

City of Syracuse Zoning Administration

Application for SPECIAL PERMIT Review by the Planning Commission

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

For Office Use: Filing Date: Case Number: Zoning District: 5/2/83

NEW SPECIAL PERMIT MODIFICATION OF EXISTING SPECIAL PERMIT

LIST ALL ADDRESSES INVOLVED IN YOUR PROJECT:

TAX MAP SECTION, BLOCK, and LOT information from Assessment Department (call 448-8280)

Section: <input type="text" value="48"/>	Block: <input type="text" value="04"/>	Lot: <input type="text" value="01"/>
Section: <input type="text" value="48"/>	Block: <input type="text" value="04"/>	Lot: <input type="text" value="14"/>
Section: <input type="text"/>	Block: <input type="text"/>	Lot: <input type="text"/>

This APPLICATION is for a:

- Restaurant (this also includes uses such as Bars, Taverns, Coffee Shops, Night Clubs)
- Gasoline Service Station
- Car Wash Facility
- Care Home
- Parking Lot or Parking Garage
- Transitional Parking Area
- Offices of Religious and Educational Institutions
- Bed and Breakfast
- Other Special Permit Uses (describe)

PLEASE DESCRIBE ALL ASPECTS OF YOUR PROJECT IN DETAIL:

PROPERTY OWNER INFORMATION:

Name(s):

Mailing Address:

Zip: Daytime phone: Home phone:

E-mail:

APPLICANT INFORMATION:

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

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

Name(s):

Mailing Address:

Zip: Home phone: Day Phone:

E-mail:

REPRESENTATIVE INFORMATION:

(Only if involved in this application)

Attorney Architect Contractor Other

Name(s):

Mailing Address:

Zip: Telephone: E-mail:

DESCRIPTION OF OPERATION:

Days of week open:

Hours of operation:

Maximum number of employees on premises at one time:

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

Other uses currently on the property: FIRST FLOOR:

SECOND FLOOR: OTHER FLOORS:

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

SIGNAGE INFORMATION:

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

A sign plan is required, see attachment

Size	Location	Type	(Wall, Ground, Projecting, Window)
<input type="text" value="6' x 5''"/>	<input type="text" value="West Window"/>	<input type="text" value="Window Graphic"/>	
<input type="text" value="3' x 4'"/>	<input type="text" value="Southwest Corner"/>	<input type="text" value="Projecting"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

SPECIAL PERMIT FUNCTIONS: (Check all that apply)

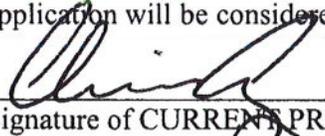
- Dining room Bar Service Drive-thru
- Entertainment Stage DJ Booth
- Light Duty auto repair Heavy Duty auto repair
- Car Wash Facility New Auto Sales Used Auto Sales

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

CHRIS GEIGER

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) _____

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900 E FAYETTE ST, SUITE 3 – STRONG HEARTS CAFE – JUSTIFICATION OF WAIVER

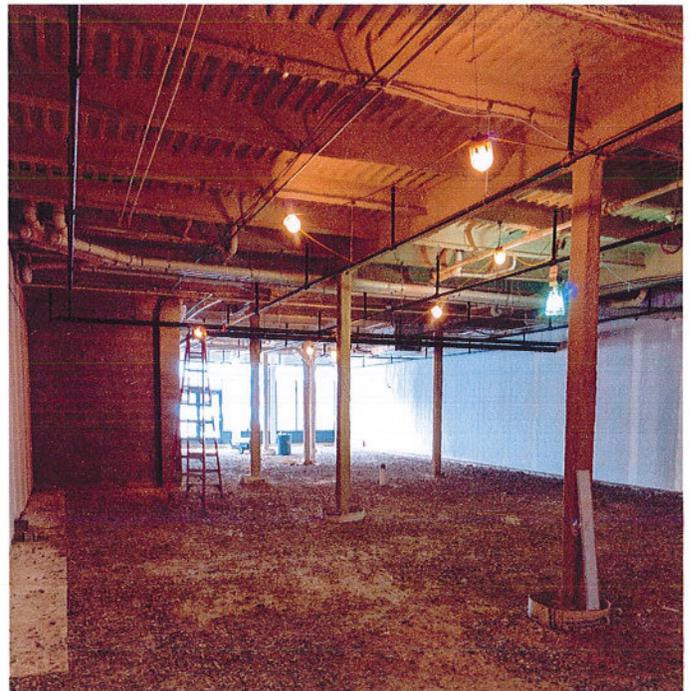
A parking waiver is being requested for this project as it will not be possible to provide any off-street parking to service the café (Strong Hearts) space. Although there is a small amount of on-site, off-street parking spaces, none are designated exclusively for the retail space. Due to the location of the café in the middle of the dense, walkable east side neighborhood, with ample on-street parking in the vicinity and the adjacency of the East Genesee Street bus lines, we feel that the café will thrive without need for any off-street parking. As further evidence, the existing café location a few blocks away on E Genesee Street is very successful without having any designated off-street parking spaces.

