

**City of Syracuse Zoning Administration**

Application for  PROJECT SITE REVIEW  SITE PLAN REVIEW-LAKEFRONT DISTRICT  
 City Hall Commons \* Room 101 \* 201 E. Washington Street \* Syracuse, NY 13202-1426 \* 315-448-8640

For Office Use: Filing Date: 10/17/19 Case Number: SR-19-08 Zoning District: Lakefront T5

**PROPERTY TAX ASSESSMENT ADDRESS(ES) (street number and name) TAX ID(S)**  
 (As listed on the City Tax Assessment Roll available at syrgov.net/Assessment.aspx, or 315-448-8280.)  
300 Spencer St. & Solar St. 117.-.08-03.1  
324 Spencer St. 117.-.08-04.0

**PROJECT INFORMATION** (please check all that apply and briefly describe):

- Demolition: (2) Existing 1 story Metal Frame Garage/ Office Buildings
- New Construction: (1) Proposed 5 Story & roof Office Building, (1) Covered Parking Structure
- Exterior Alteration: \_\_\_\_\_

**OCCUPANCY INFORMATION** Occupancies/Uses (existing, proposed, and changes): \_\_\_\_\_

Existing use includes offices and maintenance garage. Proposed usage is office.

**PLEASE DESCRIBE ALL ASPECTS OF YOUR PROJECT IN DETAIL:**

Construction of (1) new 106,000 sf office building in Inner Harbor Overlay District of City of Syracuse. Building use will consist of office for approximately 500 employees. Proposed site plan complies with T-5 zoning of the Inner Harbor District within the City of Syracuse. Site improvements include but are not limited to repaving existing asphalt parking lot, incorporating pedestrian walkways, improving storm-water facilities, and providing utility connections for proposed building. Right of way improvements within City of Syracuse ROW include but not limited to sidewalk reconstruction, city approved street lighting, on-street parking, and shade tree planting.

**SIGN TABLE** – Sign information is required for Site Plan Review Lakefront District approval. Project Site Review entails a preliminary sign review only. Please key (1, 2, 3, etc.) the sign on a location map. See submission requirements.

Sign Number/ Key	Proposed or Existing	Wall, Projecting, Window, or Ground	Height	Width	Area	Distance from Ground to Top of Sign	Illumination
1.	proposed	Ground	2'-9"	9'-7"	76.64 sf	4'-3"	Backlight
2.	proposed	Wall -Mounted	8'-0"	11'-2"	89 sf	72'-2"	Backlight
3.	proposed	Wall -Mounted	8'-0"	11'-2"	89 sf	61'-11"	Backlight
4.	proposed	Wall -Mounted	1'-3"	24'-8"	31 sf	26'-1"	Backlight

**CURRENT PROPERTY OWNER**

(As listed on the City Tax Assessment Roll available at syrgov.net/Assessment.aspx, or 315-448-8280.)

Name(s): 300 Spencer St., LLC  
Mailing Address: 201 Solar St.  
Zip: 13204 Telephone: 866-588-7910 E-mail:

**APPLICANT INFORMATION:**

(If different from current property owner.)

Contract Purchaser(s)  Tenant  Co-Applicant  Other (please state):  
Name(s):  
Mailing Address:  
Zip: Telephone: E-mail:

**REPRESENTATIVE INFORMATION:**

(If applicable.)

Attorney  Architect  Contractor  Other (please state): Landscape Architect  
Name(s): Keplinger Freeman Associates - Scott Freeman  
Mailing Address: 6320 Fly Rd. East Syracuse NY  
Zip: 13057 Telephone: 315-445-7980 E-mail: sf@keplingerfreeman.com

**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.

**CURRENT PROPERTY OWNER SIGNATURE**

As listed on the City of Syracuse Tax Assessment Roll available at syrgov.net/Assessment.aspx, or 315-448-8280.. If not listed as the owner on the current roll, 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.

  
\_\_\_\_\_  
CURRENT PROPERTY OWNER SIGNATURE  
10/11/19  
DATE

Albert C. Crawford - CFO 300 Spencer St. LLC  
Please legibly PRINT SIGNATURE NAME and TITLE

October 11, 2019

**Heather Lamendola, Zoning Administrator**

City of Syracuse Department of Zoning  
201 E. Washington St., Rm 500  
Syracuse, NY 13202  
(P) - (315) 448-8640



Re: Banker's Healthcare Group – Site Plan Review  
300 Spencer St. Syracuse NY 13204

Dear Heather,

Below is a list of the documents submitted on/before October 15<sup>th</sup>, 2019. This date was discussed between the KFA Office and Jeff Harrop, City Zoning as the latest we could submit plans to have an authorization meeting on October 28<sup>th</sup>, 2019. Please confirm the documentation delivered constitutes a complete submission for the above project.

Site Plans

L-100 Site Preparation Plan  
L-101 Stormwater Pollution Prevention Plan  
L-200 Grading, Drainage, and Utilities Plan  
L-400 Layout Plan  
L-500 Planting Plan  
L-600 Lighting Plan  
L-700 Details  
L-701 Details  
L-702 Details  
L-703 Details

Architectural Plans

A1.01 – First Floor Garage  
A1.02 – Second & Third Floor  
A1.03 – Second & Third Floor  
A1.04 – Fourth & Fifth Floor  
A1.05 – Penthouse & Roof Plan  
A3.01 – Exterior Elevations  
A3.01 – Exterior Elevations

Subdivision Plans

XXX Subdivision Plans (Expected Monday 10/14/19)

Please call our office at 315-445-7980 to discuss the required submission documents. We confirmed with Jeff Harrop regarding the submission count and size.

We look forward to meeting with the City of Syracuse Planning Commission members to present our plans.

Sincerely,

Scott L. Freeman  
Keplinger Freeman Associates

**Full Environmental Assessment Form  
Part 1 - Project and Setting**

**Instructions for Completing Part 1**

**Part 1 is to be completed by the applicant or project sponsor.** 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

**A. Project and Applicant/Sponsor Information.**

Name of Action or Project: Banker's Healthcare Group Office Building		
Project Location (describe, and attach a general location map): 300 Spencer St & Solar St. (Tax Map #117.-08-03.1; 117.-08-04.0)		
Brief Description of Proposed Action (include purpose or need): Construction of (1) new 106,000 sf office building in Inner Harbor Overlay District of City of Syracuse. Building use will consist of office for approximately 500 employees. Proposed site plan complies with T-5 zoning of the Inner Harbor District within the City of Syracuse. Site improvements include but are not limited to repaving existing asphalt parking lot, incorporating pedestrian walkways, improving storm-water facilities, and providing utility connections for proposed building. Right of way improvements within City of Syracuse ROW include but not limited to sidewalk reconstruction, city approved street lighting, on-street parking, and shade tree planting.		
Name of Applicant/Sponsor: Keplinger Freeman Associates (Scott Freeman)		Telephone: 315-445-7980
		E-Mail: sf@keplingerfreeman.com
Address: 6320 Fly Rd. Suite 109		
City/PO: East Syracuse	State: NY	Zip Code: 13057
Project Contact (if not same as sponsor; give name and title/role): Same		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor): 300 Spencer Street, LLC.		Telephone:
		E-Mail:
Address: 201 Solar Street		
City/PO: Syracuse	State: NY	Zip Code: 13204

**B. Government Approvals**

<b>B. Government Approvals, Funding, or Sponsorship.</b> ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)		
<b>Government Entity</b>	<b>If Yes: Identify Agency and Approval(s) Required</b>	<b>Application Date (Actual or projected)</b>
a. City Counsel, Town Board, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	City of Syracuse Planning Commission	10/2019
c. City, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OCWA, OCWEP, SIDA	12/2019
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SOCPA(239)	10/2019
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NYSDEC	12/2019
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Is the project site within a Coastal Erosion Hazard Area?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**C. Planning and Zoning**

<b>C.1. Planning and zoning actions.</b>	
Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<ul style="list-style-type: none"> <li><b>If Yes</b>, complete sections C, F and G.</li> <li><b>If No</b>, proceed to question C.2 and complete all remaining sections and questions in Part 1</li> </ul>	
<b>C.2. Adopted land use plans.</b>	
a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, identify the plan(s): <u>Inner Harbor Overlay District, Erie Canalway National Heritage Corridor, Onondaga Lake Watershed</u> _____ _____	
c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, identify the plan(s): _____ _____ _____	

**C.3. Zoning**

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance.  Yes  No  
 If Yes, what is the zoning classification(s) including any applicable overlay district?  
Parcels zoned T-5 Urban Center District within Inner Harbor Overlay district.

b. Is the use permitted or allowed by a special or conditional use permit?  Yes  No

c. Is a zoning change requested as part of the proposed action?  Yes  No  
 If Yes,  
 i. What is the proposed new zoning for the site? \_\_\_\_\_

**C.4. Existing community services.**

a. In what school district is the project site located? City of Syracuse School District

b. What police or other public protection forces serve the project site?  
City of Syracuse Police Department

c. Which fire protection and emergency medical services serve the project site?  
City of Syracuse Fire Department - Station 2 & 5

d. What parks serve the project site?  
Inner Harbor, Onondaga Creekwalk, Franklin Square Park

**D. Project Details**

**D.1. Proposed and Potential Development**

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Commercial

b. a. Total acreage of the site of the proposed action? \_\_\_\_\_ 6.19 acres  
 b. Total acreage to be physically disturbed? \_\_\_\_\_ 6.19 acres  
 c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? \_\_\_\_\_ 7.76 acres

c. Is the proposed action an expansion of an existing project or use?  Yes  No  
 i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % \_\_\_\_\_ Units: \_\_\_\_\_

d. Is the proposed action a subdivision, or does it include a subdivision?  Yes  No  
 If Yes,  
 i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)  
Commercial Lot Line adjustment  
 ii. Is a cluster/conservation layout proposed?  Yes  No  
 iii. Number of lots proposed? 1  
 iv. Minimum and maximum proposed lot sizes? Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

e. Will the proposed action be constructed in multiple phases?  Yes  No  
 i. If No, anticipated period of construction: \_\_\_\_\_ months  
 ii. If Yes:  
 • Total number of phases anticipated \_\_\_\_\_  
 • Anticipated commencement date of phase 1 (including demolition) \_\_\_\_\_ month \_\_\_\_\_ year  
 • Anticipated completion date of final phase \_\_\_\_\_ month \_\_\_\_\_ year  
 • Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

f. Does the project include new residential uses?  Yes  No  
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)?  Yes  No  
 If Yes,  
 i. Total number of structures 2  
 ii. Dimensions (in feet) of largest proposed structure: 76' height; 130' width; and 180' length  
 iii. Approximate extent of building space to be heated or cooled: 106,000 square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage?  Yes  No  
 If Yes,  
 i. Purpose of the impoundment: Stormwater Management  
 ii. If a water impoundment, the principal source of the water:  Ground water  Surface water streams  Other specify: Surface Runoff, Stormwater  
 iii. If other than water, identify the type of impounded/contained liquids and their source.  
N/A  
 iv. Approximate size of the proposed impoundment. Volume: \_\_\_\_\_ million gallons; surface area: .5 acres  
 v. Dimensions of the proposed dam or impounding structure: \_\_\_\_\_ height; \_\_\_\_\_ length  
 vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):  
Earth Fill

**D.2. Project Operations**

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both?  Yes  No  
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)  
 If Yes:  
 i. What is the purpose of the excavation or dredging? \_\_\_\_\_  
 ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?  
 • Volume (specify tons or cubic yards): \_\_\_\_\_  
 • Over what duration of time? \_\_\_\_\_  
 iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 iv. Will there be onsite dewatering or processing of excavated materials?  Yes  No  
 If yes, describe. \_\_\_\_\_  
 \_\_\_\_\_  
 v. What is the total area to be dredged or excavated? \_\_\_\_\_ acres  
 vi. What is the maximum area to be worked at any one time? \_\_\_\_\_ acres  
 vii. What would be the maximum depth of excavation or dredging? \_\_\_\_\_ feet  
 viii. Will the excavation require blasting?  Yes  No  
 ix. Summarize site reclamation goals and plan: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area?  Yes  No  
 If Yes:  
 i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): \_\_\_\_\_  
 \_\_\_\_\_

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

iii. Will the proposed action cause or result in disturbance to bottom sediments?  Yes  No  
If Yes, describe: \_\_\_\_\_

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?  Yes  No  
If Yes:

- acres of aquatic vegetation proposed to be removed: \_\_\_\_\_
- expected acreage of aquatic vegetation remaining after project completion: \_\_\_\_\_
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): \_\_\_\_\_
- proposed method of plant removal: \_\_\_\_\_
- if chemical/herbicide treatment will be used, specify product(s): \_\_\_\_\_

v. Describe any proposed reclamation/mitigation following disturbance: \_\_\_\_\_

c. Will the proposed action use, or create a new demand for water?  Yes  No  
If Yes:

i. Total anticipated water usage/demand per day: \_\_\_\_\_ 7,500 gallons/day

ii. Will the proposed action obtain water from an existing public water supply?  Yes  No  
If Yes:

- Name of district or service area: City of Syracuse Department of Water
- Does the existing public water supply have capacity to serve the proposal?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No
- Do existing lines serve the project site?  Yes  No

iii. Will line extension within an existing district be necessary to supply the project?  Yes  No  
If Yes:

- Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_
- Source(s) of supply for the district: \_\_\_\_\_

iv. Is a new water supply district or service area proposed to be formed to serve the project site?  Yes  No  
If Yes:

- Applicant/sponsor for new district: \_\_\_\_\_
- Date application submitted or anticipated: \_\_\_\_\_
- Proposed source(s) of supply for new district: \_\_\_\_\_

v. If a public water supply will not be used, describe plans to provide water supply for the project: \_\_\_\_\_

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: \_\_\_\_\_ gallons/minute.

d. Will the proposed action generate liquid wastes?  Yes  No  
If Yes:

i. Total anticipated liquid waste generation per day: \_\_\_\_\_ 7,500 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): \_\_\_\_\_  
Sanitary Wastewater

iii. Will the proposed action use any existing public wastewater treatment facilities?  Yes  No  
If Yes:

- Name of wastewater treatment plant to be used: Metropolitan Syracuse Wastewater Treatment Plant
- Name of district: Onondaga County Dept. of Water Environment Protection - City of Syracuse
- Does the existing wastewater treatment plant have capacity to serve the project?  Yes  No
- Is the project site in the existing district?  Yes  No
- Is expansion of the district needed?  Yes  No

Yes  No  
 Yes  No

- Do existing sewer lines serve the project site?
- Will a line extension within an existing district be necessary to serve the project?  
 If Yes:
  - Describe extensions or capacity expansions proposed to serve this project: \_\_\_\_\_

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?  Yes  No  
 If Yes:
 

- Applicant/sponsor for new district: \_\_\_\_\_
- Date application submitted or anticipated: \_\_\_\_\_
- What is the receiving water for the wastewater discharge? \_\_\_\_\_

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):  
 \_\_\_\_\_  
 \_\_\_\_\_

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: \_\_\_\_\_  
 \_\_\_\_\_

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e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?  Yes  No  
 If Yes:
 

- i. How much impervious surface will the project create in relation to total size of project parcel?  
 \_\_\_\_\_ Square feet or 4.894 acres (impervious surface)  
 \_\_\_\_\_ Square feet or 6.18 acres (parcel size)
- ii. Describe types of new point sources. Roof Drains, Pipes, Swales
- iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?  
On-Site Stormwater Management Facility
  - If to surface waters, identify receiving water bodies or wetlands: \_\_\_\_\_
  - Will stormwater runoff flow to adjacent properties?  Yes  No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?  Yes  No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?  Yes  No  
 If Yes, identify:
 

- i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)  
 \_\_\_\_\_
- ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)  
 \_\_\_\_\_
- iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)  
 \_\_\_\_\_

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g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit?  Yes  No  
 If Yes:
 

- i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year)  Yes  No
- ii. In addition to emissions as calculated in the application, the project will generate:
  - \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide (CO<sub>2</sub>)
  - \_\_\_\_\_ Tons/year (short tons) of Nitrous Oxide (N<sub>2</sub>O)
  - \_\_\_\_\_ Tons/year (short tons) of Perfluorocarbons (PFCs)
  - \_\_\_\_\_ Tons/year (short tons) of Sulfur Hexafluoride (SF<sub>6</sub>)
  - \_\_\_\_\_ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
  - \_\_\_\_\_ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?  Yes  No

If Yes:

i. Estimate methane generation in tons/year (metric): \_\_\_\_\_

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): \_\_\_\_\_

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i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?  Yes  No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): \_\_\_\_\_

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j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services?  Yes  No

If Yes:

i. When is the peak traffic expected (Check all that apply):  Morning  Evening  Weekend  
 Randomly between hours of \_\_\_\_\_ to \_\_\_\_\_.

ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): \_\_\_\_\_  
1 visit per week for garbage trucks

iii. Parking spaces: Existing \_\_\_\_\_ N/A Proposed approx. 500 Net increase/decrease +500

iv. Does the proposed action include any shared use parking?  Yes  No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: N/A

vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site?  Yes  No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles?  Yes  No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes?  Yes  No

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k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy?  Yes  No

If Yes:

i. Estimate annual electricity demand during operation of the proposed action: \_\_\_\_\_

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): \_\_\_\_\_

iii. Will the proposed action require a new, or an upgrade, to an existing substation?  Yes  No

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l. Hours of operation. Answer all items which apply.

i. During Construction:

- Monday - Friday: \_\_\_\_\_ 7 am - 5pm
- Saturday: \_\_\_\_\_
- Sunday: \_\_\_\_\_
- Holidays: \_\_\_\_\_

ii. During Operations:

- Monday - Friday: \_\_\_\_\_ 7 am - 5 pm
- Saturday: \_\_\_\_\_ On occasion
- Sunday: \_\_\_\_\_ On occasion
- Holidays: \_\_\_\_\_

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?  Yes  No  
 If yes:  
 i. Provide details including sources, time of day and duration:  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

n. Will the proposed action have outdoor lighting?  Yes  No  
 If yes:  
 i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:  
Parking Lot Fixtures not to exceed City regulation, Walkway Lighting. All lighting will face downward and be Dark Sky compliant.  
 \_\_\_\_\_

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?  Yes  No  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

o. Does the proposed action have the potential to produce odors for more than one hour per day?  Yes  No  
 If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage?  Yes  No  
 If Yes:  
 i. Product(s) to be stored \_\_\_\_\_  
 ii. Volume(s) \_\_\_\_\_ per unit time \_\_\_\_\_ (e.g., month, year)  
 iii. Generally, describe the proposed storage facilities: \_\_\_\_\_  
 \_\_\_\_\_

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?  Yes  No  
 If Yes:  
 i. Describe proposed treatment(s):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ii. Will the proposed action use Integrated Pest Management Practices?  Yes  No

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?  Yes  No  
 If Yes:  
 i. Describe any solid waste(s) to be generated during construction or operation of the facility:  
 • Construction: \_\_\_\_\_ tons per \_\_\_\_\_ (unit of time)  
 • Operation : \_\_\_\_\_ 1.0 tons per \_\_\_\_\_ week (unit of time)  
 ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:  
 • Construction: \_\_\_\_\_  
 \_\_\_\_\_  
 • Operation: Recycling dumpsters will be available for use  
 \_\_\_\_\_  
 \_\_\_\_\_

iii. Proposed disposal methods/facilities for solid waste generated on-site:  
 • Construction: \_\_\_\_\_  
 \_\_\_\_\_  
 • Operation: Weekly Garbage Truck pickups.  
 \_\_\_\_\_  
 \_\_\_\_\_

s. Does the proposed action include construction or modification of a solid waste management facility?  Yes  No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): \_\_\_\_\_

ii. Anticipated rate of disposal/processing:

- \_\_\_\_\_ Tons/month, if transfer or other non-combustion/thermal treatment, or
- \_\_\_\_\_ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: \_\_\_\_\_ years

---

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste?  Yes  No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: \_\_\_\_\_

ii. Generally describe processes or activities involving hazardous wastes or constituents: \_\_\_\_\_

iii. Specify amount to be handled or generated \_\_\_\_\_ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: \_\_\_\_\_

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility?  Yes  No

If Yes: provide name and location of facility: \_\_\_\_\_

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: \_\_\_\_\_

**E. Site and Setting of Proposed Action**

**E.1. Land uses on and surrounding the project site**

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

Urban  Industrial  Commercial  Residential (suburban)  Rural (non-farm)

Forest  Agriculture  Aquatic  Other (specify): \_\_\_\_\_

ii. If mix of uses, generally describe: \_\_\_\_\_

---

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	6.18	4.894	-1.516
• Forested	n/a		
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	n/a		
• Agricultural (includes active orchards, field, greenhouse etc.)	n/a		
• Surface water features (lakes, ponds, streams, rivers, etc.)	n/a		
• Wetlands (freshwater or tidal)	n/a		
• Non-vegetated (bare rock, earth or fill)	n/a		
• Other Describe: <u>Lawn and Plant Beds</u>	0	1.516	+1.516

c. Is the project site presently used by members of the community for public recreation?  Yes  No  
i. If Yes: explain: \_\_\_\_\_

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  Yes  No  
If Yes,  
i. Identify Facilities: \_\_\_\_\_

e. Does the project site contain an existing dam?  Yes  No  
If Yes:  
i. Dimensions of the dam and impoundment:  
• Dam height: \_\_\_\_\_ feet  
• Dam length: \_\_\_\_\_ feet  
• Surface area: \_\_\_\_\_ acres  
• Volume impounded: \_\_\_\_\_ gallons OR acre-feet  
ii. Dam's existing hazard classification: \_\_\_\_\_  
iii. Provide date and summarize results of last inspection: \_\_\_\_\_

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility?  Yes  No  
If Yes:  
i. Has the facility been formally closed?  Yes  No  
• If yes, cite sources/documentation: \_\_\_\_\_  
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: \_\_\_\_\_  
iii. Describe any development constraints due to the prior solid waste activities: \_\_\_\_\_

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste?  Yes  No  
If Yes:  
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:  
Inner Harbor Industrial Zone in late 1800 to early 1900s.

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site?  Yes  No  
If Yes:  
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:  Yes  No  
 Yes – Spills Incidents database Provide DEC ID number(s): 9205672, 9713088  
 Yes – Environmental Site Remediation database Provide DEC ID number(s): \_\_\_\_\_  
 Neither database  
ii. If site has been subject of RCRA corrective activities, describe control measures: \_\_\_\_\_  
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?  Yes  No  
If yes, provide DEC ID number(s): V00588, C734089, C734088A, 734020, C734136, C73...  
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):  
Reported spills have been cleaned up. Spills on adjacent properties are in varying stages of clean up.

v. Is the project site subject to an institutional control limiting property uses?  Yes  No

- If yes, DEC site ID number: \_\_\_\_\_
- Describe the type of institutional control (e.g., deed restriction or easement): \_\_\_\_\_
- Describe any use limitations: \_\_\_\_\_
- Describe any engineering controls: \_\_\_\_\_
- Will the project affect the institutional or engineering controls in place?  Yes  No
- Explain: \_\_\_\_\_

---

**E.2. Natural Resources On or Near Project Site**

a. What is the average depth to bedrock on the project site? \_\_\_\_\_ >6 ft. feet

b. Are there bedrock outcroppings on the project site?  Yes  No  
 If Yes, what proportion of the site is comprised of bedrock outcroppings? \_\_\_\_\_ %

c. Predominant soil type(s) present on project site: Urban Land \_\_\_\_\_ 100 %  
 \_\_\_\_\_ %  
 \_\_\_\_\_ %

d. What is the average depth to the water table on the project site? Average: \_\_\_\_\_ >6 ft. feet

e. Drainage status of project site soils:  Well Drained: \_\_\_\_\_ % of site  
 Moderately Well Drained: \_\_\_\_\_ % of site  
 Poorly Drained \_\_\_\_\_ % of site

f. Approximate proportion of proposed action site with slopes:  0-10%: \_\_\_\_\_ 100 % of site  
 10-15%: \_\_\_\_\_ % of site  
 15% or greater: \_\_\_\_\_ % of site

g. Are there any unique geologic features on the project site?  Yes  No  
 If Yes, describe: \_\_\_\_\_

---

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?  Yes  No

ii. Do any wetlands or other waterbodies adjoin the project site?  Yes  No  
 If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?  Yes  No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name \_\_\_\_\_ Classification \_\_\_\_\_
- Lakes or Ponds: Name Onondaga Lake Classification \_\_\_\_\_
- Wetlands: Name \_\_\_\_\_ Approximate Size \_\_\_\_\_
- Wetland No. (if regulated by DEC) \_\_\_\_\_

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?  Yes  No  
 If yes, name of impaired water body/bodies and basis for listing as impaired: \_\_\_\_\_

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i. Is the project site in a designated Floodway?  Yes  No

j. Is the project site in the 100-year Floodplain?  Yes  No

k. Is the project site in the 500-year Floodplain?  Yes  No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?  Yes  No  
 If Yes:  
 i. Name of aquifer: \_\_\_\_\_

<p>m. Identify the predominant wildlife species that occupy or use the project site: _____          Urban wildlife _____          _____</p>	
<p>n. Does the project site contain a designated significant natural community? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes:          i. Describe the habitat/community (composition, function, and basis for designation): _____          _____          ii. Source(s) of description or evaluation: _____          iii. Extent of community/habitat:              • Currently: _____ acres              • Following completion of project as proposed: _____ acres              • Gain or loss (indicate + or -): _____ acres</p>	
<p>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes:          i. Species and listing (endangered or threatened): _____          _____          _____</p>	
<p>p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes:          i. Species and listing: _____          _____</p>	
<p>q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span>          If yes, give a brief description of how the proposed action may affect that use: _____          Fishing _____</p>	
<b>E.3. Designated Public Resources On or Near Project Site</b>	
<p>a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes, provide county plus district name/number: _____</p>	
<p>b. Are agricultural lands consisting of highly productive soils present? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          i. If Yes: acreage(s) on project site? _____          ii. Source(s) of soil rating(s): _____</p>	
<p>c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes:          i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature          ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____          _____          _____</p>	
<p>d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>          If Yes:          i. CEA name: _____          ii. Basis for designation: _____          iii. Designating agency and date: _____</p>	

e. 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?  Yes  No

If Yes:

i. Nature of historic/archaeological resource:  Archaeological Site  Historic Building or District

ii. Name: Enlarged Erie Barge Canal Nominated by NPS (2014)

iii. Brief description of attributes on which listing is based:  
Transportation Network of 1800s

---

f. 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?  Yes  No

g. Have additional archaeological or historic site(s) or resources been identified on the project site?  Yes  No

If Yes:

i. Describe possible resource(s): \_\_\_\_\_

ii. Basis for identification: \_\_\_\_\_

---

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource?  Yes  No

If Yes:

i. Identify resource: Onondaga Lake

ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): Empire State Canal System

iii. Distance between project and resource: \_\_\_\_\_ >1 miles.

