

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:

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="070"/>	Block:	<input type="text" value="10"/>	Lot:	<input type="text" value="21.1"/>
Section:	<input type="text" value="070"/>	Block:	<input type="text" value="10"/>	Lot:	<input type="text" value="21.2"/>
Section:	<input type="text" value="070"/>	Block:	<input type="text" value="10"/>	Lot:	<input type="text" value="21.3"/>

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 (Wall, Ground, Projecting, Window)

Size	<input type="text" value="2.5 ft x 20 ft"/>	Location	<input type="text" value="front of building"/>	Type	<input type="text" value="wall"/>
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

2705 3 5 1111

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.

Jett Phillips

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

7/25/19
Date

Jett Phillips

PRINT NAME OF PROPERTY OWNER

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

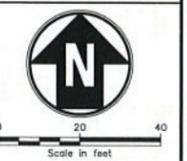
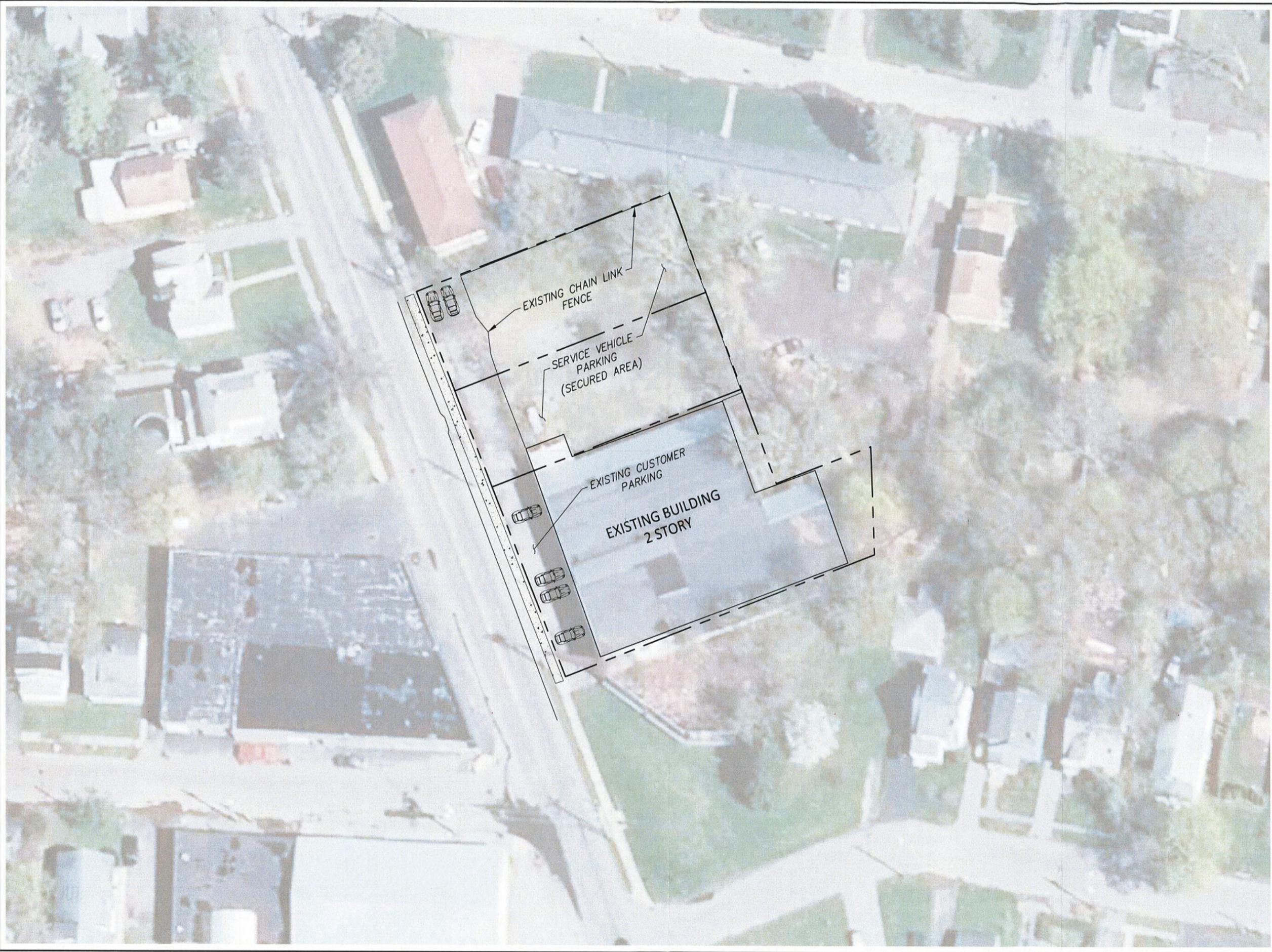
FOR STAFF USE ONLY

