

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: 4/30/2019 Case Number: SP-19-14 Zoning District: BA

NEW SPECIAL PERMIT  MODIFICATION OF EXISTING SPECIAL PERMIT

LIST ALL ADDRESSES INVOLVED IN YOUR PROJECT:

1226/1228 E Fayette St

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

Section: <u>048</u>	Block: <u>08</u>	Lot: <u>06</u>
Section: <u>048</u>	Block: <u>08</u>	Lot: <u>07</u>
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:

1226 E Fayette st. I would like to put a coffee & doughnut shop in this building.  
In the years to come, I may expand this to be a restaurant. In which case, I would apply for a food and liquor license.

PROPERTY OWNER INFORMATION:

Name(s): Fen Lin  
Mailing Address: 315 Stanton Drive Syracuse NY  
Zip: 13214 Daytime phone: 315-882-0516 Home phone:   
E-mail: wicli@hotmail.com

**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	<input type="text" value="3' by 4'"/>	Location	<input type="text" value="ft of building next to fense"/>	Type	<input type="text" value="Ground"/>
Size	<input type="text"/>	Location	<input type="text"/>	Type	<input type="text"/>
Size	<input type="text"/>	Location	<input type="text"/>	Type	<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.

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

3/14/19  
Date

FEN LIN  
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**

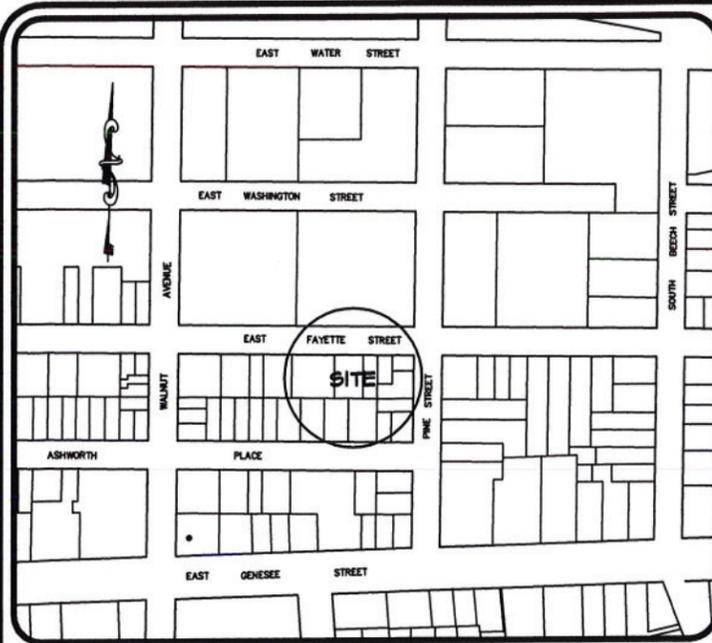
ONONDAGA COUNTY PLANNING BOARD

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) \_\_\_\_\_

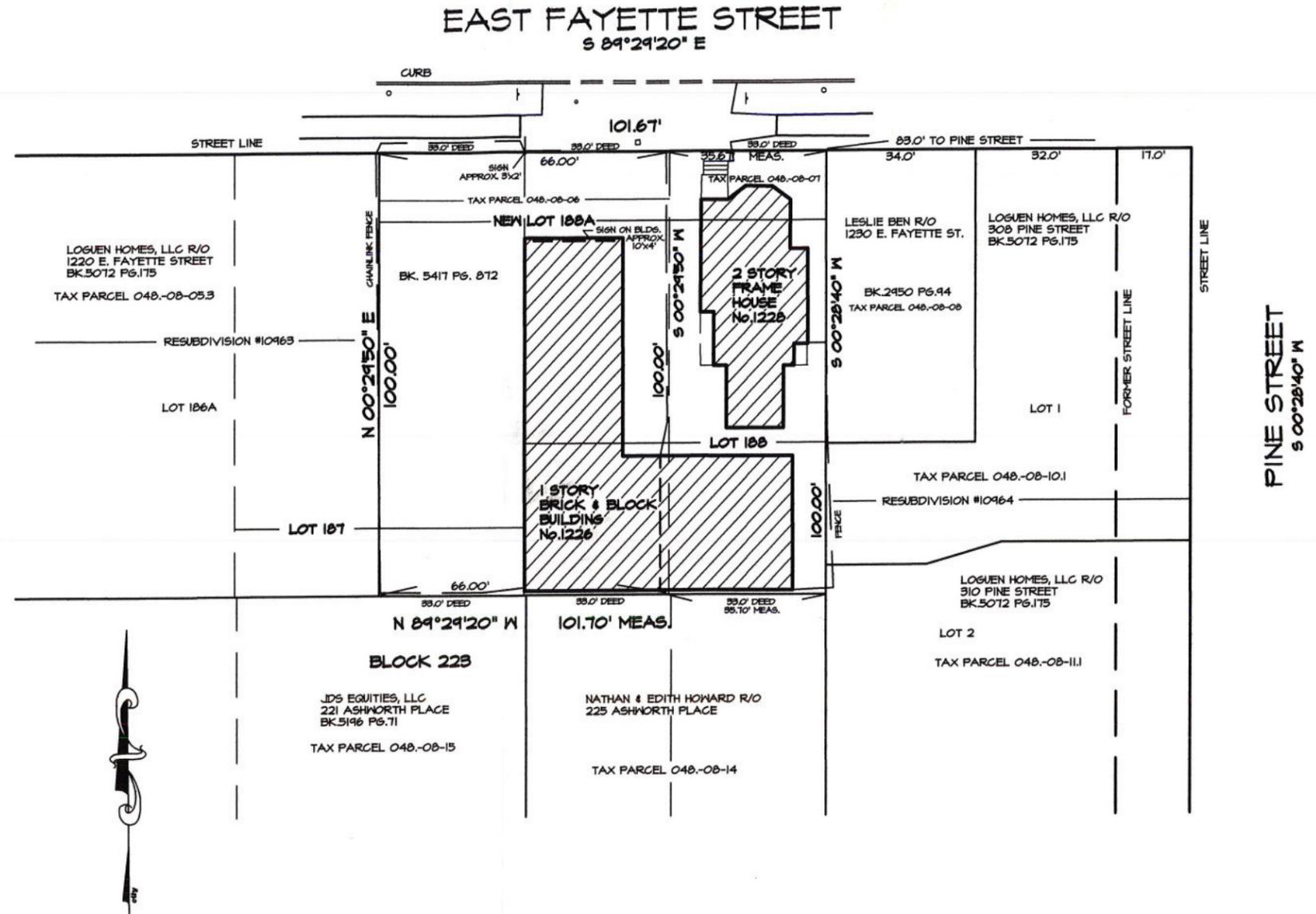
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APR 2 2019



SITE MAP  
NO SCALE

APPROVALS:



NOTE: CITY SEWER AND WATER ARE AVAILABLE TO SITE

MAP REFERENCES: CITY PLATES 185 AND 186  
TRACT MAP No.10963  
BY LEHR LAND SURVEYORS FILED 12/12/2008  
TRACT MAP No.10964  
BY LEHR LAND SURVEYORS FILED 12/12/2008

DEED REFERENCES: BOOK 5072 PAGES 175 &c.  
BOOK 5417 PAGES 872 &c.  
BOOK 5196 PAGES 71 &c.

UNAUTHORIZED ALTERATION OR ADDITION TO THIS  
DRAWING IS A VIOLATION OF THE NEW YORK STATE  
EDUCATION LAW ARTICLE 148, SECTION 7209