---

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666?  Yes  No

If Yes:

i. Identify the name of the river and its designation: \_\_\_\_\_

ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?  Yes  No

**F. Additional Information**

Attach any additional information which may be needed to clarify your project.

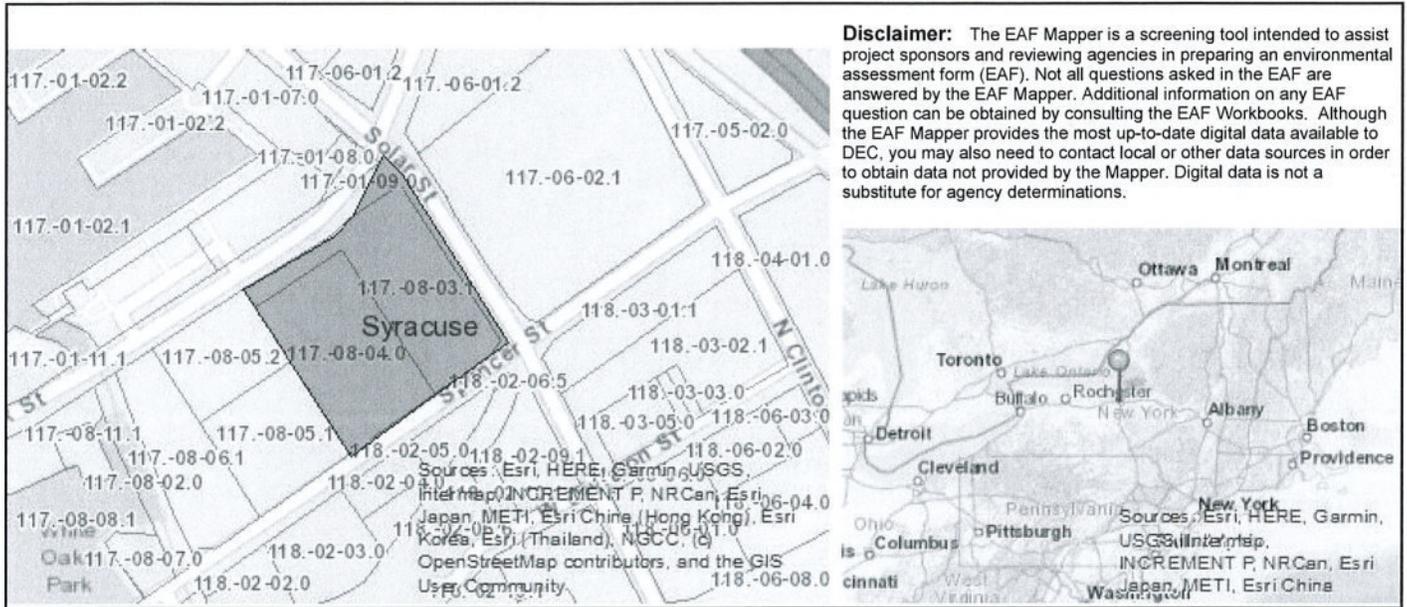
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

**G. Verification**

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Scott Freeman Date 10/08/2019

Signature Scott L. Freeman Title Landscape Architect



B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	Yes
E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID]	V00588, C734089, C734088A, 734020, C734136, C734137, C734143
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	No
E.2.h.ii [Surface Water Features]	Yes
E.2.h.iii [Surface Water Features]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.l. [Aquifers]	No
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	No

E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook.
E.3.e.ii [National or State Register of Historic Places or State Eligible Sites - Name]	Enlarged Erie Barge Canal Nominated by NPS (2014)
E.3.f. [Archeological Sites]	Yes
E.3.i. [Designated River Corridor]	No

# RZ Engineering, PLLC

STORMWATER

SANITARY

WATER

ENVIRONMENTAL

TRANSPORTATION

October 11, 2019

City of Syracuse Engineer  
Mirza Malkoc, PE  
233 East Washington St.  
Syracuse, NY 13202

Re: BHG Office Building  
Sanitary Flows / Offset

Dear Mirza,

This letter is documentation concerning the sanitary offset required for the Office Building project, located on Solar St. within the City of Syracuse.

As you are aware, the existing property has two buildings with a total area of 31,139 sq. ft which will be demolished.

Offset flow (31,139 sq.ft x 0.1 gpd/sq.ft)	3,114 gpd
Estimated flow for the proposed office building (500 employees x 15 gpd/employee)	7,500 gpd
Net Change	+4,386 gpd

Please feel free to contact me with any questions or comments.

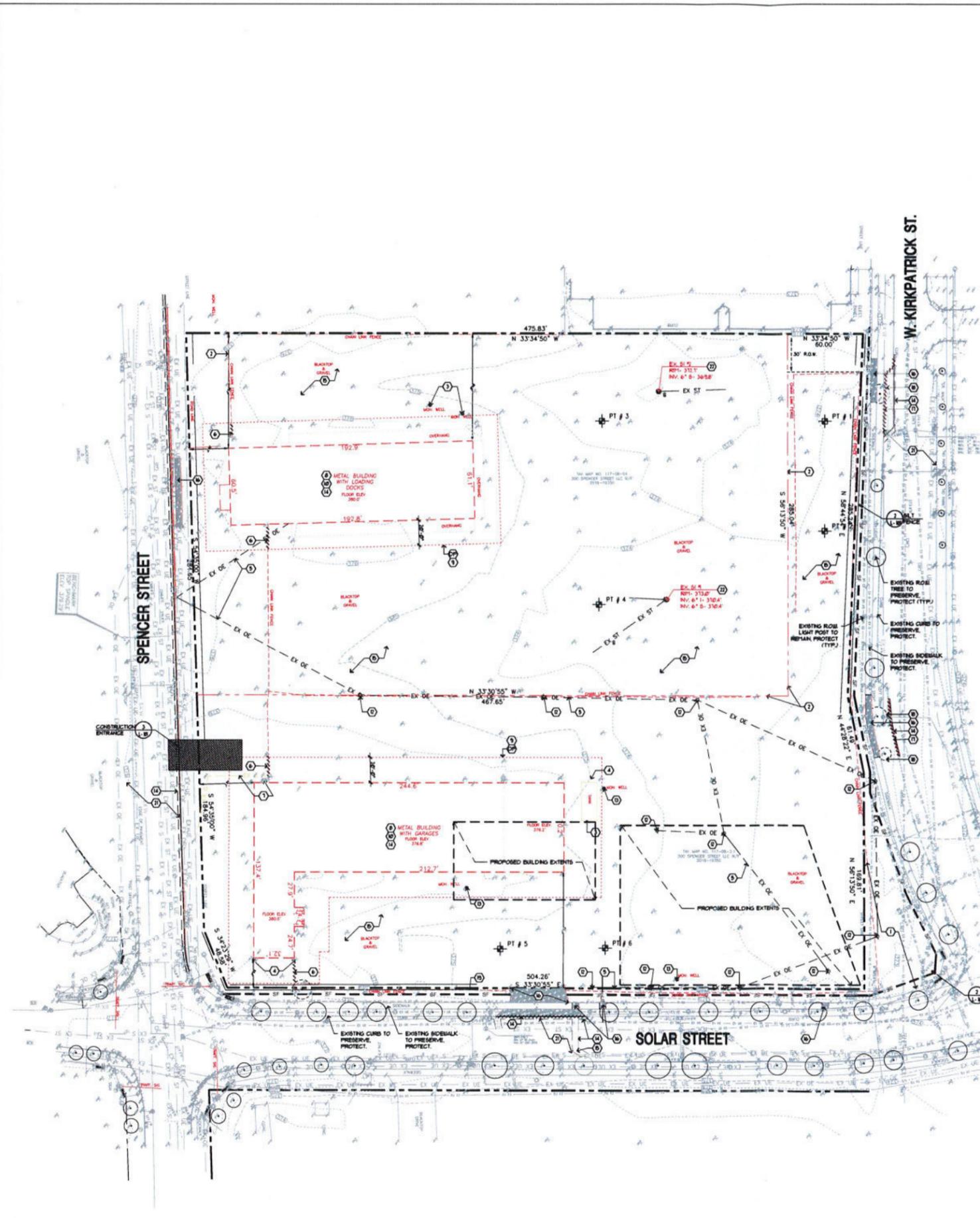
Very Truly Yours,



Rudy L. Zona, P.E.







- EXISTING CONDITIONS & SITE DEMOLITION NOTES**
- 1. OBTAIN DEMOLITION PERMIT PRIOR TO PERFORMING SITE PREPARATION. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
  - 2. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
  - 3. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
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  - 20. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
  - 21. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
  - 22. DEMOLITION PERMIT EXTENTS TO BE SHOWN ON THIS PLAN.
- BUILDING & SITE DEMOLITION SEQUENCE**
1. REFER TO ARCHITECTURAL STAGING DRAWINGS FOR SEQUENCE OF BUILDING AND SITE DEMOLITION.

**LEGEND**

EXISTING	PROPOSED	DESCRIPTION
---	---	CONTOUR
+	+	SPOT ELEVATION
---	---	CRIB ELEVATION
---	---	CRIB TAPERED
---	---	TORIC
---	---	TOP OF CURB
---	---	NEW / LOW FLOOR
---	---	EXISTING GRADE
---	---	TOP OF WALL
---	---	UPPER LOWER FINISH GRADE
---	---	TOP OF CURB
---	---	TOP OF FINISH
---	---	BORING (SEE SPECIFICATIONS FOR BORING INFO)
---	---	GROUNDWATER
---	---	PIPE
---	---	UTILITY POLE
---	---	WATER LINE
---	---	PIPE HYDRANT
---	---	SEWER PIPE
---	---	SEWER MANHOLE
---	---	OVERHEAD ELECTRIC
---	---	UNDERGROUND ELECTRIC
---	---	TELEPHONE
---	---	SCORE STRUCTURE
---	---	ALERT
---	---	CATCH BASIN/STURMULL
---	---	CLEAN CUT
---	---	SAFETY FENCE
---	---	ASPHALT PAINT/STAMP
---	---	ASPHALT PAVING PAINT
---	---	ASPHALT ROAD PAVEMENT
---	---	CONCRETE PAVEMENT
---	---	OUTLET PROTECTION FOR 4" PIPE OR LESS
---	---	TRAFFIC SIGN - SET IN BOLLARD
---	---	TRAFFIC SIGN - MOVABLE
---	---	LOW VOLTAGE ELECTRICAL PLANS FOR BIDDING
---	---	CRIB
---	---	CRIB FLOOR (IF APPLICABLE OTHERWISE NOTED)
---	---	BLT PRICE
---	---	WELL
---	---	SHED
---	---	PLANT KEY
---	---	VEGETATION