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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File: V:\OH_DATA\OFFICES\SNY\GOV\COMM\PR\CIVIL-SITE\BOUCHARD\J&J AUTO 1427 VALLEY DRIVE\CADD\SITE-PLAN-7-25-19.DWG
 Saved: 7/25/2019 3:28:02 PM Plotted: 7/25/2019 3:46:28 PM Current User: Moq, Rorand LastSavedBy: 8000



J & J AUTOMOTIVE
 766 W. GENESEE ST.
 SYRACUSE, NY 13204

IT IS A VIOLATION OF LAW FOR ANY PERSON, UNLESS THEY ARE ACTING UNDER THE DIRECTION OF A LICENSED PROFESSIONAL ENGINEER, ARCHITECT, LANDSCAPE ARCHITECT OR LAND SURVEYOR TO USE OR REPRODUCE ANY PART OF THIS DRAWING OR STAMP OF A LICENSED PROFESSIONAL AS A BASIS FOR ANY DESIGN, CONSTRUCTION, CONTRACT, LICENSE, PROJECT OR ANY SUPERVISORY WORK WITHOUT THE EXISTING AND INCLUSIVE SIGNATURE AND SEAL OF THE PROFESSIONAL ENGINEER, ARCHITECT, LANDSCAPE ARCHITECT OR LAND SURVEYOR. THE DATE OF SUCH A SIGNATURE AND A SPECIFIC DESCRIPTION OF THE ACTIVATION.

