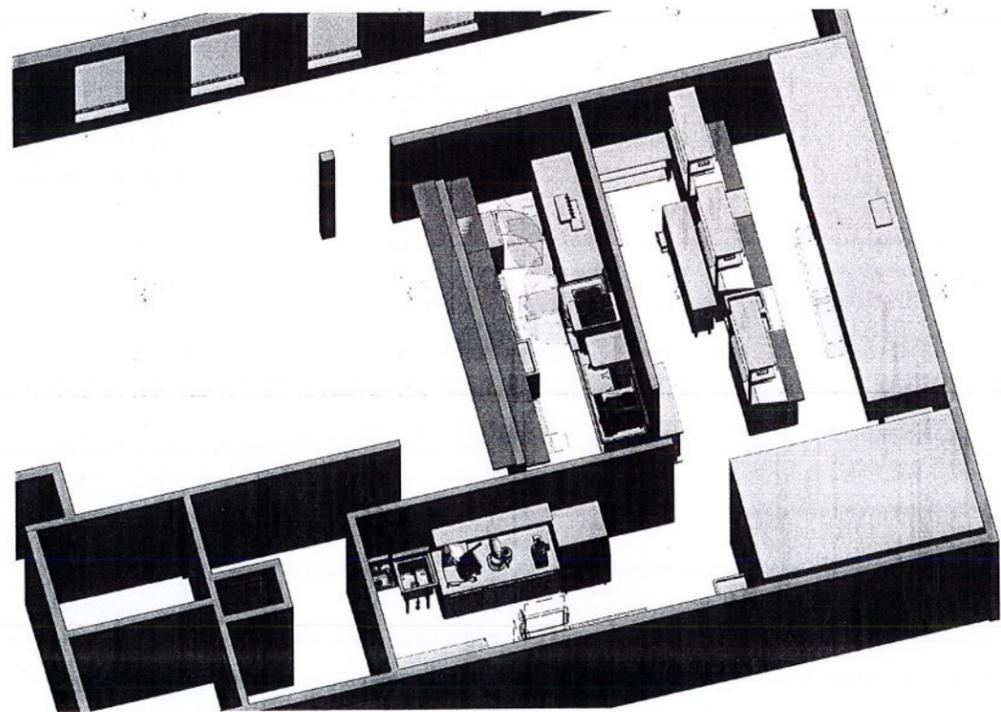
4 Elevation 1 - c
1/4" = 1'-0"



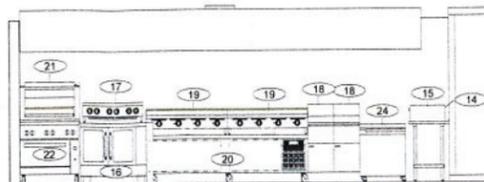
5 Elevation 1 - d
1/4" = 1'-0"



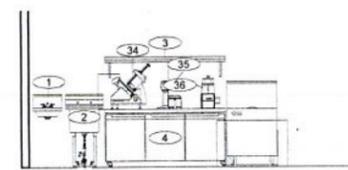
6 Elevation 3 - a
1/4" = 1'-0"



3 3D View Placeholder



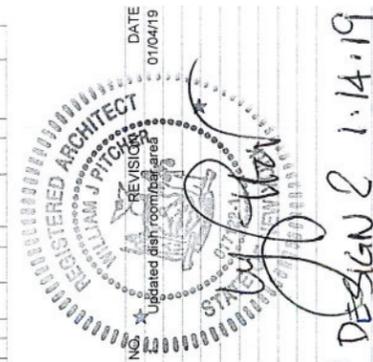
2 Elevation 1 - a
1/4" = 1'-0"