Parking spaces required per zoning: 59

Parking spaces provided: 0



STRONG HEARTS CAFE STOREFRONT, EXTERIOR SOUTHWEST CORNER

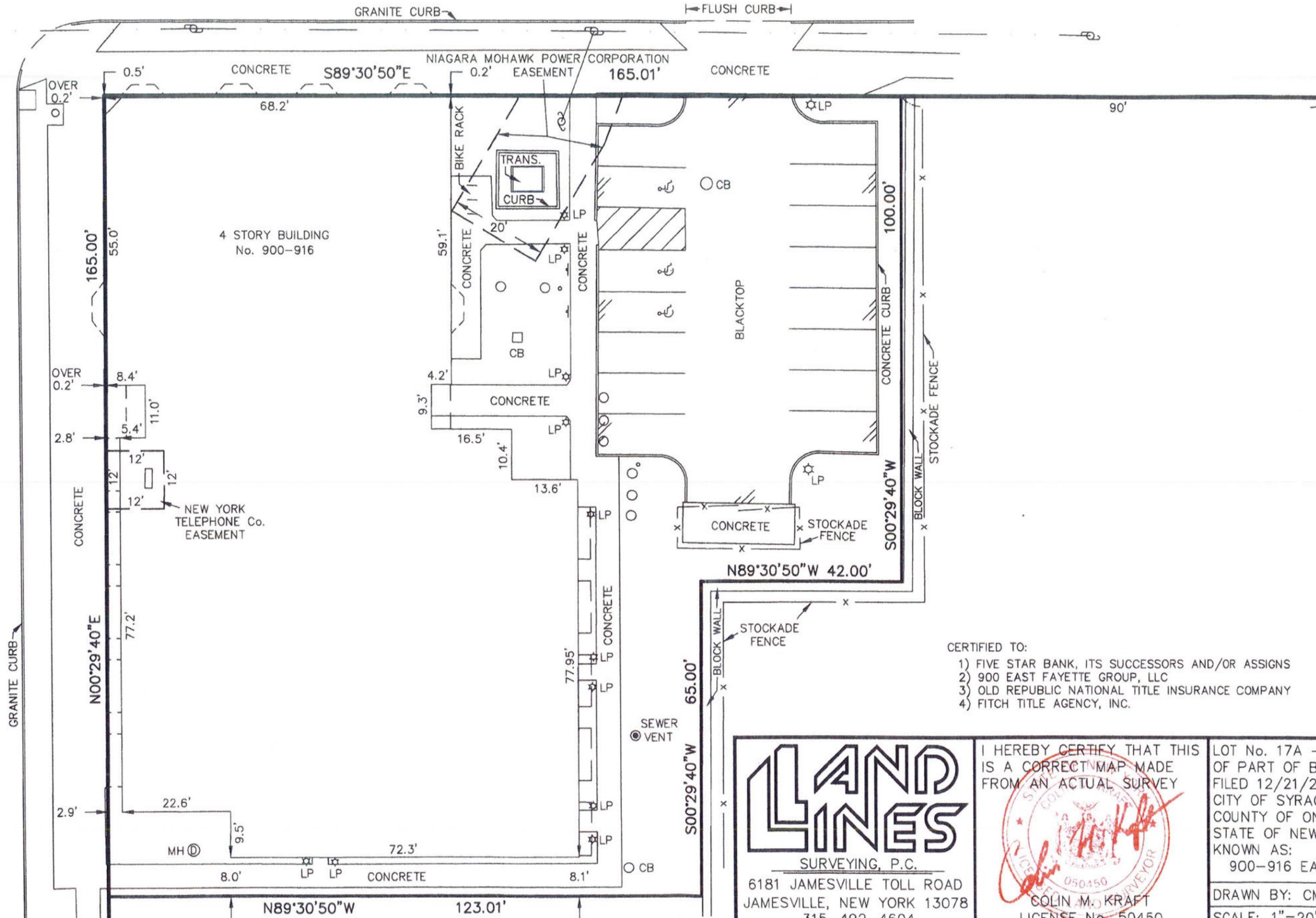


STRONG HEARTS CAFE STOREFRONT, INTERIOR VIEWS

EAST FAYETTE STREET

IRVING AVENUE

SOUTH CROUSE AVENUE



- CERTIFIED TO:
- 1) FIVE STAR BANK, ITS SUCCESSORS AND/OR ASSIGNS
 - 2) 900 EAST FAYETTE GROUP, LLC
 - 3) OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY
 - 4) FITCH TITLE AGENCY, INC.

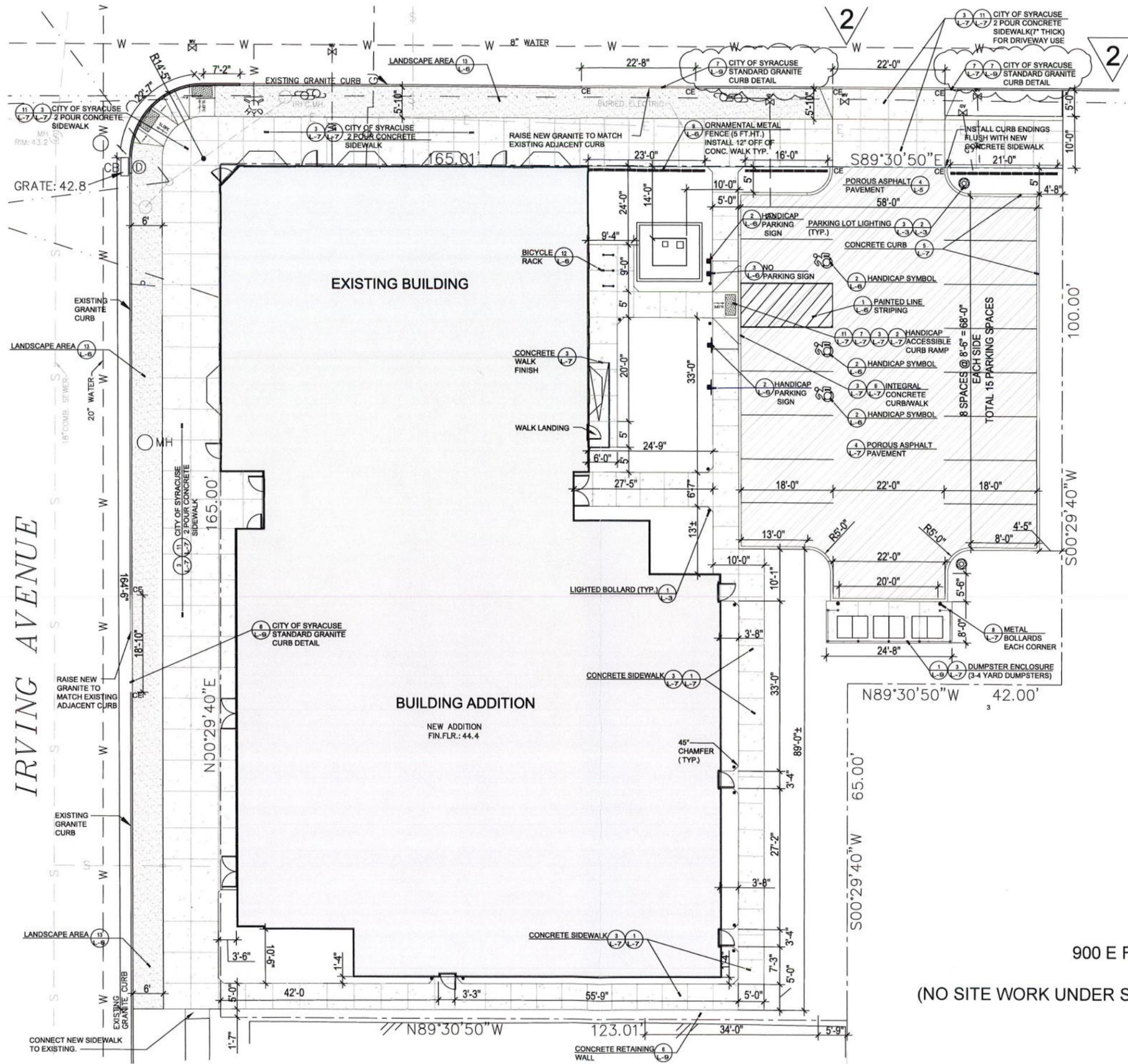
LAND LINES
 SURVEYING, P.C.
 6181 JAMESVILLE TOLL ROAD
 JAMESVILLE, NEW YORK 13078
 315-492-4604