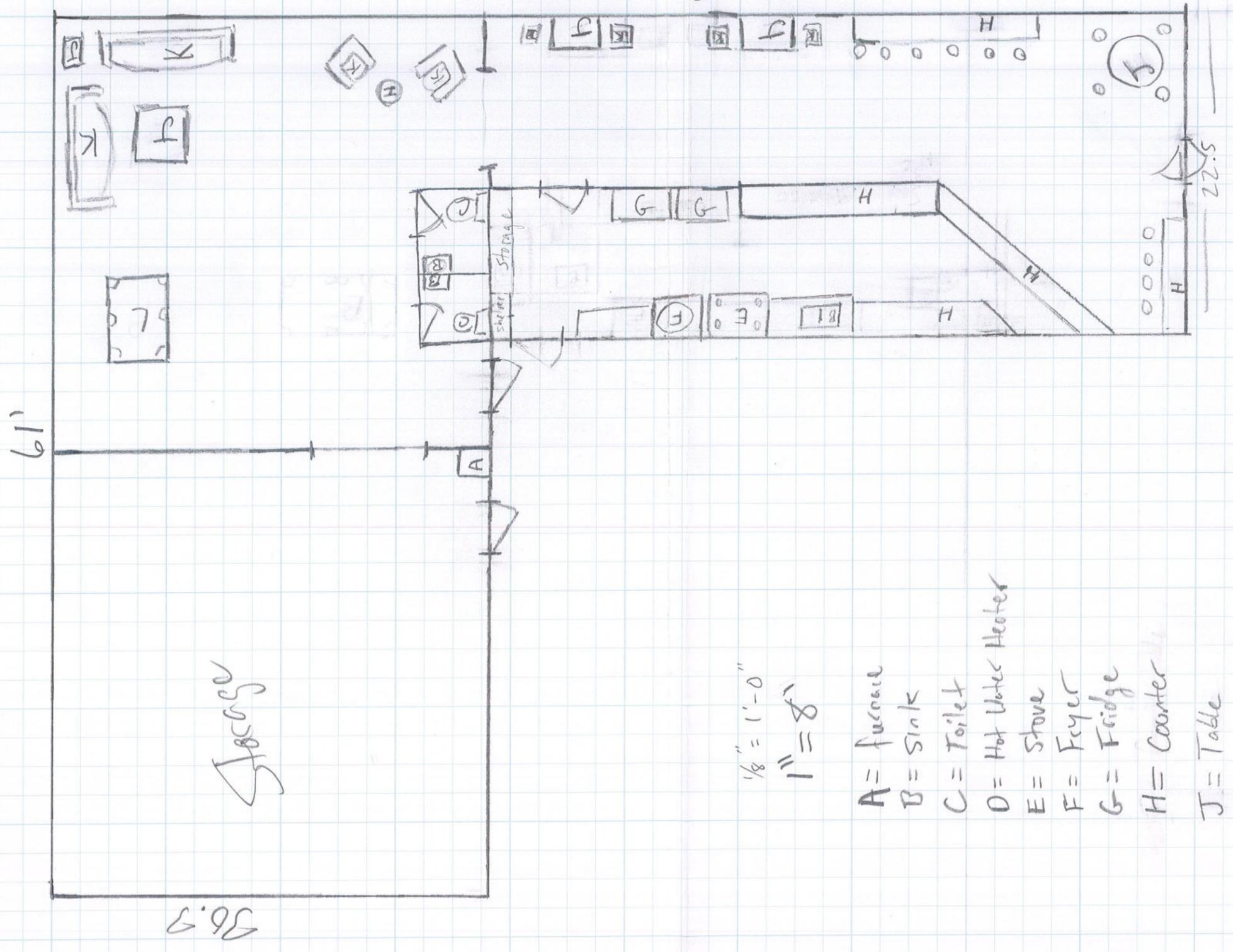
RESUBDIVISION ON PART OF LOT 187 AND ALL OF LOT 188, BLOCK 228, INTO NEW LOT 188A, CITY OF SYRACUSE, COUNTY OF ONONDAGA, STATE OF NEW YORK. KNOWN AS No.1226 - 1228 EAST FAYETTE STREET THE UNDERSIGNED SURVEYOR HEREBY CERTIFIES THAT THIS IS AN ACCURATE MAP OF AN ACTUAL SURVEY <b>GLEN A. MIHAL, L.S.#049885</b> LICENSED LAND SURVEYOR SYRACUSE, NEW YORK	DATE 9/20/16
	SCALE 1"=20'
	REVISED 4/7/19

2103 242 896



Paul Bolinski 315-383-5652  
 1226 E Fayette St  
 Syracuse NY

Floor Plan



1/8" = 1'-0"  
 1" = 8"