- GENERAL NOTES**
1. TOPOGRAPHIC AND BOUNDARY SURVEY PREPARED BY SEQUIN LAND SURVEYING, P.L.L.C. CHATTENANGO, NY, DATED AUGUST 08, 2015.
  2. OWNER AND ARCHITECT DO NOT CONFIRM THE COMPLETENESS OR ACCURACY OF SUCH INFORMATION. CONTRACTOR IS RESPONSIBLE FOR THOROUGH EXAMINATION AND VERIFICATION OF ALL EXISTING SURFACE AND SUBSURFACE CONDITIONS AFFECTING THE NATURE, SCOPE, COMPLEXITY AND COST OF THE CONTRACT WORK. ADDITIONAL INFORMATION ON EXISTING CONDITIONS HAS BEEN ADDED TO THIS DRAWING BASED ON THE LANDSCAPE ARCHITECT'S OBSERVATIONS BUT IS NOT INTENDED TO AND DOES NOT ALTER THE SURVEY INFORMATION. REFER TO SURVEY NOTES FOR ADDITIONAL INFORMATION.
  3. SEE CUT FOR PAVING REMOVALS. EXISTING REMOVAL LINES TO INCLUDE ANY ADJOINING DRIVEWAYS OR DRIVEWAYS. CAREFULLY REMOVE STOCKPILES AND PROTECT ANY ITEMS NOTED FOR SALVAGE. ALL DEMOLITION RESIDUE (DEBRIS AND EXISTING) SHALL BE PROPERLY REMOVED FROM SITE. STRIP AND STOCKPILE SURFICENT EXISTING ORGANIC TOPSOILS FOR REUSE/REPLACEMENT AS REQUIRED ON DISTURBED AND REGRADED AREAS TO BE ESTABLISHED AS LAWN AND FOR REPAIR OF DISTURBED EXISTING LAWNS TO REMAIN. STOCKPILE ALL MATERIALS IN APPROVED LOCATIONS WITHOUT INTERFERING WITH OTHER CONTRACTOR WORK, SCHOOL, TRAFFIC OR DRAINAGE.
  4. ALL FILLBACKFILL OF EXCAVATIONS AND Voids RESULTING FROM REMOVALS AND RELATED WORK UNDER PROPOSED OR REPAIR ACCEPTED PAVING AREAS SHALL ONLY BE COARSE AGGREGATE FILL OR SUBBASE COURSE MATERIAL THOROUGHLY COMPACTED.
  5. PROTECT ALL FACILITIES AND IMPROVEMENTS ON AND ADJOINING THE PROPERTY (SUCH AS NOT SPECIFICALLY IDENTIFIED FOR REMOVAL, VERIFY LOCATIONS AND DEPTHS OF ALL SUBSURFACE UTILITIES TO REMAIN PRIOR TO ANY ADJACENT REMOVAL AND EXCAVATION WORK).
  6. ALL EXISTING FEATURES SHALL REMAIN UNLESS OTHERWISE NOTED. IF THE CONTRACTOR DAMAGES ANY OF THE EXISTING ON-SITE FACILITIES TO REMAIN (TREES, PAVEMENTS, UNDERGROUND UTILITIES, STRUCTURES, ETC.) WHETHER SHOWN ON THE PLANS OR NOT, THE CONTRACTOR SHALL REPAIR AND/OR REPLACE SUCH ITEMS AT HIS OWN EXPENSE AND ASSUME ALL RESPONSIBILITY FOR SUCH DAMAGE WITHOUT ANY ADDITIONAL COST TO THE OWNER. REPLACEMENT MATERIAL SHALL BE SAME QUALITY AND QUANTITY AS ORIGINAL.
  7. THE CONTRACTOR SHALL CONFIRM EXISTING GRADES AND LOCATIONS OF ALL EXISTING FEATURES WITHIN THE CONTRACT LIMIT LINE. THE CONTRACTOR SHALL CONTACT THE LANDSCAPE ARCHITECT IMMEDIATELY SHOULD ANY DISCREPANCIES BE FOUND AT (315) 443-1166.
  8. ADJUST RIPS OF UTILITY STRUCTURES TO REMAIN WITHIN AREAS OF GRADE CHANGES TO MEET PROPOSED LINES AND GRADES.
  9. ALL NON-PAVED AREAS ARE TO BE LAWN UNLESS OTHERWISE NOTED.
  10. CONTRACTOR SHALL BLEND NEW WORK SMOOTHLY AND EVENLY WITH EXISTING LINES AND GRADES.
  11. CONTRACTOR SHALL BE RESPONSIBLE FOR LAWN MAINTENANCE WITHIN THE CONTRACT LIMIT LINE. EXISTING LAWNS SHALL BE MOVED AS FEASIBLE AS PRACTICAL TO KEEP AREA PROTECTING UNUSUALLY. ALL TRASH AND DEBRIS SHALL BE PICKED UP AND DISPOSED OF PROPERLY.

**PERCOLATION TEST RESULTS**

LOCATION NUMBER	SOIL DEPTH	SOIL TYPES	RATE OF INFILTRATION
PT-1	N/A	N/A	4" PER HR.
PT-2	N/A	N/A	3" PER HR.
PT-3	N/A	N/A	7" IN FIRST HR. 7" IN 1-3 HRS. 0" IN 4 HRS.
PT-4	N/A	N/A	7" IN FIRST 3 HRS. 0" IN 4 HRS.
PT-5	N/A	N/A	5" PER HR.
PT-6	N/A	N/A	6" PER HR.



Banker's Healthcare Group  
New Office Construction

300 SPENCER ST. & SOLAR ST.  
SYRACUSE, NY 13204

REVISIONS

NO.	DATE	DESCRIPTION

MARK DATE DESCRIPTION

NOT FOR CONSTRUCTION

DRAWING DATE: 11/01/2018

DRAWN BY: VHS REVIEWED BY: SF

SCALE: AS NOTED

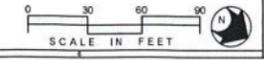
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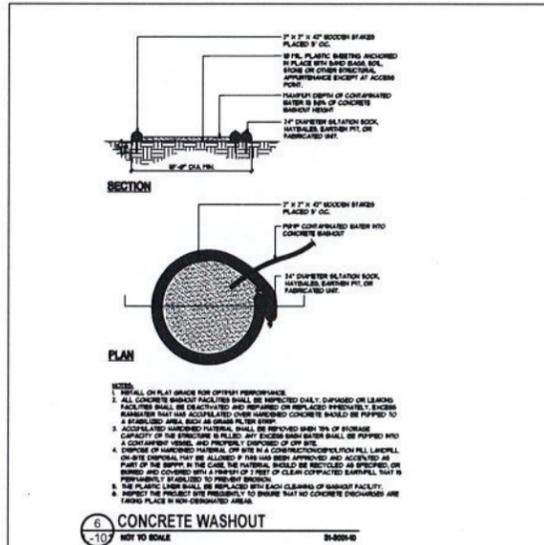
**SITE PREPARATION PLAN**

**L-100**

ISSUE FOR PRICING 11/01/2018

1 SITE PREPARATION AND DEMOLITION PLAN





6 CONCRETE WASHOUT  
NOT TO SCALE

### SOIL RESTORATION NOTES

1. ACCORDING TO SECTION 9 OF THE SPECIFICATIONS GENERAL, SOIL RESTORATION PRACTICES MUST BE APPLIED TO THE SITE IN AREAS OF SOIL DISTURBANCE.

**1. SOIL RESTORATION REQUIREMENTS**

**TYPE OF SOIL DISTURBANCE:**  
NO SOIL DISTURBANCE  
MINOR SOIL DISTURBANCE  
AREAS WHERE TOPSOIL IS STRIPPED ONLY - NO CHANGE IN GRADE  
AREAS OF CUT OR FILL  
HEAVY TRAFFIC AREAS ON SITE (ESPECIALLY IN AREAS TO BE REPAVED OR REGRADED) - TOPSOIL SHALL BE STRIPPED AND STORED IN A PROTECTIVE BARREL

**SOIL RESTORATION PRACTICES TO BE APPLIED:**  
REPLACEMENT OF TOPSOIL  
REPLACEMENT OF SUBSOIL  
REPLACEMENT OF FERTILIZER  
REPLACEMENT OF SEED  
REPLACEMENT OF MULCH  
REPLACEMENT OF EROSION CONTROL MATS  
REPLACEMENT OF EROSION CONTROL NETS  
REPLACEMENT OF EROSION CONTROL BARRIERS  
REPLACEMENT OF EROSION CONTROL STRUCTURES

**2. SOIL RESTORATION PRACTICES TO BE APPLIED:**  
SOIL RESTORATION IS REQUIRED ON REDEVELOPMENT PROJECTS IN AREAS WHERE EXISTING FERTILIZER AND SEED ARE APPLIED TO THE SOIL. A FERTILIZER AND SEED ANALYSIS SHALL BE CONDUCTED TO DETERMINE THE NEEDED AMOUNTS OF FERTILIZER AND SEED TO BE APPLIED TO THE SOIL. A FERTILIZER AND SEED ANALYSIS SHALL BE CONDUCTED TO DETERMINE THE NEEDED AMOUNTS OF FERTILIZER AND SEED TO BE APPLIED TO THE SOIL. A FERTILIZER AND SEED ANALYSIS SHALL BE CONDUCTED TO DETERMINE THE NEEDED AMOUNTS OF FERTILIZER AND SEED TO BE APPLIED TO THE SOIL.



### EROSION CONTROL NOTES and EROSION CONTROL SEQUENCING

1. PRIOR TO THE START OF CONSTRUCTION AND UNTIL ALL DISTURBED AREAS ARE STABILIZED, ALL EROSION AND SEDIMENT CONTROL MEASURES AS SHOWN ON THE SITE PLAN AND AS OTHERWISE SPECIFIED SHALL BE INSTALLED AND MAINTAINED BY THE CONTRACTOR AND SHALL BE IN PLACE UNTIL THE LATEST EDITION OF THE SPECIFICATIONS FOR EROSION CONTROL MEASURES IS APPLICABLE.

2. EROSION CONTROL MEASURES SHALL BE INSTALLED AND MAINTAINED BY THE CONTRACTOR AND SHALL BE IN PLACE UNTIL THE LATEST EDITION OF THE SPECIFICATIONS FOR EROSION CONTROL MEASURES IS APPLICABLE.

3. EROSION CONTROL MEASURES SHALL BE INSTALLED AND MAINTAINED BY THE CONTRACTOR AND SHALL BE IN PLACE UNTIL THE LATEST EDITION OF THE SPECIFICATIONS FOR EROSION CONTROL MEASURES IS APPLICABLE.

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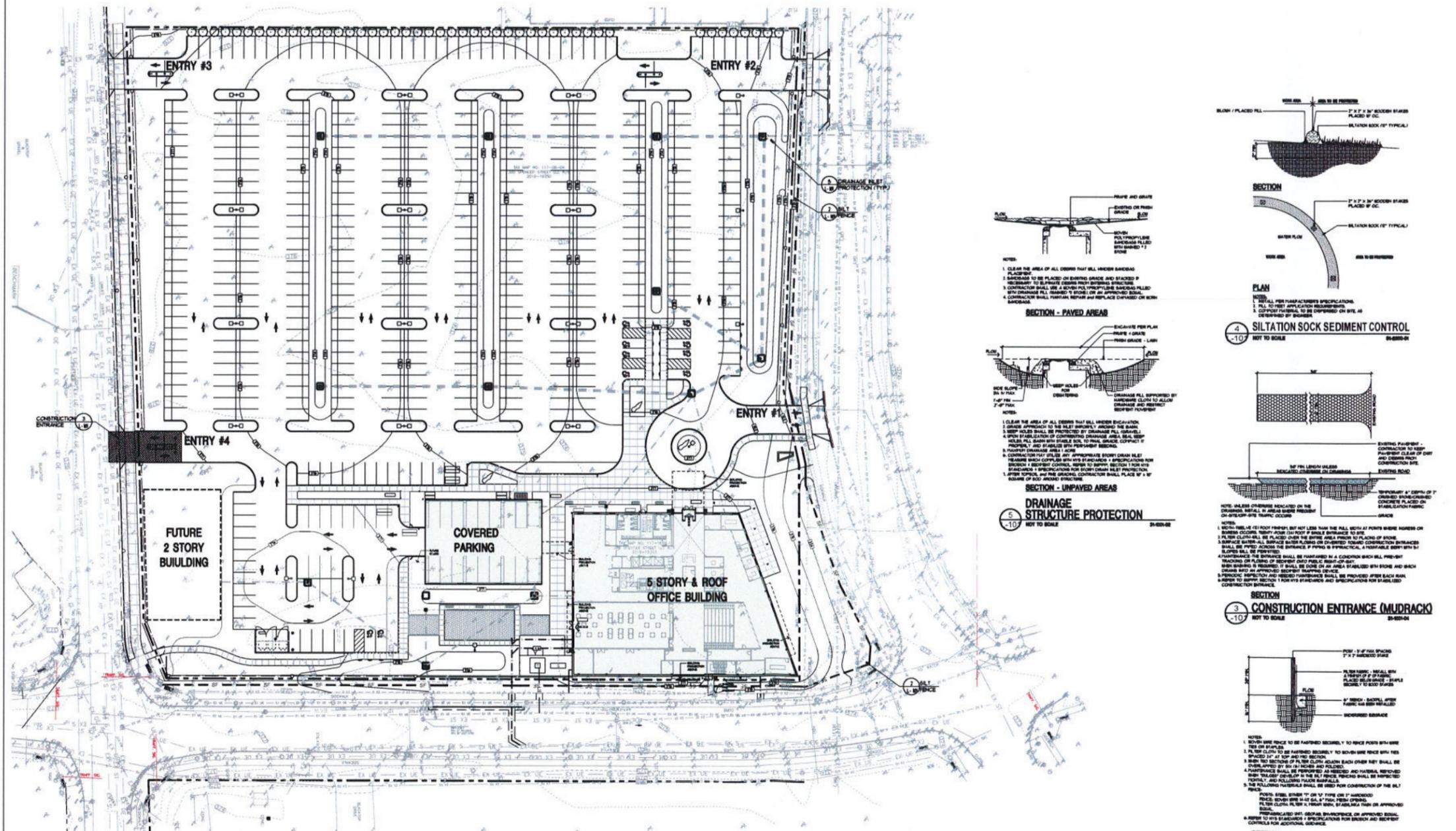
6. EROSION CONTROL MEASURES SHALL BE INSTALLED AND MAINTAINED BY THE CONTRACTOR AND SHALL BE IN PLACE UNTIL THE LATEST EDITION OF THE SPECIFICATIONS FOR EROSION CONTROL MEASURES IS APPLICABLE.