I HEREBY CERTIFY THAT THIS IS A CORRECT MAP MADE FROM AN ACTUAL SURVEY

COLIN M. KRAFT
 LICENSE No. 50450

LOT No. 17A - RESUBDIVISION MAP OF PART OF BLOCK No. 240 FILED 12/21/2018 MAP No. 12688 CITY OF SYRACUSE COUNTY OF ONONDAGA STATE OF NEW YORK
 KNOWN AS:
 900-916 EAST FAYETTE STREET

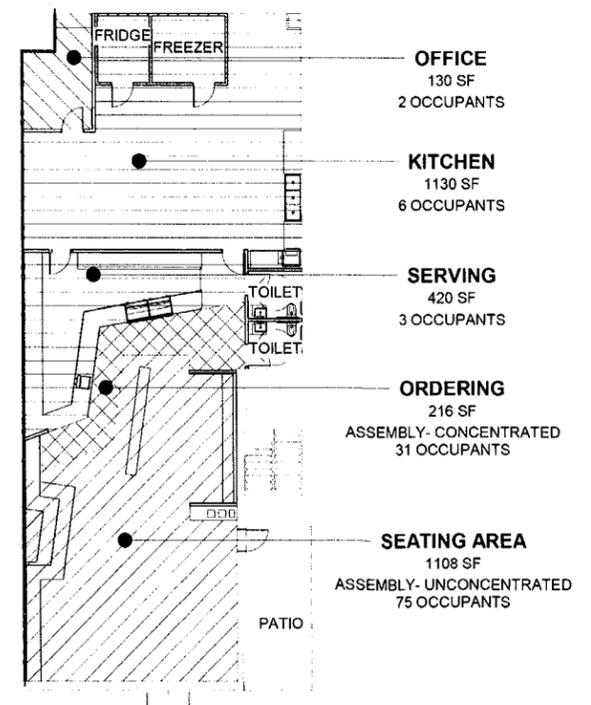
DRAWN BY: CMK	DATE: 12/21/2018
SCALE: 1"=20'	DWG.No.: 181036



900 E FAYETTE STREET - SITE PLAN
 FOR REFERENCE ONLY
 (NO SITE WORK UNDER STRONG HEARTS PROPOSAL)
 SCALE: 1" = 20' - 0"

② TYPICAL UPPER FLOOR PLAN
1/16" = 1'-0"

① OVERALL GROUND FLOOR PLAN
1/16" = 1'-0"



SCOPE OF WORK
WORK INCLUDES THE BUILD OUT OF GROUND FLOOR TENANT SPACE WITHIN A NEWLY-CONSTRUCTED ADDITION TO 900 EAST FAYETTE STREET TO BE STRONG HEARTS CAFE. THE EATERY WILL HAVE A FULL KITCHEN AND HAVE SEATING FOR ROUGHLY 60. EXTERIOR WORK IS LIMITED TO A NEW DOOR SERVING AN ADJACENT PATIO AS WELL AS AFFIXING SIGNAGE TO THE FACADE. NO OTHER WORK IS TO TAKE PLACE OUTSIDE OF THE TENANT AREA AS PART OF THIS PROJECT.

ZONING
CURRENTLY ZONED LOCAL BUSINESS DISTRICT, CLASS A (BA)
A RESTURANT IS A PERMITTED USE WITHIN THIS ZONING, REQUIRING A SPECIAL PERMIT.