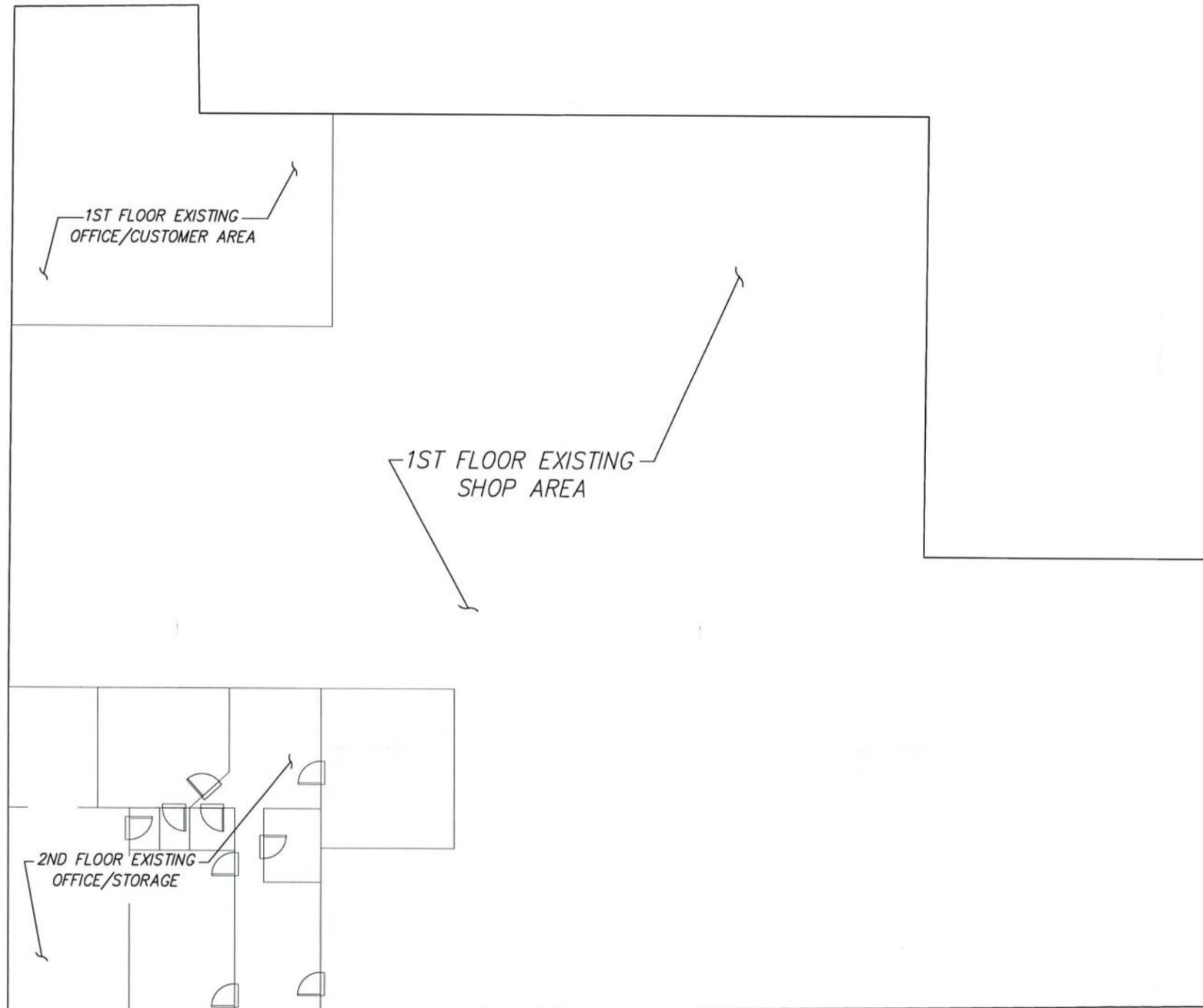
PROPOSED AUTO REPAIR
 1427 VALLEY DRIVE
 SYRACUSE, NY 13207

No.	Submitted / Revision	Approved By	Date

SITE PLAN

Designed By: RPM	Drawn By: RPM	Checked By: BFB
Issue Date: 7/25/19	Project No: 23278	Scale: AS SHOWN