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9. EROSION CONTROL MEASURES SHALL BE INSTALLED AND MAINTAINED BY THE CONTRACTOR AND SHALL BE IN PLACE UNTIL THE LATEST EDITION OF THE SPECIFICATIONS FOR EROSION CONTROL MEASURES IS APPLICABLE.

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1 STORMWATER POLLUTION PREVENTION PLAN  
NOT TO SCALE

5 DRAINAGE STRUCTURE PROTECTION  
NOT TO SCALE

2 SILTATION SOCK SEDIMENT CONTROL  
NOT TO SCALE

3 CONSTRUCTION ENTRANCE (MUDRACK)  
NOT TO SCALE

4 SILT FENCE (SF)  
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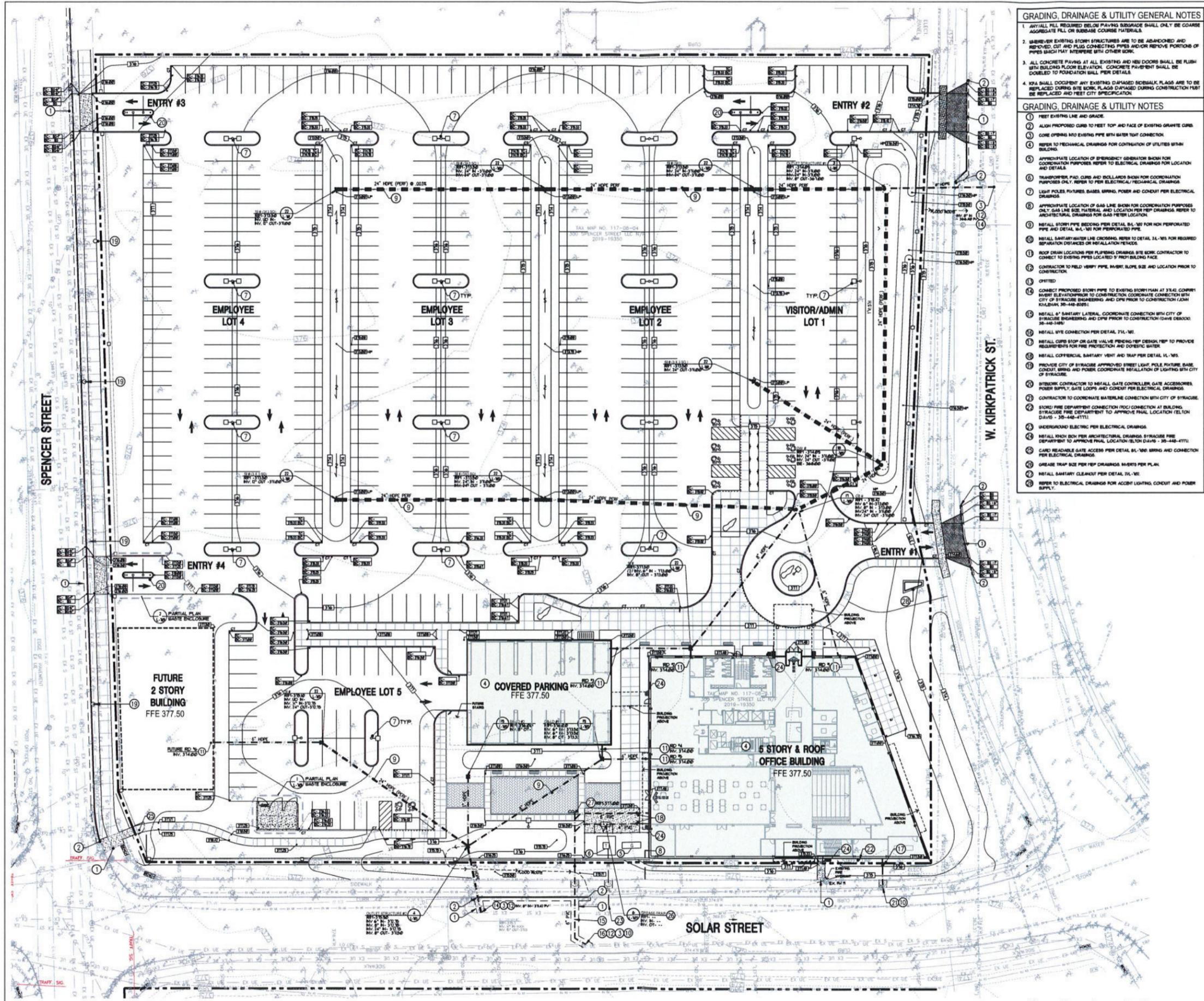
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STORMWATER PREVENTION POLLUTION PLAN

L-101

ISSUE FOR PRICING 11/01/2019



**GRADING, DRAINAGE & UTILITY GENERAL NOTES**

1. ANY FILL REQUIRED BELOW FINISH GRADE SHALL ONLY BE COARSE AGGREGATE FILL OR SUBBASE COURSE MATERIALS.
2. WHEREVER EXISTING STRUCTURES ARE TO BE ABANDONED AND REMOVED, CUT AND PILING CONNECTIONS AND/OR REMOVE PORTIONS OF PIPES WHICH MAY INTERFERE WITH OTHER WORK.
3. ALL CONCRETE PAVING AT ALL EXISTING AND NEW DOORS SHALL BE FLUSH WITH BUILDING FLOOR ELEVATION. CONCRETE PAVEMENT SHALL BE DOUBLED TO PENETRATION BALL PER DETAIL.
4. KSA SHALL DOCUMENT ANY EXISTING DAMAGED SIGNALS ARE TO BE REPLACED DURING SITE WORK. FLAGS DAMAGED DURING CONSTRUCTION MUST BE REPLACED AND MEET CITY SPECIFICATION.

**GRADING, DRAINAGE & UTILITY NOTES**

1. MEET EXISTING LINE AND GRADE.
2. ALLOW PROPOSED CURBS TO FEET TOP AND FACE OF EXISTING GRANITE CURB.
3. CORE OPENING AND EXISTING PIPE WITH WATER TIGHT CONNECTION.
4. REFER TO MECHANICAL DRAWINGS FOR CONTRIBUTION OF UTILITIES WITHIN BUILDING.
5. APPROPRIATE LOCATION OF EMERGENCY GENERATOR BASH FOR COORDINATION PURPOSES REFER TO ELECTRICAL DRAWINGS FOR LOCATION AND DETAILS.
6. TRANSFORMER PAD CURB AND BOLLARDS BASH FOR COORDINATION PURPOSES ONLY. REFER TO PER ELECTRICAL/MECHANICAL DRAWINGS.
7. LIGHT POLES, FIXTURES, BASES, BRIMS, POWER AND CONDUIT PER ELECTRICAL DRAWINGS.
8. APPROPRIATE LOCATION OF GAS LINE BASH FOR COORDINATION PURPOSES ONLY. GAS LINE SIZE, MATERIAL AND LOCATION PER MECHANICAL DRAWINGS FOR GAS PIPER LOCATION.
9. INSTALL STORM PIPE REDDING PER DETAIL 84-107 FOR NON PERFORATED PIPE AND DETAIL 84-105 FOR PERFORATED PIPE.
10. INSTALL SANITARY WATER LINE CROSSING REFER TO DETAIL 24-105 FOR REQUIRED SEPARATION DISTANCES OR INSTALLATION DETAILS.
11. ROOF DRAIN LOCATIONS PER PLUMBING DRAWING SITE WORK. CONTRACTOR TO CONNECT TO EXISTING PIPES LOCATED 5' FROM BUILDING FACE.
12. CONTRACTOR TO FIELD VERIFY PIPE INVERT, SIZE AND LOCATION PRIOR TO CONSTRUCTION.
13. OFFSET.
14. CONNECT PROPOSED STORM PIPE TO EXISTING STORM MAIN AT 3142. COPY INVERT ELEVATION PRIOR TO CONSTRUCTION. COORDINATE CONNECTION WITH CITY OF SYRACUSE ENGINEERING AND CIP PRIOR TO CONSTRUCTION (LOAN KULBIAK 30-448-8395).
15. INSTALL 8" SANITARY LATERAL. COORDINATE CONNECTION WITH CITY OF SYRACUSE ENGINEERING AND CIP PRIOR TO CONSTRUCTION (DAVE DEBICKI 30-448-3485).
16. INSTALL WYE CONNECTION PER DETAIL 24-105.
17. INSTALL CURB STOP OR GATE VALVE PER DETAIL 24-105 TO PROVIDE REQUIREMENTS FOR FIRE PROTECTION AND DOMESTIC WATER.
18. INSTALL COMMERCIAL SANITARY VENT AND TRAP PER DETAIL 24-105.
19. PROVIDE CITY OF SYRACUSE APPROVED STREET LIGHT POLE, FIXTURE, BASE, CONDUIT BRIM AND POWER. COORDINATE INSTALLATION OF LIGHTING WITH CITY OF SYRACUSE.
20. SITEWORK CONTRACTOR TO INSTALL GATE CONTROLLER, GATE ACCESSORIES, POWER SUPPLY, GATE LOOPS AND CONDUIT PER ELECTRICAL DRAWINGS.
21. CONTRACTOR TO COORDINATE WATERLINE CONNECTION WITH CITY OF SYRACUSE.
22. STORE FIRE DEPARTMENT CONNECTION (FDC) CONNECTION AT BUILDING. SYRACUSE FIRE DEPARTMENT TO APPROVE FINAL LOCATION (ELTON DAVIS - 30-448-4111).
23. UNDERGROUND ELECTRIC PER ELECTRICAL DRAWINGS.
24. INSTALL 120KV BOX PER ARCHITECTURAL DRAWINGS. SYRACUSE FIRE DEPARTMENT TO APPROVE FINAL LOCATION (ELTON DAVIS - 30-448-4111).
25. CARE READABLE GATE ACCESS PER DETAIL 24-105 BRIMS AND CONNECTION PER ELECTRICAL DRAWINGS.
26. GREASE TRAP SIZE PER MECHANICAL DRAWINGS. REFER TO MECHANICAL DRAWINGS.
27. INSTALL SANITARY CLEANOUT PER DETAIL 24-105.
28. REFER TO ELECTRICAL DRAWINGS FOR ACCENT LIGHTING, CONDUIT AND POWER SUPPLY.