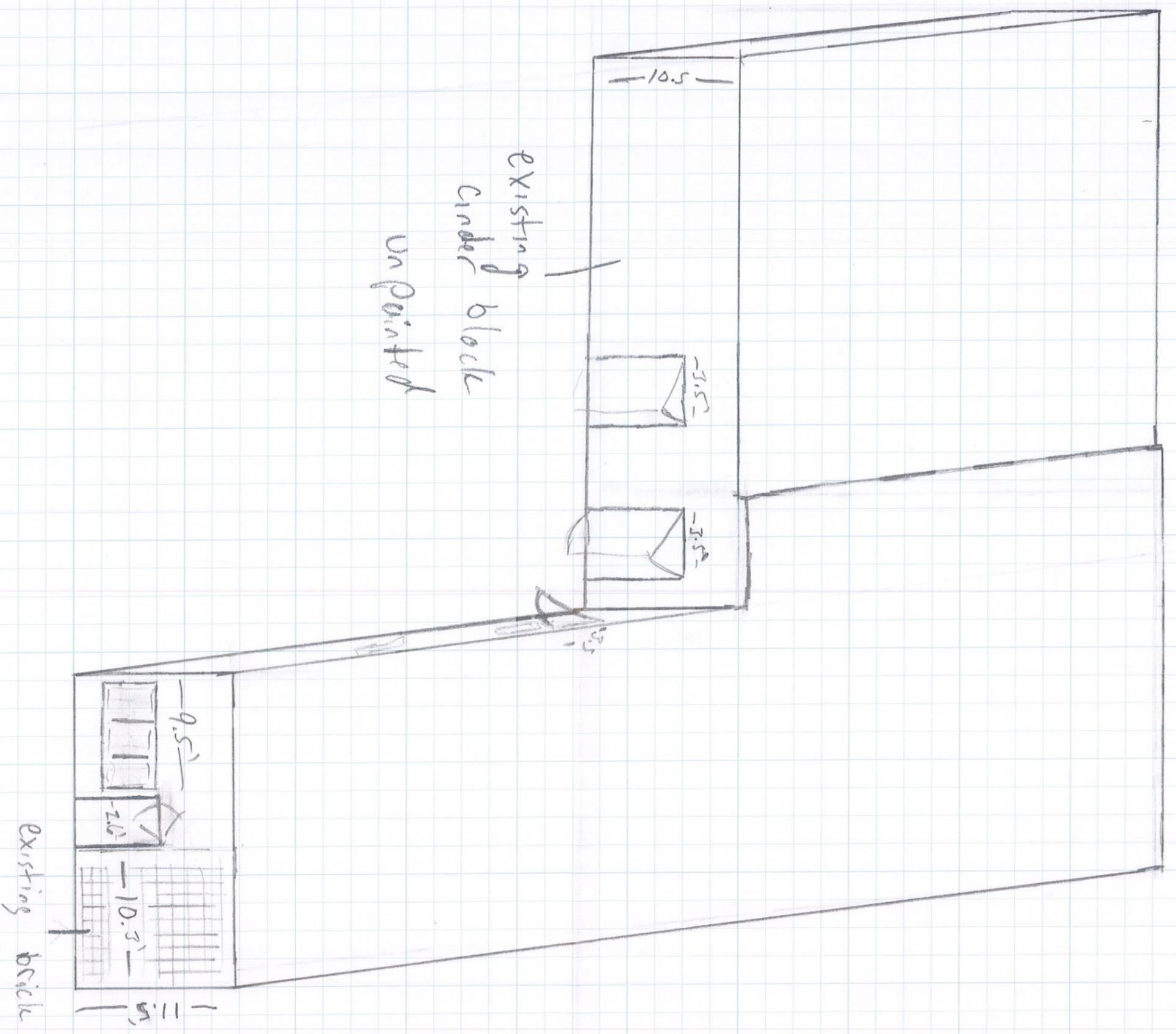
- A = Furnace
- B = Sink
- C = Toilet
- D = Hot Water Heater
- E = Stove
- F = Fryer
- G = Fridge
- H = Counter
- J = Table
- K = Sofa / choir
- L = pool table

1226 E Fayette St

Paul Bolinski 315-383-5652

1226 E Fayette St Syc

1/8" = 1' Elevation Plan



Existing unpainted cinder block

Existing brick



Paul Bolinski 315-383-5652  
1226/1228 E Fayette St



Sign 2' x 3'



APR 8 2014

# 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.

<b>Part 1 - Project and Sponsor Information</b>			
Name of Action or Project: <u>Coffee shop Paul Bolinski's Big Red Properties</u>			
Project Location (describe, and attach a location map): <u>1226/1228 E Fayette St Syracuse NY 13210</u>			
Brief Description of Proposed Action: <u>The residential house will be rented out. The commercial building (1226) will facilitate a coffee &amp; Doughnut shop.</u>			
Name of Applicant or Sponsor: <u>Paul Bolinski</u>		Telephone: <u>315-389-5652</u>	
		E-Mail: <u>bigredproperty5@gmail.com</u>	
Address: <u>114 Windemere rd. Syracuse NY <del>13205</del></u>			
City/PO: <u>Syracuse</u>	State: <u>NY</u>	Zip Code: <u>13205</u>	
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 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:		NO <input type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<u>.23</u>	acres
b. Total acreage to be physically disturbed?		<u>.23</u>	acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>.23</u>	acres
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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 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?	<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:

Shoreline    Forest    Agricultural/grasslands    Early mid-successional  
 Wetland    Urban    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 plan?	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,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
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	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 CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE**

Applicant/sponsor/name: Paul Bolinsky Date: 4/22/19  
Signature: [Signature] Title: owner/purchaser