Drawing No.:
SP



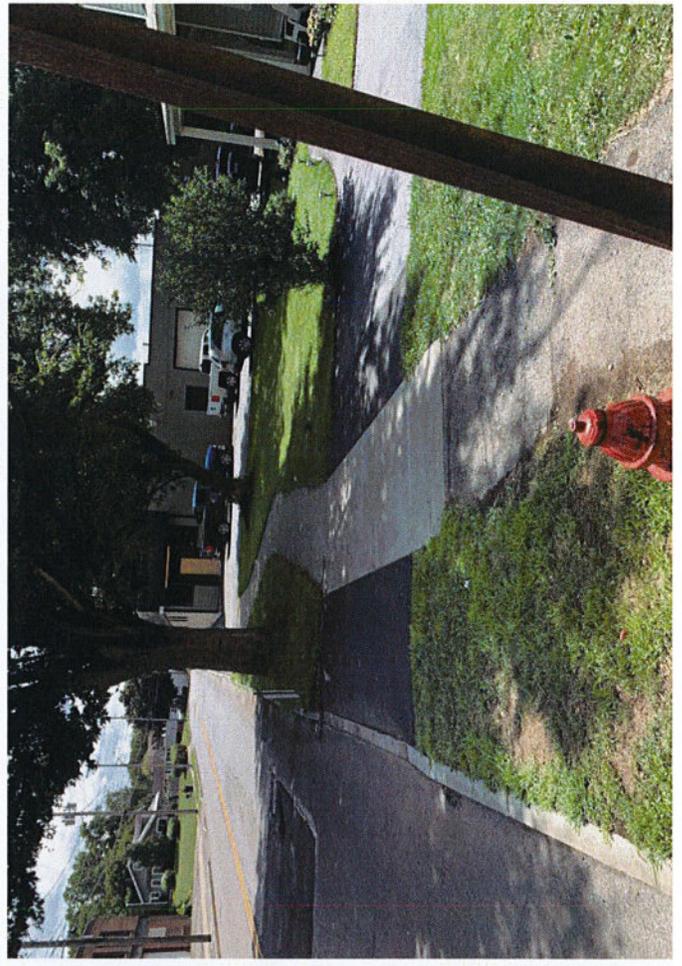
EXISTING BUILDING
FLOOR PLAN



FRONT ELEVATION



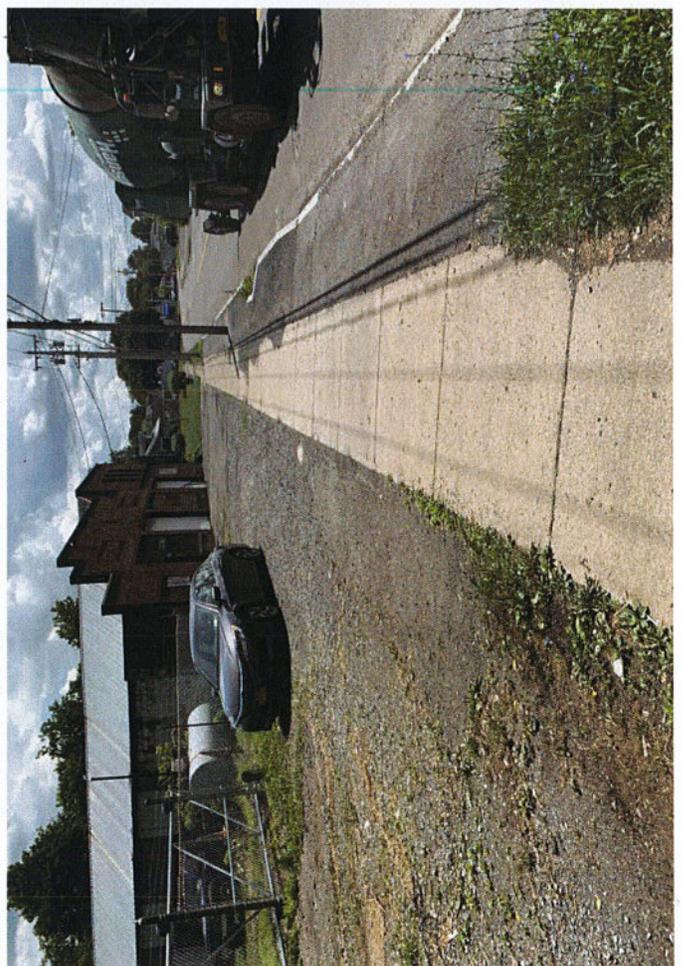
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08 AUG