7 Elevation 3 - c
1/4" = 1'-0"

EQUIPMENT SCHEDULE

ITEM #	QTY	DESCRIPTION	MANUFACTURER	MODEL	STATUS
1	1	Hand Sink	Advance Tabco	7-PS-20-1X	
2	1	FABRICATED NSF SINK, 1-COMPARTMENT, NO DRAINBOARDS, BOWL SIZE 18" X 18" X 14" DEEP	Advance Tabco	FC-1-1818	
2.1	1	Pre-Rinse Unit: EasyInstall 8" Wall Mount Mixing Faucet, Eterna Cartridges w/ Spring Checks, Lever Handles, 44" Flexible Stainless Steel Hose, 1.42 GPM Spray Valve, 6" Wall Bracket & 1/2" NPT Female Inlets	T&S Brass and Bronze Works, Inc.	B-0133-B	
3	1	Wall Shelf	Advance Tabco	WS-12-72-16	
4	1	Worktop Refrigerator	Continental Refrigerator	SW72	
5	1	Ice Maker and Bin	Ice-O-Matic	B55PS/CIM082 6HA	B
6	1	Bag in Box Rack	by vendor		
7	1	Dishable, Straight, 16 gauge	Advance Tabco	DTS-S70-48L	
7.1	1	Dishable, Sorting Shelf	Advance Tabco	DT-6R-22	
8	1	Washer, Door Type, High Temp	Hobart US Foodservice	AM15-1	
9	1	16 Ga. 304 Straight Clean Dishable	Advance Tabco	DTC-S70-24R-X	
10	1	CORNER SINK, 3-COMPARTMENT, (1) 14" X 14" X 10" BOWL, (2) 10" X 14" X 10" BOWLS, WITH 11" LEFT & RIGHT-HAND DRAINBOARDS	Advance Tabco	94-K5-11D	
10.1	1	Wall Shelf	Advance Tabco	WS-12-48-X	
11	1	Shelving, Wire	Metro	2460NK3	
12	1	Wall Shelf	Advance Tabco	WS-12-48-X	
13	1	Work Table	Advance Tabco	FLAG-247-X	
14	1	ELECTRIC CREPE MACHINE	Eurodip USA	CEBPB2	
15	2	COMMERCIAL DOUBLE BELGIAN WAFFLE MAKER 208V	WARING COMMERCIAL	WW250BX	
16	1	Convection Oven	Vulcan-Hart	VC4GD	
17	1	STAR-MAX GAS HOT PLATES	STAR MANUFACTURING	606HF	
18	2	Fryer, Deep Fat, Gas	Pitco	45C+S	
19	2	STAR-MAX GAS GRIDDLES WITH THERMOSTATIC CONTROLS	STAR MANUFACTURING	648TF	
20	1	Griddle Stand, Refrigerator	Continental Refrigerator	DL96G	
21	1	36" Infrared Salamander Broiler-Range Mount	Vulcan	36IRB	
22	1	36" Range - 6 Burners - Standard Oven	Vulcan	36S-6BN	
23	1	Exhaust Hood	Captive Aire	Custom Fab	
24	1	Worktop Refrigerator	Continental Refrigerator	SW27	
25	3	Sandwich Unit, Refrigerated w/ double overshef	Continental Refrigerator	SW48-18M	
25.1	3	Heat Lamps	HATCO CORPORATION	GRA-42	
26	1	Work Table	Advance Tabco	TFMS-180-X	
27	1	ELECTRIC HOT FOOD UNITS W/ EXPOSED ELEMENTS	DUKE	E302	
28	1	Dish Cabinet	Advance Tabco	EDC-1572-X	
29	1	QCS1 COMPACT CONVEYOR TOASTER	STAR MANUFACTURING	QCS1-350	
30	1	Dish Cabinet	Advance Tabco	EDC-1848-X	
31	2	Wall Shelf	Advance Tabco	WS-15-48	
32	1	Dish Cabinet	Advance Tabco	EDC-1548-X	
33	1	Spare Number			
34	1	Slicer	Hobart	Edge12-11	
35	1	5 Qt. Mixer	Hobart	N50-60	
36	1	COMBINES	ROBOT COUPE	R 2 N	
B1	2	Underbar Ice Chest	Krowne Metal	18-24-7	
B2	1	Underbar Handsink	Krowne Metal	18-12DST	
B3	2	Underbar Glass Rack	Krowne Metal	18-GSB1	
B4	1	Bottle Cooler	Krowne Metal	MC24B	
B5	1	Three Compartment Bar Sink	Krowne Metal	KR18-33C	
B6	1	Single Door Wine Reserve	Perlick	HC24WS	
B7	1	Self-Contained Direct Draw 3-Door Beer Dispenser	Perlick	DDS84	
B8	1	Enclosed Base, Beverage Table	Advance Tabco	BEV-30-108L	
B9	1	Shake Freezer, Countertop	Stoelting	E122-38	
B10	1	Coffee Tea Brewer	BUNN	52400.0100	
B11	1	Milk Frother	Bunn-O-Matic	24700.0000	
B12	1	SUPER AUTOMATIC ESPRESSO MACHINE	BUNN	43400.0000	
W1	1	Walk-in Cooler	FES	BY others	
W2	1	Shelving, Wire	Metro	1436NK3	
W3	1	Shelving, Wire	Metro	1854NK3	
W4	1	Shelving, Wire	Metro	1824NK3	
W5	2	Shelving, Wire	Metro	1424NK3	
W6	1	Shelving, Wire	Metro	1830NK3	
W7	1	Shelving, Wire	Metro	1836NK3	



RISE N SINE
EQUIPMENT LAYOUT
City, State

DATE: 12/21/2018
JOB NO.: 18-1003.MG
DRAWING NO.: Q-1
DRAWN BY: RHE
CHECKED BY: MG/MO
SCALE: AS NOTED

DESIGN 2 1.14.19