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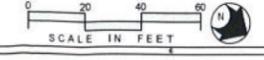
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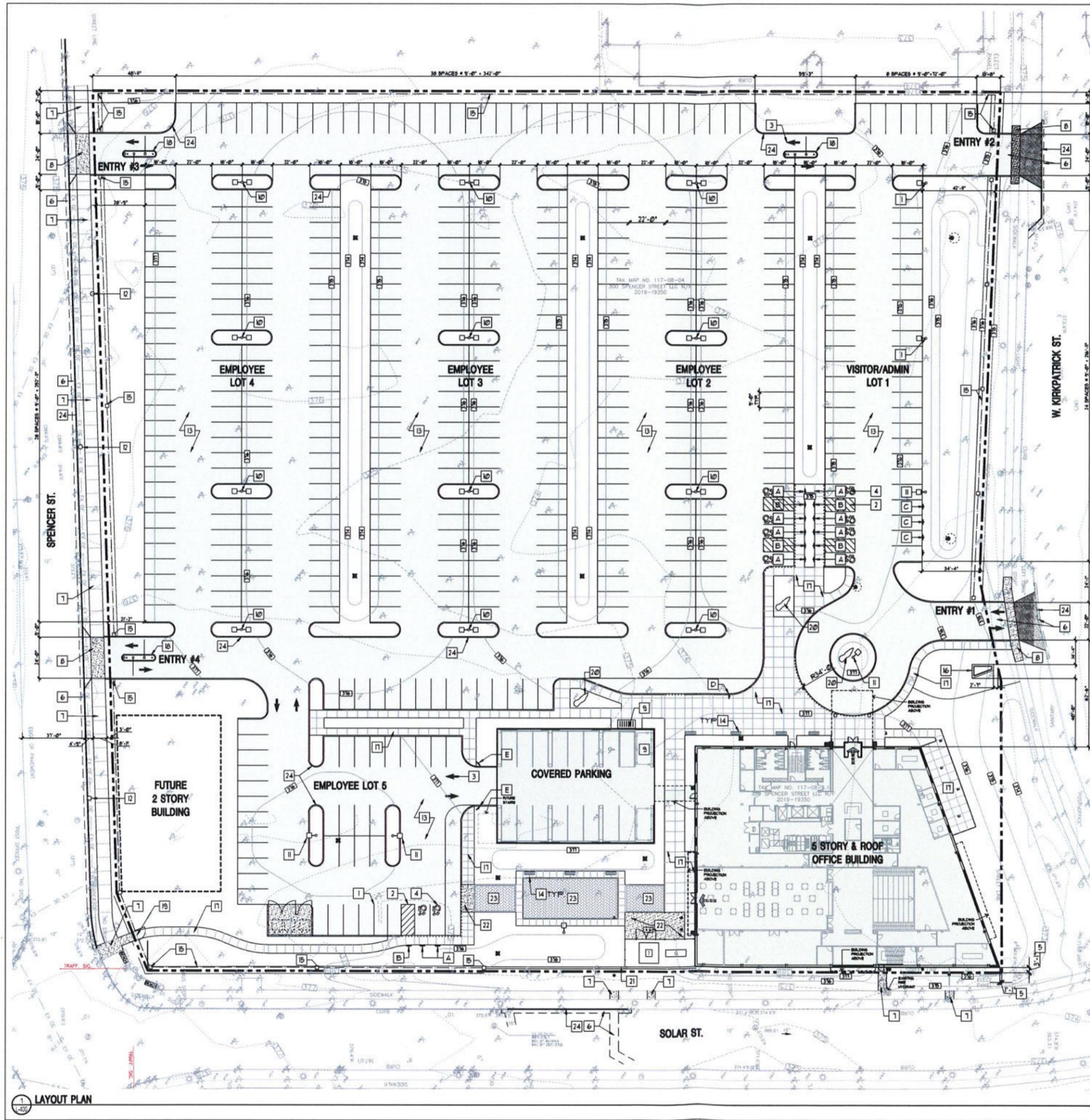
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L-200

ISSUE FOR PRICING 11/01/2019

1 GRADING, DRAINAGE AND UTILITY PLAN





- ### LAYOUT CONSTRUCTION NOTES
- 1 PAINT 4" WIDE YELLOW LINES (TYP)
  - 2 PAINT 4" WIDE YELLOW LINES 2'-0" O.C. @ 4'
  - 3 PAINT THRU ARROW AS PER DETAIL 54-101
  - 4 PAINT RESERVED PARKING STALLS PER DETAIL 54-101
  - 5 BUILDING LAYOUT SHALL BE PARALLEL AND PERPENDICULAR TO PROPERTY LINE
  - 6 INSTALL CITY OF SYRACUSE ASPHALT PAVEMENT REPLACEMENT DETAIL PER 34-102
  - 7 INSTALL CITY OF SYRACUSE CONCRETE PAVEMENT (PEDESTRIAN) PER DETAIL 54-102
  - 8 INSTALL CITY OF SYRACUSE CONCRETE PAVEMENT (VEHICULAR) PER DETAIL 54-102
  - 9 INSTALL BIKE RACKS PER DETAIL 44-101 FOR VISITOR USE. BIKE RACKS TO BE INSTALLED ON INSIDE OF COVERED PARKING FOR EMPLOYEE USE
  - 10 INSTALL LI-DUBLE-TYPE-4-DIC LUMENS PER ELECTRICAL SPECIFICATIONS. LIGHT POLES, FUTURES, BASES, CONDUITS AND POWER SUPPLY PER ELECTRICAL DRAWINGS
  - 11 INSTALL LI-SINGLE-TYPE-4-DIC LUMENS PER ELECTRICAL SPECIFICATIONS. LIGHT POLES, FUTURES, BASES, CONDUITS AND POWER SUPPLY PER ELECTRICAL DRAWINGS
  - 12 INSTALL L3-ACORN-LET-INSULATED PER SPECIFICATIONS. LIGHT POLES, FUTURES, BASES, CONDUITS AND POWER SUPPLY PER ELECTRICAL DRAWINGS
  - 13 INSTALL ASPHALT PAVEMENT (PARKING) PER DETAIL 24-102
  - 14 INSTALL BENCH PER DETAIL 14-101
  - 15 INSTALL ORNAMENTAL ALUMINUM FENCE AND PILLARS PER DETAILS ON 2-14 54-100 REFER TO PLAN FOR DETAIL LOCATION
  - 16 INSTALL DOUBLE SIDED CONCRETE MONUMENT SIGN PER DETAIL 34-101 (SITE PLAN APPLICATION - SIGN TABLE 1)
  - 17 INSTALL CONCRETE SIDEWALK PER DETAIL 44-102
  - 18 INSTALL SECURITY VEHICULAR GATES PER PARTIAL PLAN 24-101 AND SPECIFICATIONS
  - 19 INSTALL SECURITY PEDESTRIAN GATE PER DETAIL 54-100 AND SPECIFICATIONS
  - 20 STAVES - TO BE DESIGNED
  - 21 INSTALL 8'-0" HEIGHT SCREEN WALL PER ELEVATION 44-100
  - 22 INSTALL HEAVY DUTY CONCRETE PER DETAIL 54-102
  - 23 INSTALL PRECAST CONCRETE PAVING ON CONCRETE PER DETAIL 24-102
  - 24 INSTALL GRANITE CURB PER DETAIL 04-101

### SIGN SCHEDULE

KEY	SIGN PLATE	SIGN SIZE / MOUNTING HT	NYADOT PLATE NO. / COMMENTS
A	RESERVED PARKING BY ACCESSIBLE SYMBOL	8' x 8' / 7'-0" HT.	SIGN NO. PA-6 COLORS: WHITE BACKGROUND, BLUE (ON GREEN TEXT) BORDER COMMENTS:
B	NO PARKING SERVICE ONLY	8' x 8' / 7'-0" HT.	SIGN NO. - COLORS: WHITE BACKGROUND, RED TEXT AND BORDER
C	VISITOR PARKING	8' x 8' / 7'-0" HT.	SIGN NO. - COLORS: WHITE BACKGROUND, BLACK TEXT AND BORDER
D	NO PARKING ANY TIME	8' x 8' / 7'-0" HT.	SIGN NO. - COLORS: WHITE BACKGROUND, RED TEXT AND BORDER
E	RESERVED PARKING FOR EMPLOYEES	8' x 8' / 7'-0" HT.	SIGN NO. PA-6 COLORS: WHITE BACKGROUND, BLACK TEXT BORDER COMMENTS:

NOTES:  
1 REFER TO TRAFFIC CONTROL SIGN PER DETAIL 54-101 FOR INSTALLATION  
2 ALL REGULATORY SIGNS SHALL CONFORM TO THE MOST CURRENT NYADOT MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES

### CITY OF SYRACUSE: INNER HARBOR OVERLAY DISTRICT ZONING REGULATIONS

1. ZONING  
 • TAX MAP 117-08-04 & 117-08-04B IS CURRENTLY ZONED T-5 (URBAN CENTER)  
 • REFER TO SECTION-04 LAYOUT ZONING DISTRICTS OF THE CITY OF SYRACUSE ZONING ORDINANCE FOR A COMPLETE LIST REGULATIONS.

2. T-5 BULK REGULATIONS

REQUIREMENT	MIN.	MAX.
LOT BIRTH	8'	54'
FRONT YARD SETBACK	0'	0'
SIDE YARD SETBACK	0'	0'
REAR YARD SETBACK	0'	0'
BUILDING HEIGHT	2 STOREY	6 STOREY
PARKING LAYERS (2ND & 3RD LAYERS)	NO PARKING IN FRONT OF FACADE	

### PARKING REGULATIONS - T-5 DISTRICT

**PARKING SPOT DIMENSIONS:**  
 EXISTING PARKING SPACE SIZE: VARY  
 CODE REQUIRED: PARKING STALL SIZE: 9'-0" x 18'-0"  
 PROJECT PARKING STALL SIZE: 9'-0" x 18'-0"

**PARKING SPOT CONFIGURATION:**  
 EXISTING PARKING SPACE CONFIGURATION: VARY  
 CODE REQUIRED: HEAD-IN, DIAGONAL, PARALLEL  
 PROJECT PROPOSED: CODE COMPLIANT 90 DEGREE

**DRIVE AISLE:**  
 EXISTING DRIVE AISLE WIDTH: N/A  
 CODE REQUIRED: 8'-0" DRIVE LANES (7'-0" TYP. MAX)  
 PROJECT PROPOSED: 22'-0"

**PARKING COUNT:**  
 OFFICE: ONE ASSIGNED PARKING SPACE FOR EACH 500 NET SQUARE FEET.  
 PARKING SPACES: 32 SPACES (18-AND 8-SPACES)  
 200-AND 400-PARKING SPACES  
 484-PARKING SPACES

**PARKING LOT SCHEDULE:**  
 OFFICE: ONE ASSIGNED PARKING SPACE FOR EACH 500 NET SQUARE FEET.  
 BICYCLE PARKING: ONE SPACE FOR EACH 60 (6) VEHICLE SPACES

PARKING SPACES	COUNT	ACCESSIBLE	BICYCLE
1. VISITOR ADMIN LOT 1	10	4	
2. EMPLOYEE LOT 2	10		
3. EMPLOYEE LOT 3	104		
4. EMPLOYEE LOT 4	104		
5. EMPLOYEE LOT 5	31		
6. PLEX SPACE 1	18		
7. PLEX SPACE 2	18		
8. COVERED PARKING	10		20
<b>TOTAL</b>	<b>317</b>	<b>4</b>	<b>20</b>



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LAYOUT PLAN  
 L-400  
 ISSUE FOR PRICING 11/01/2019

KEY	COMMON NAME	BOTANICAL NAME	CALIPER	TRUNK HT.	BRANCH HT.	CONDITION
<b>TREES</b>						
AJ	AUTUMN BLAZE MAPLE	ACER FRIEDRICH 'EFFERSIED'	4" CAL.	15'-20'	6' - 8'	-
As	DOWNY SERVICEBERRY	AMELANCHIER ALBOEA	4" CAL.	15'-20'	6' - 10'	SINGLE STEM
Ap	APPLE SERVICEBERRY	AMELANCHIER X GRANDIFLORA	4" CAL.	15'-20'	6' - 8'	MUL-TI-STEMED
Fs	UPRIGHT EUROPEAN BEECH	FAGUS SYLVATICA 'FASTIGIATA'	4" CAL.	15'-20'	6' - 8'	-
Ob	ONCIDIUM PRINCEITON SENARY	ONCIDIUM BLOSSUM PRINCEITON SENARY	4" CAL.	15'-20'	6' - 8'	-
Od	SIREEKREEPER COLUMNAR HONEYLOCUST	GLIEDITSIA TRICANTHOS 'NORMA DRAYES'	4" CAL.	15'-20'	6' - 8'	-
Om	RED OAK	QUERCUS RUBRA	4" CAL.	15'-20'	6' - 8'	-
Os	LITTLE LEAF LINDEN	TILIA CORDATA	4" CAL.	15'-20'	6' - 10'	-
<b>EVERGREENS</b>						
Pf	VANDERKOPF'S PYRAMID PINE	PRUNUS FLEXILIS 'VANDERKOPF'S PYRAMID'	-	6'-8'	-	-
Ps	EMERALD GREY ARBORVITAE	BIUNIA OCCIDENTALIS 'EMERALD GREY'	-	4'-5'	-	-
<b>SHRUBS</b>						
Hs	LITTLE LIME HYDRANGEA	HYDRANGEA PANCULATA 'LITTLE LIME'	-	3 CAL.	-	-
Jv	GREY OAK JAMPER	JAMPERUS VIRGINIANA 'GREY OAK'	-	3 CAL.	-	-
Rg	LOW GRO SUMAC	RUSUS ARGENTEA 'GRO-LOW'	-	3 CAL.	-	-
<b>PERENNIALS and GRASSES</b>						
G-Ca	KARL FOCKSTER FEATHER REED GRASS	CALAMAGROSTIS ACUTIFLORA 'KARL FOCKSTER'	-	1 CAL.	-	-
G-O	NORTHERN SEA DATS	CHASMANTHAM LATIFOLIUM	-	1 CAL.	-	-
Ps	RUSSIAN SAGE	PEROVSKIA ATRIPLACOLIA	-	1 CAL.	-	-