PARKING
PER CITY ORDINANCE, ONE (1) OFF-STREET PARKING SPACE SHALL BE PROVIDED FOR EACH TWO (2) PERSONS AT MAXIMUM CAPACITY. THIS WOULD REQUIRE 59 OFF-STREET PARKING SPACES FOR THE PROJECT. AS THIS IS A PROPERTY WITHIN A DENSE MIXED-USE NEIGHBORHOOD, NO OFF-STREET PARKING SPACES ARE PROVIDED FOR COMMERCIAL TENANTS AND THEIR CUSTOMERS. AS SUCH A PARKING WAIVER IS BEING REQUESTED.

REQUIRED PARKING SPACES: 59
PROVIDED PARKING SPACES: 0 (WAIVER REQUIRED)

BUILDING CODES
2015 INTERNATIONAL EXISTING BUILDING CODE
2015 INTERNATIONAL BUILDING CODE
2015 INTERNATIONAL PLUMBING CODE
2015 INTERNATIONAL FIRE CODE
2015 INTERNATIONAL MECHANICAL CODE

TENANT OCCUPANCY CLASSIFICATION
A-2 - RESTAURANT

FIRE PROTECTION
BUILDING IS SPRINKLERED
FIRE ALARM IS UP TO CURRENT CODE
KITCHEN HOOD TO BE TIED INTO BUILDING FIRE ALARM

FIRE EXTINGUISHERS TO BE PROVIDED AS SHOWN ON PLAN

NEW SMOKE DETECTORS PROVIDED WITHIN TENANT SPACE

EXISTING 1 HR FIRE RATING BETWEEN FIRST FLOOR OCCUPANCY AND UPPER FLOORS

STRONG HEARTS TENANT AREA CALCULATIONS
ASSEMBLY - CONCENTRATED: $216 / 7 = 31$ OCCUPANTS
ASSEMBLY - UNCONCENTRATED: $1108 / 15 = 75$ OCCUPANTS
SERVING: $420 / 200 = 3$ OCCUPANTS
KITCHEN: $1130 / 200 = 6$ OCCUPANTS
OFFICE: $130 / 100 = 2$ OCCUPANTS

TOTAL OCCUPANCY: 117 OCCUPANTS

PLUMBING FIXTURE COUNTS
A-2 REQUIRES: 1 WC PER 75 OCCUPANTS
1 LAV PER 200 OCCUPANTS

TENANT SPACE: 117 OCCUPANTS
(58 M, 59 F)