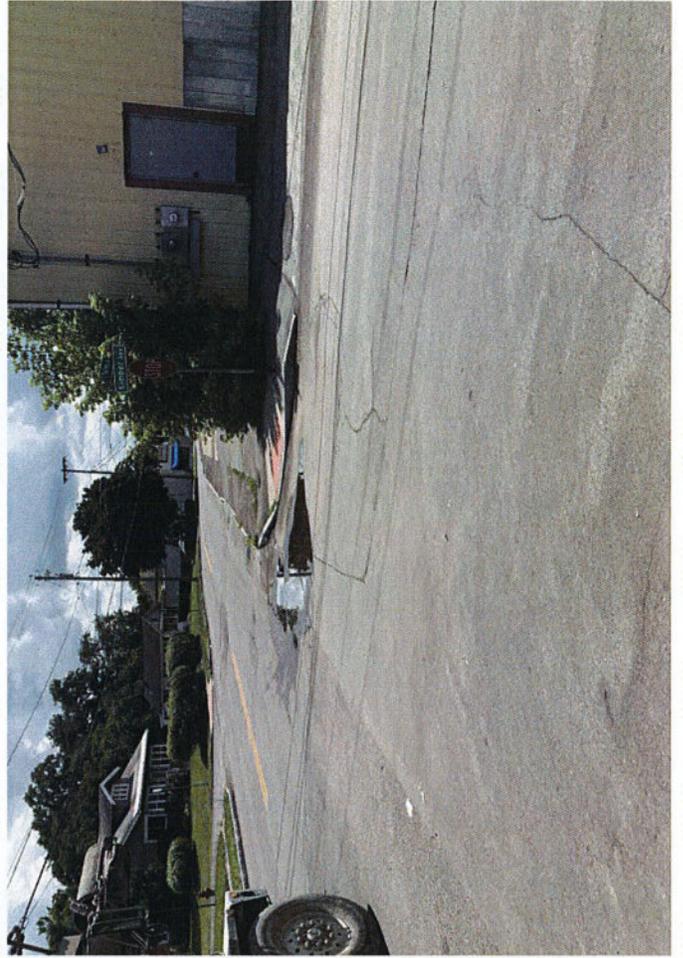
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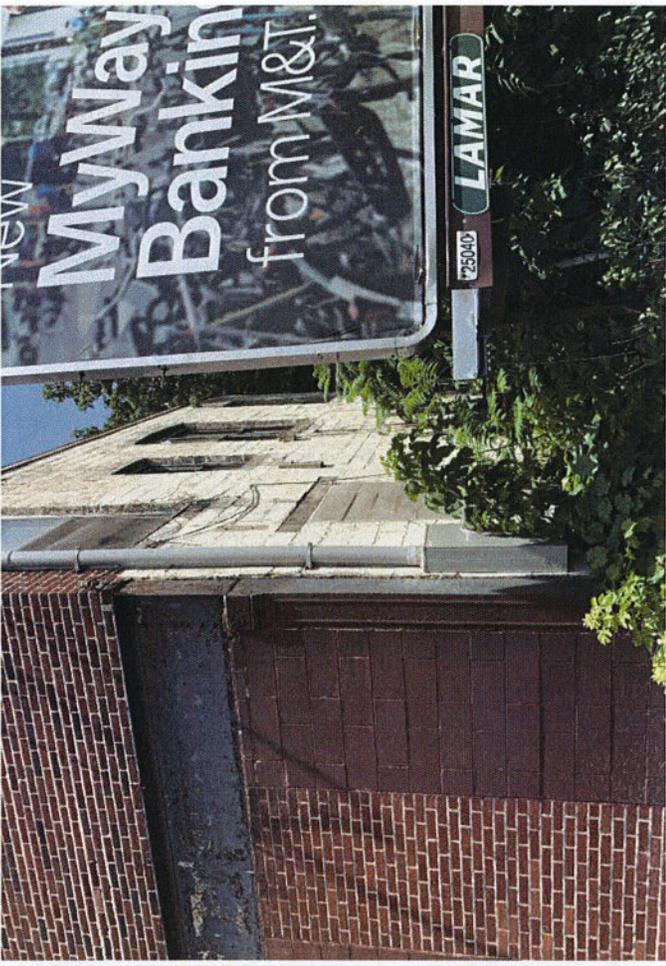
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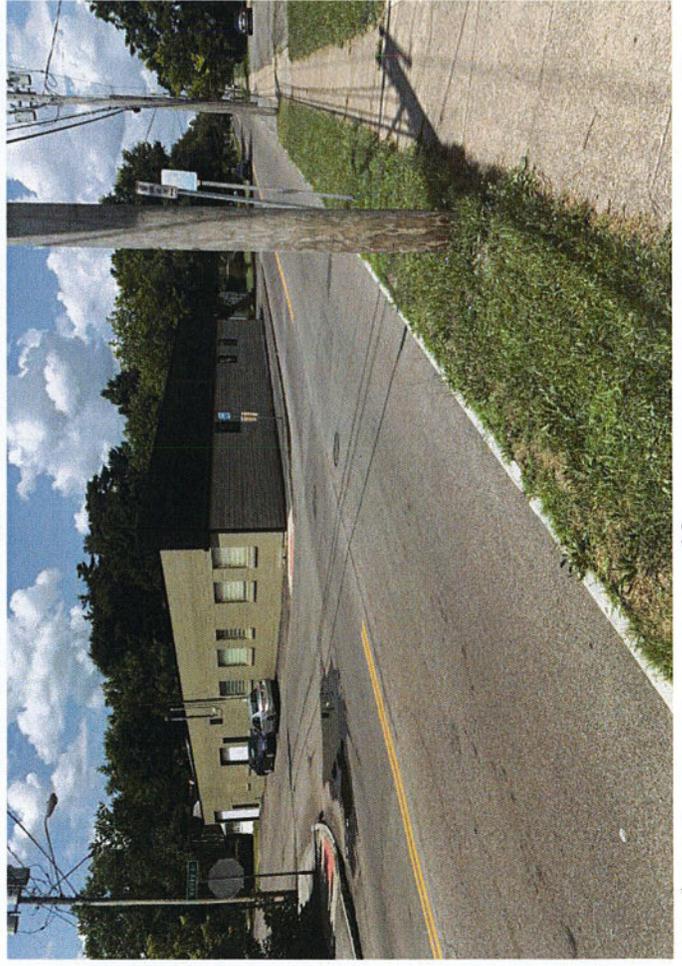
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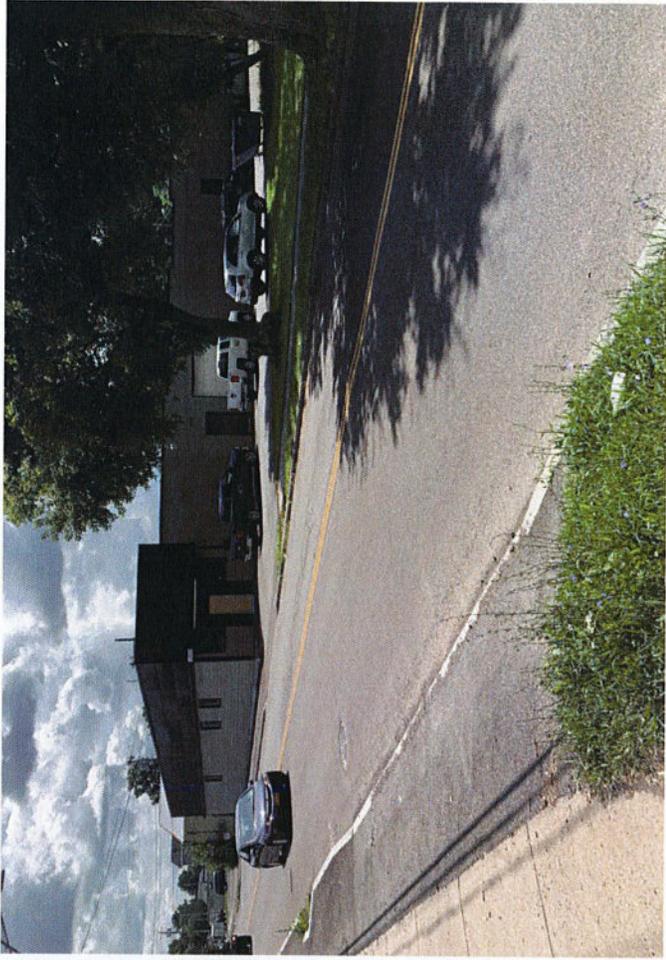
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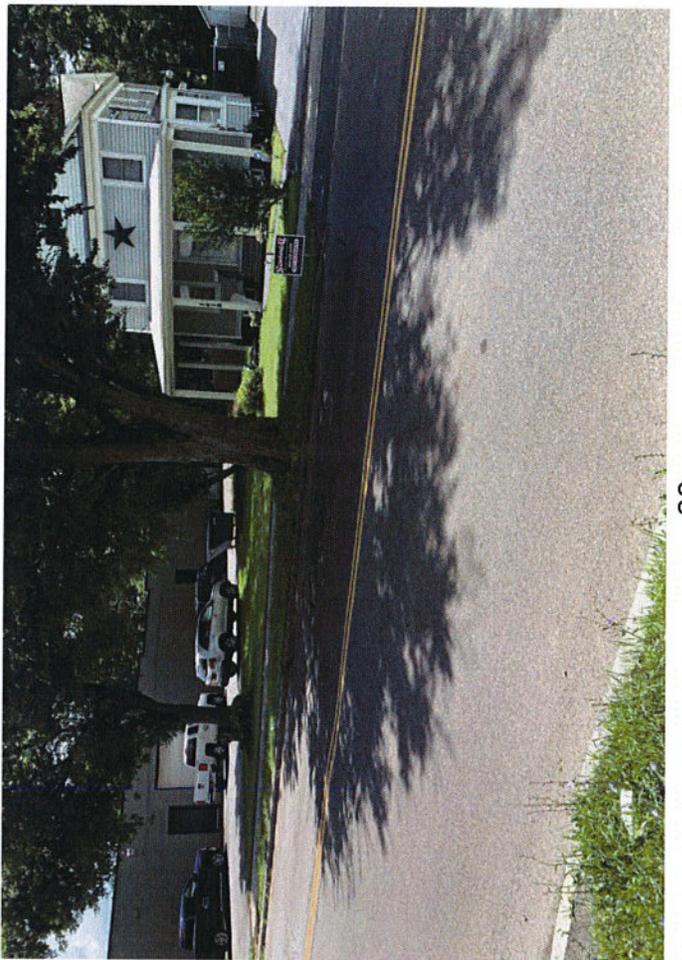
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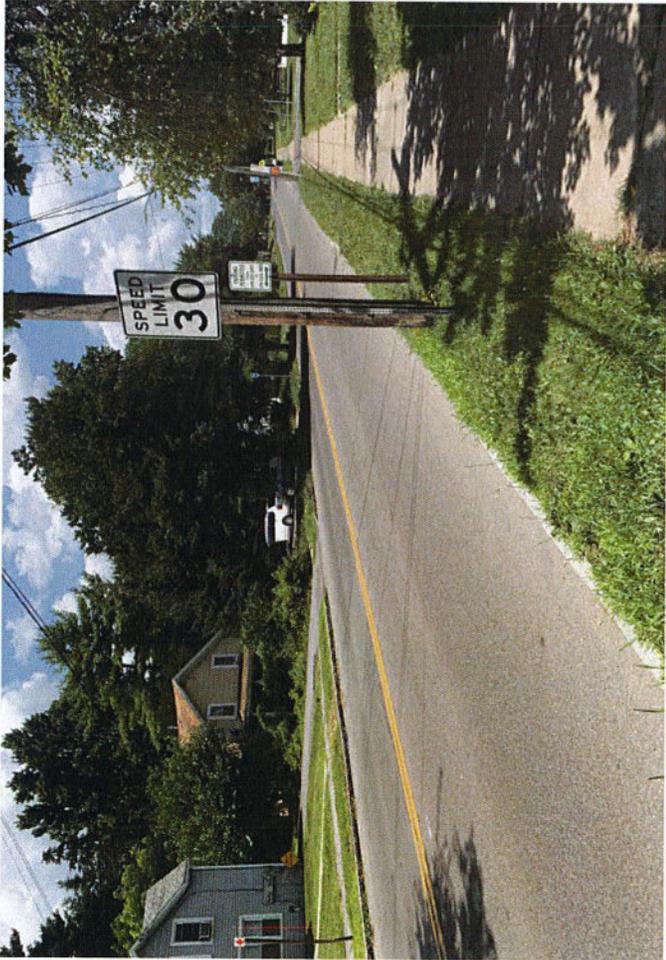
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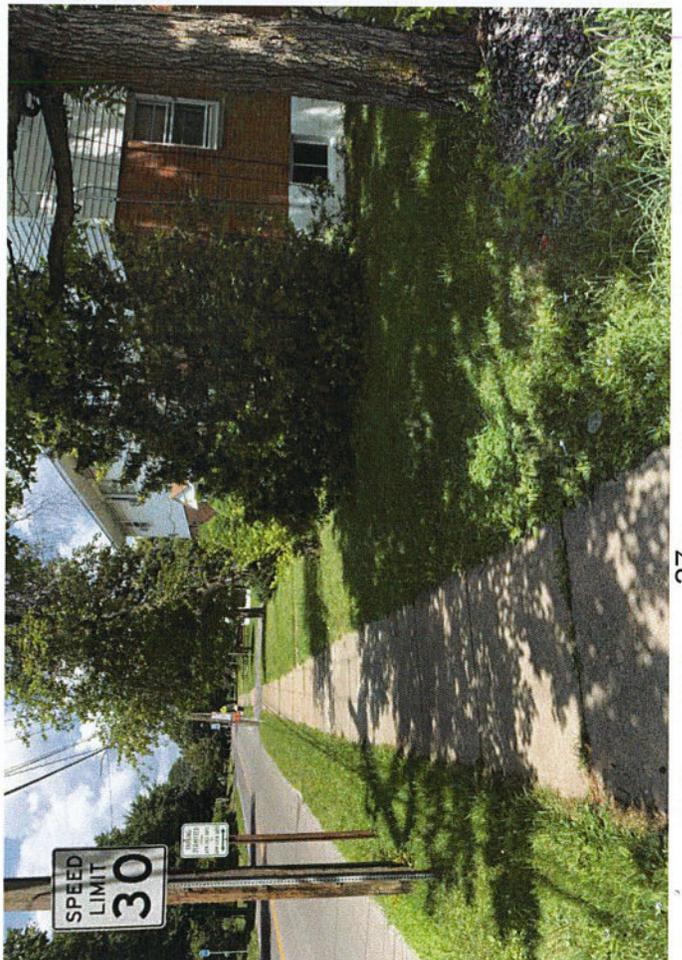
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Short Environmental Assessment Form

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: J & J Automotive			
Project Location (describe, and attach a location map): 1427 Valley Drive Syracuse, NY 13207			
Brief Description of Proposed Action: J & J Automotive will be moving into the existing building at 1427 Valley Drive, Syracuse, NY 13207 and will operate their light duty automotive repair business. The project will include minor renovation to the existing vacant building.			
Name of Applicant or Sponsor: J & J Automotive		Telephone: 315-575-0181	
Address: 766 W. Genesee Street		E-Mail:	
City/PO: Syracuse	State: NY	Zip Code: 13204	
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"/>
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:			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ 0.67 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? _____ 0.67 acres			YES <input type="checkbox"/>
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 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? 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"/>	NO YES
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"/>	NO YES
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"/>	NO YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO YES
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"/>	NO YES
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"/>	NO YES
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"/>	NO YES
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 checked="" type="checkbox"/>	<input type="checkbox"/>	NO YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO YES
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"/>	NO YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO YES