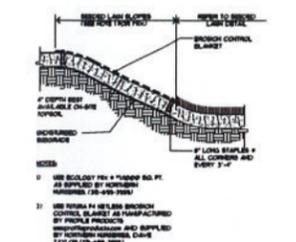
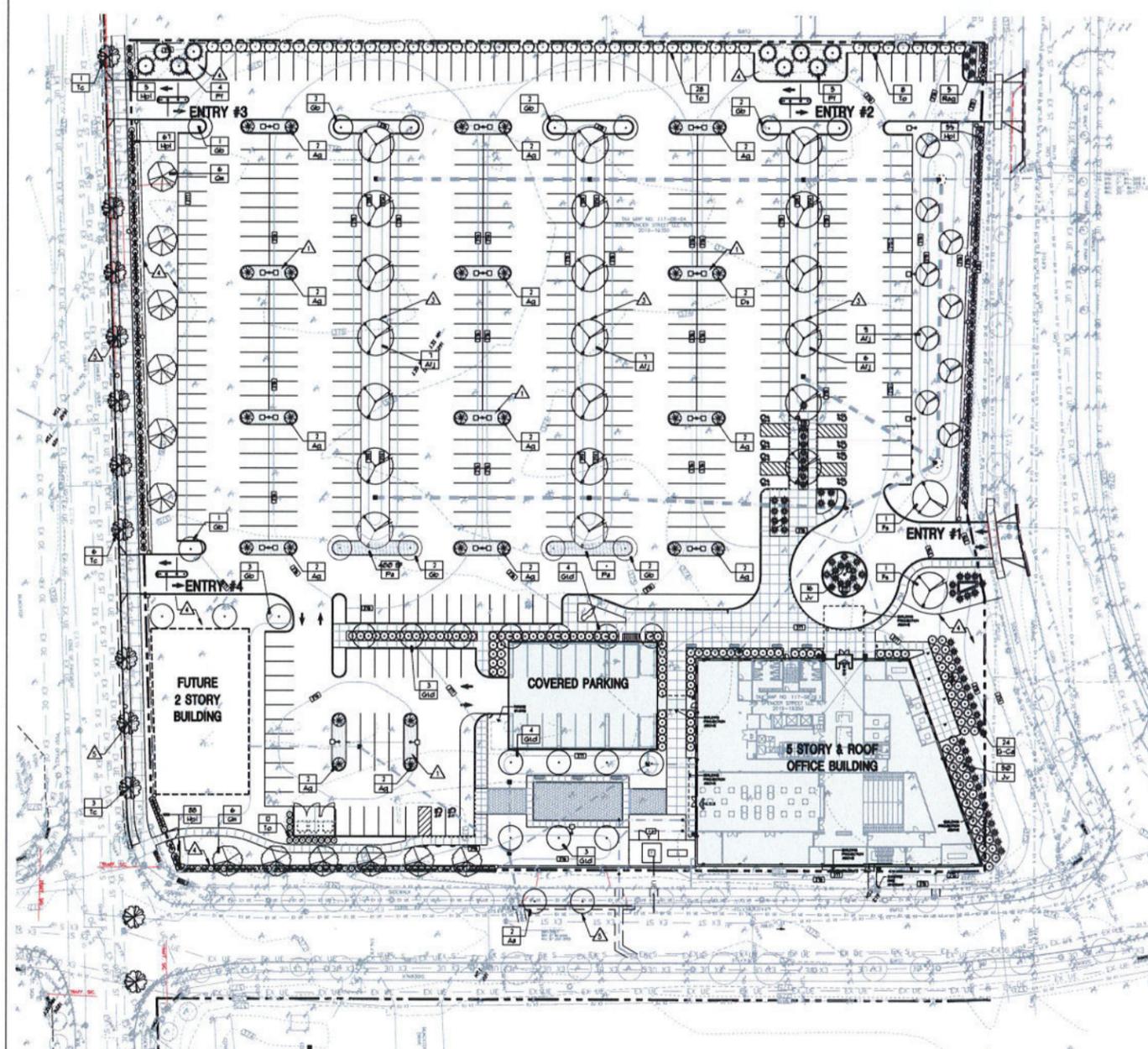
**PLANT NOTES**

▲ 3" DEPTH SHREDED BARK MULCH WITH 10" OF SCREENED TOPSOIL. ▲ INSTALL BUCKED LAMB PER DETAIL XXXX.

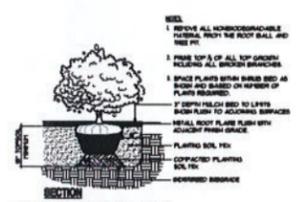
▲ INSTALL 3"-4" DEPTH SCREENED TOPSOIL. ▲ INSTALL TREE PIT PER DETAIL XXXX; CONTRACTOR TO COORDINATE TREE INSTALLATION WITH CITY AGENCIES.

▲ REFER TO RANGARDEN/ BOONALE DETAIL XXX FOR PLANTING DETAILS. ▲ STEVE HARRIS TREES ARE TO BE PROVIDED AND INSTALLED BY CITY OF SYRACUSE.

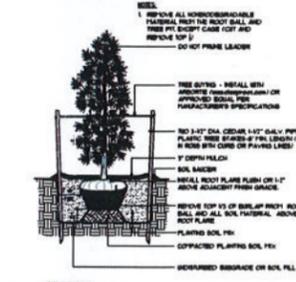
GENERAL NOTE: LANDSCAPE ARCHITECT TO REVIEW PLANT MATERIAL AT NURSERY OR HOLDING AREA PRIOR TO CONSTRUCTION.



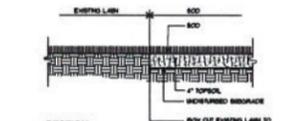
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SS-8800-04



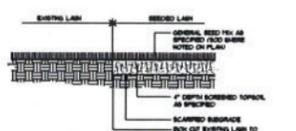
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SS-8800-02



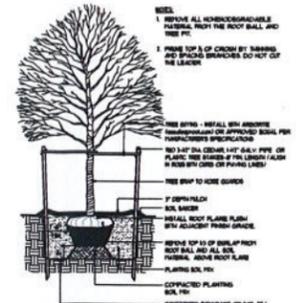
**SECTION 2**  
TREE PLANTING  
FOR SLOPED LESS THAN 1:50  
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SS-8800-01



**SECTION 3**  
SOODED LAWN  
FOR SLOPED LESS THAN 1:50  
NOT TO SCALE  
SS-8800-03



**SECTION 4**  
SEEDED LAWN  
FOR SLOPED LESS THAN 1:50  
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SS-8800-05



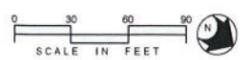
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SS-8800-01

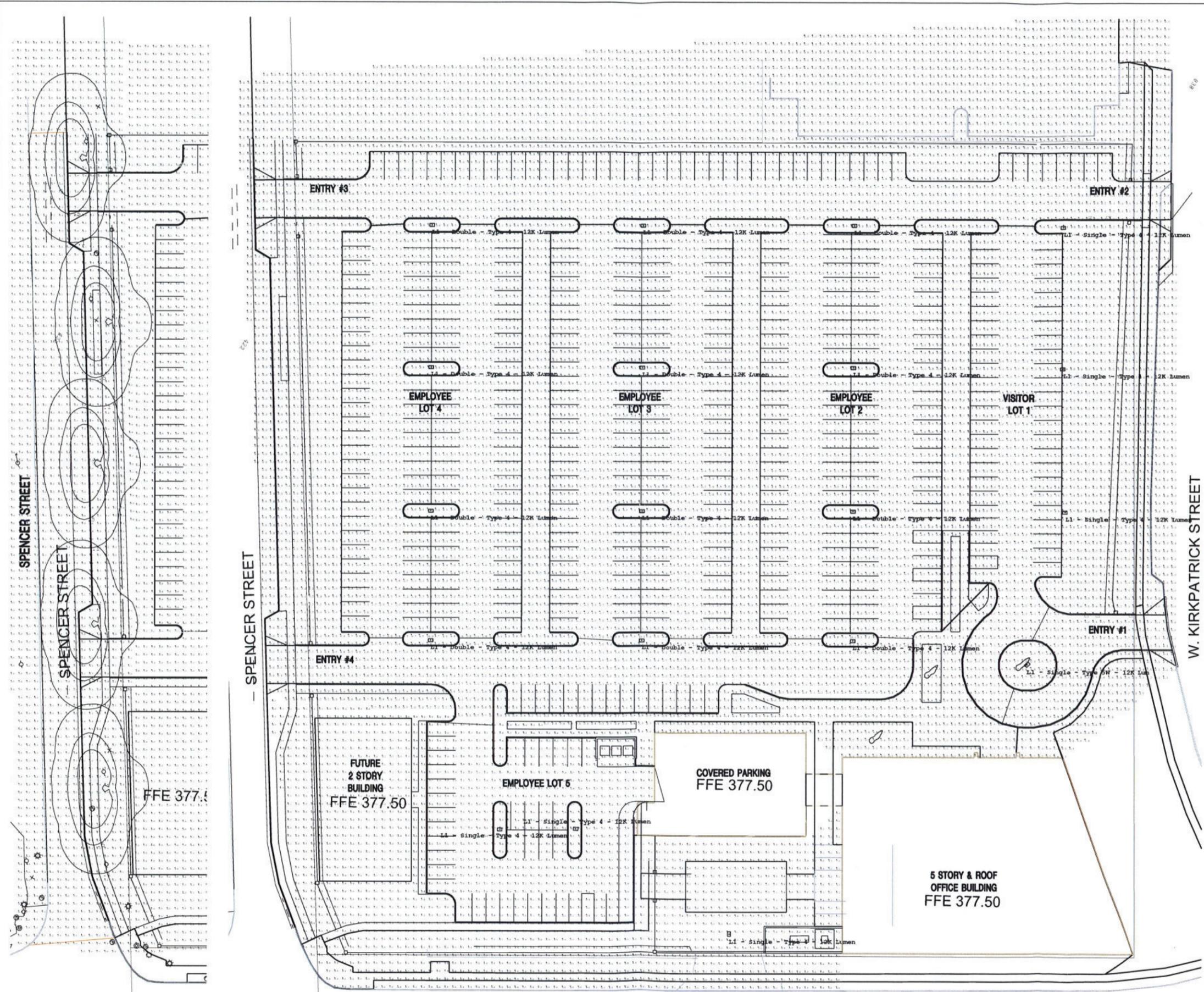
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PLANTING PLAN  
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L-600