PROVIDED FACILITIES: 1 MALE WC
1 MALE LAV
1 FEMALE WC
1 FEMALE LAV

GREASE INTERCEPTOR TO BE PROVIDED PER SECTION 1003 OF THE NYS PLUMBING CODE

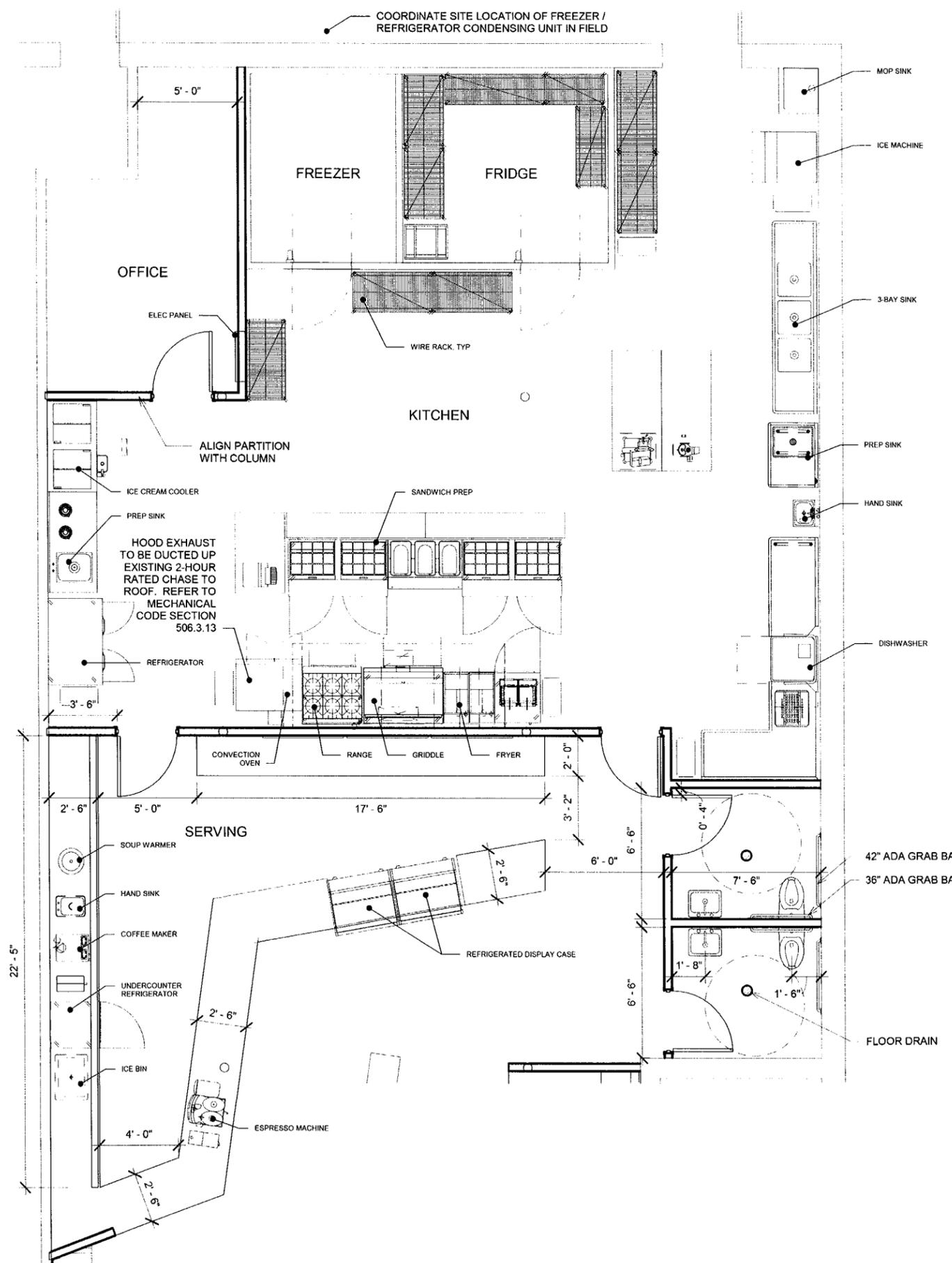
NATALIE EVANS, ARCHITECT

STRONG HEARTS CAFE
900 EAST FAYETTE STREET
SYRACUSE, NY 13210

CODE SUMMARY

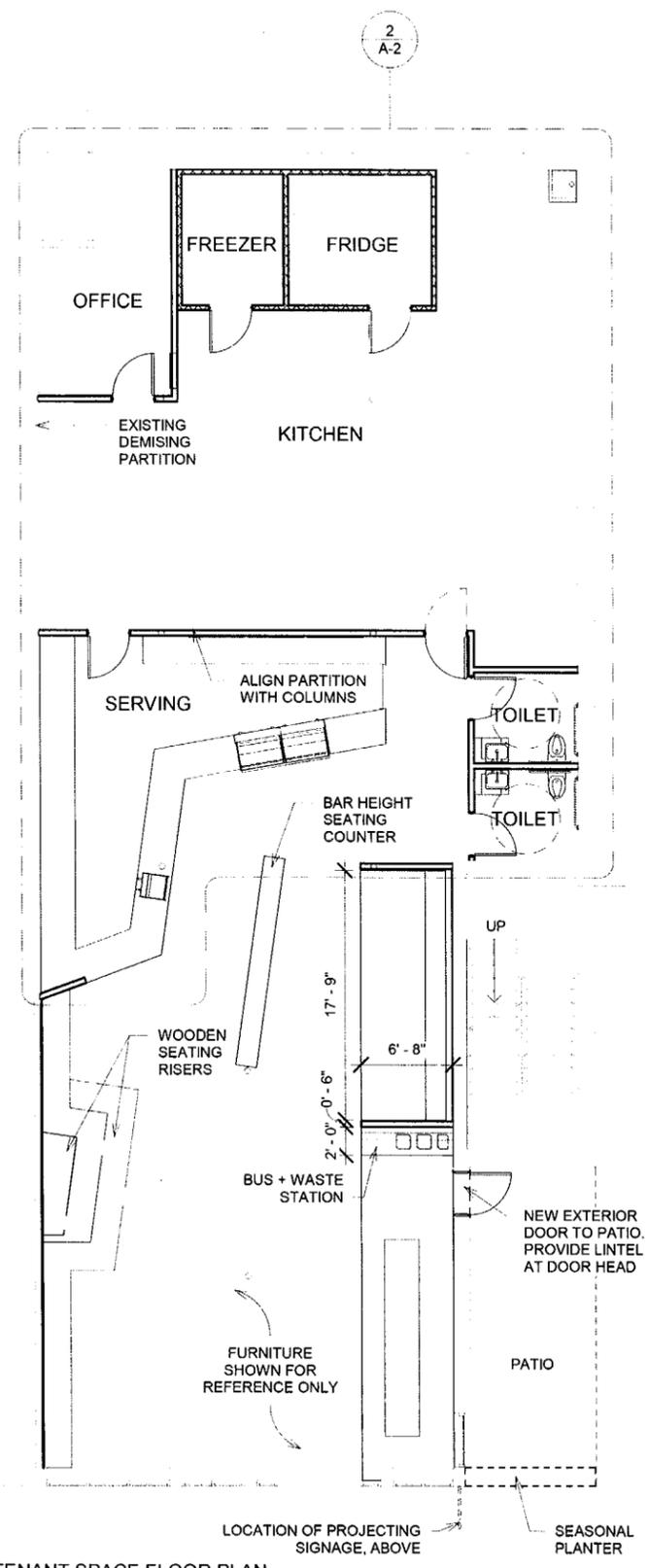
DATE ISSUED:
01/11/2019
DATES REVISED:

A-1



2 ENLARGED FLOOR PLAN AT KITCHEN, SERVING, AND TOILETS
1/4" = 1'-0"

NOTE: ALL PARTITIONS WITHIN TENANT SPACE TO BE 3/8" METAL STUD WITH ONE LAYER OF 5/8" TYPE X GWB ON EACH SIDE
DIMENSIONS ARE TO FACE OF GWB UNLESS OTHERWISE NOTED



1 TENANT SPACE FLOOR PLAN
1/8" = 1'-0"

NATALIE EVANS, ARCHITECT

STRONG HEARTS CAFE
900 EAST FAYETTE STREET
SYRACUSE, NY 13210

OVERALL TENANT FLOOR PLAN AND ENLARGED KITCHEN, SERVING AND TOILET PLAN

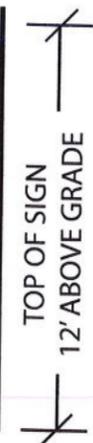
DATE ISSUED:
01/11/2019

DATES REVISED:

A-2



BLADE SIGN
ELEVATION



BRANDING ADHERED TO INSIDE OF GLAZING:
6' WIDE x 5' TALL = 30 SF

WOOD AND METAL BLADE SIGN:
3' WIDE x 4' TALL = 12 SF

**STRONG HEARTS CAFE
900 EAST FAYETTE ST
PROPOSED SIGNAGE**

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: Strong Hearts Tenant Build-out			
Project Location (describe, and attach a location map): 900 East Fayette Street, Suite 3			
Brief Description of Proposed Action: BUILD OUT OF GROUND FLOOR TENANT SPACE WITHIN A NEWLY-CONSTRUCTED ADDITION TO 900 EAST FAYETTE STREET TO BE STRONG HEARTS CAFE. THE EATERY WILL HAVE A FULL KITCHEN AND HAVE SEATING FOR ROUGHLY 60. EXTERIOR WORK IS LIMITED TO A NEW DOOR SERVING AN ADJACENT PATIO AS WELL AS AFFIXING SIGNAGE TO THE FACADE.			
Name of Applicant or Sponsor: Strong Hearts Cafe, LLC		Telephone: 315-729-1793	
		E-Mail: nick@strongheartscafe.com	
Address: 719 East Genesee St			
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"/>
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 Special Permit			YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		_____ 0 acres	
b. Total acreage to be physically disturbed?		_____ 0 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ 0 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 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)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</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?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</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?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input 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: <u>Nicholas Ryan</u> <u>Owner</u> Date: <u>12/21/2018</u></p> <p>Signature: <u></u></p>		