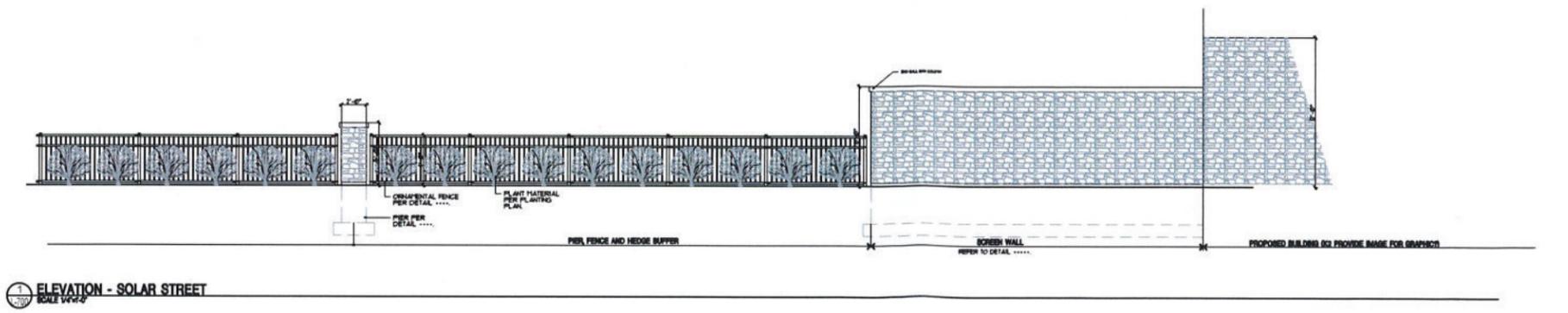
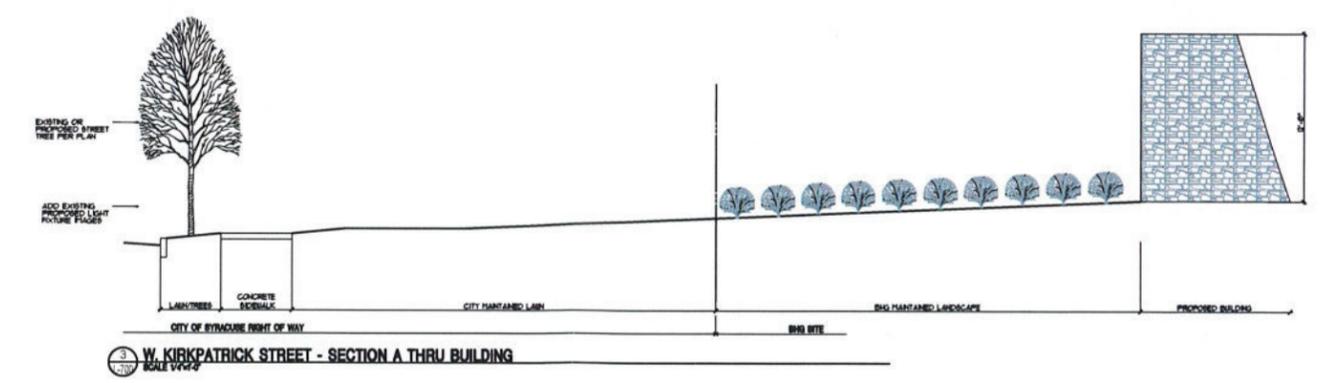
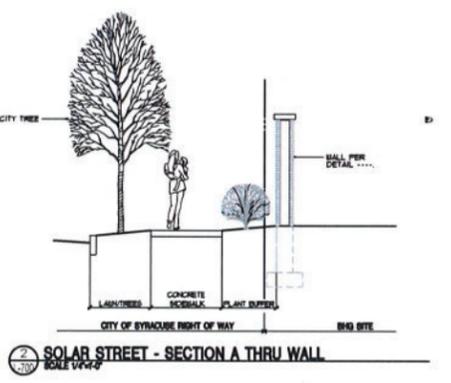
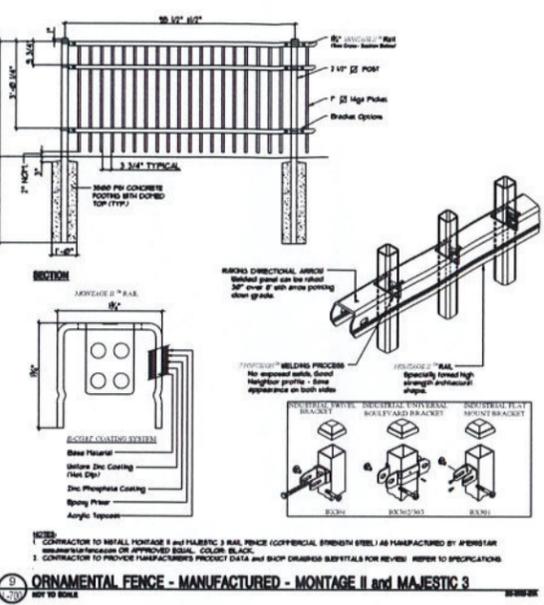
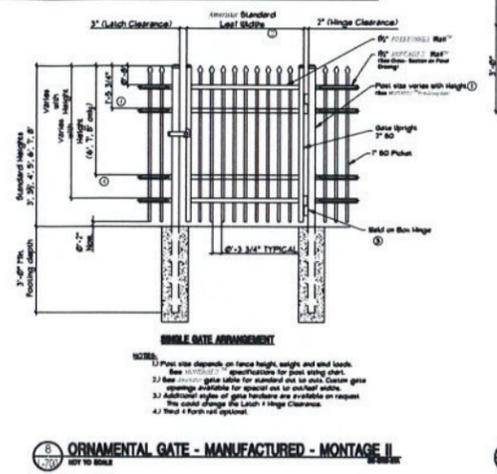
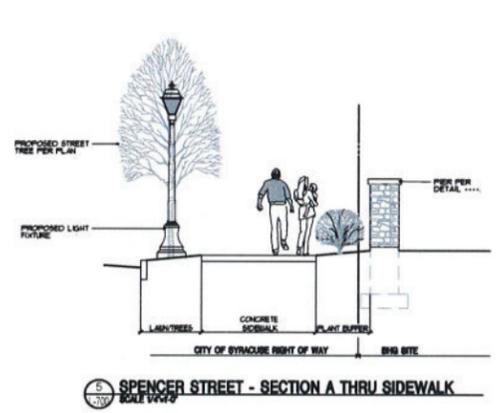
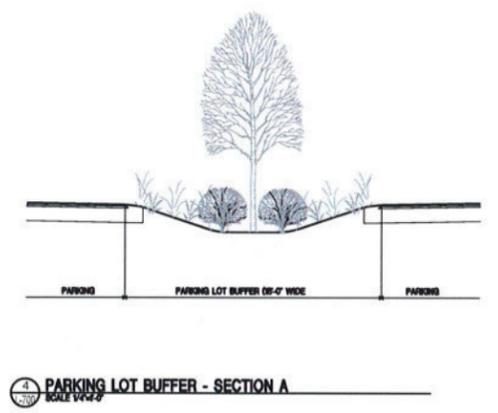
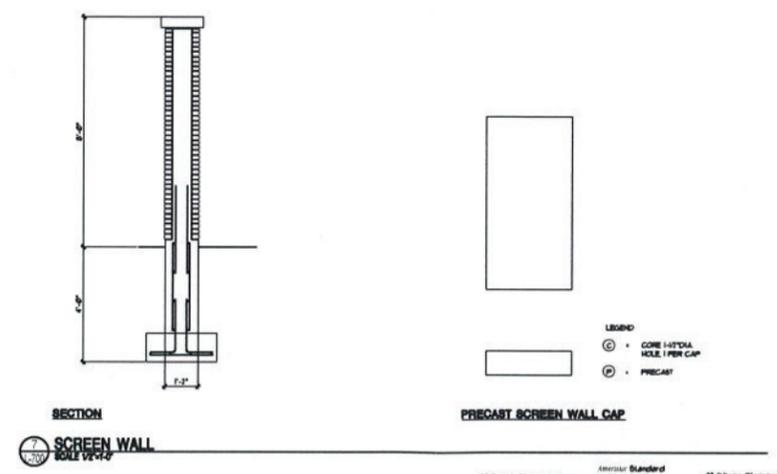
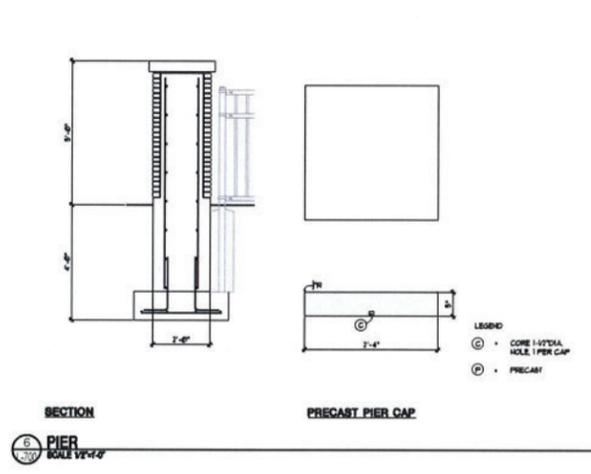
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1 PHOTOMETRIC PLAN- SPENCER ST.

2 PHOTOMETRIC PLAN- SITE

SOLAR STREET

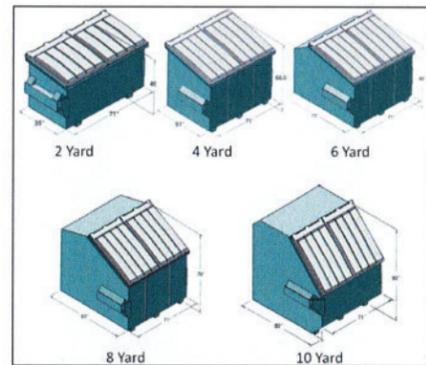




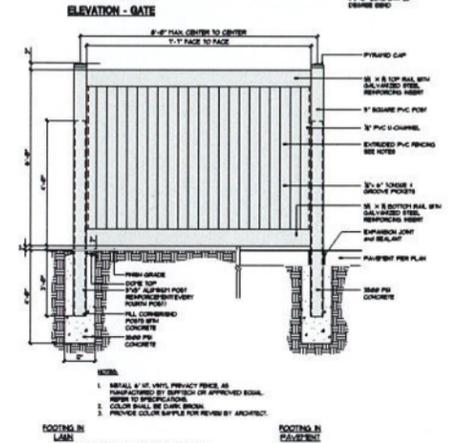
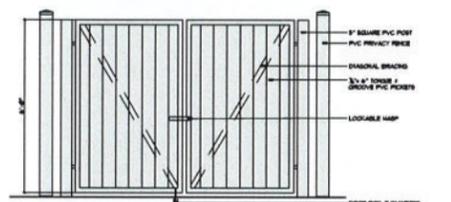
**Banker's Healthcare Group  
New Office Construction**

300 SPENCER ST. & SOLAR ST.  
SYRACUSE, NY 13204

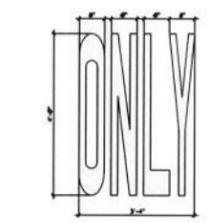
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NOVA	DATE
NOT FOR CONSTRUCTION	
DRAWING DATE	11/01/2019
DRAWN BY	VR
SCALE	AS NOTED
DRAWING TITLE	
SECTION & ELEVATION DETAILS	
L-700	
ISSUE FOR PRICING 11/01/2019	



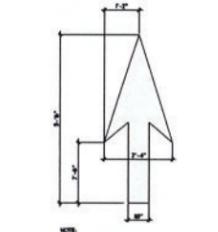
**TYPICAL DUMPSTER DIMENSIONS:**  
DETAIL MAY REQUIRE MODIFICATIONS BASED ON PROJECTS WASTE DEMANDS. CONFIRM DUMPSTER REQUIREMENTS WITH ARCHITECT/CLIENT.



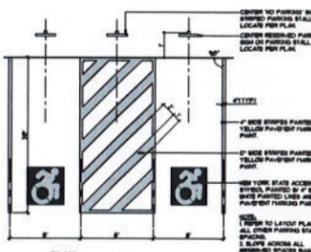
**13 WASTE/RECYCLING ENCLOSURE - VINYL**  
NOT TO SCALE 22-4000-03



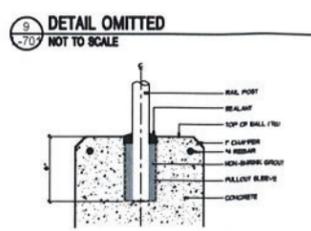
**12 SITE WORD MARKINGS**  
NOT TO SCALE 22-4000-03



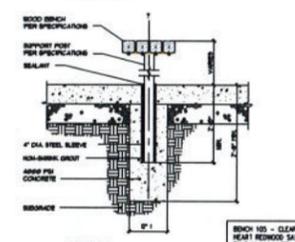
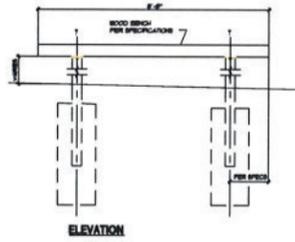
**11 THRU ARROW**  
NOT TO SCALE 22-4000-03



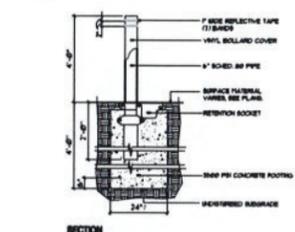
**10 RESERVED PARKING STALL**  
NOT TO SCALE 22-4000-01



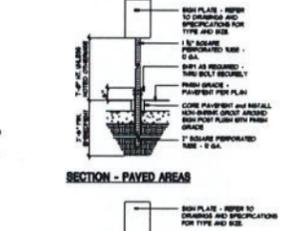
**9 RAIL POST/WALL DETAIL**  
NOT TO SCALE 22-4000-03



**7 BENCH**  
NOT TO SCALE 22-4000-03



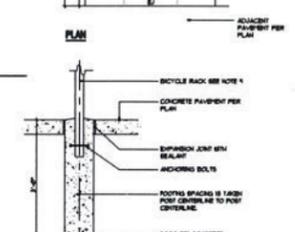
**6 STEEL BOLLARD REMOVABLE**  
NOT TO SCALE 22-4000-03



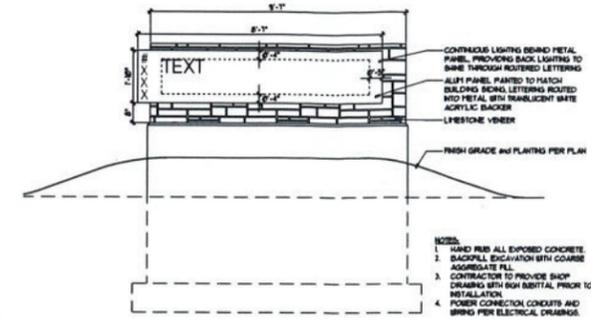
**SECTION - PAVED AREA**



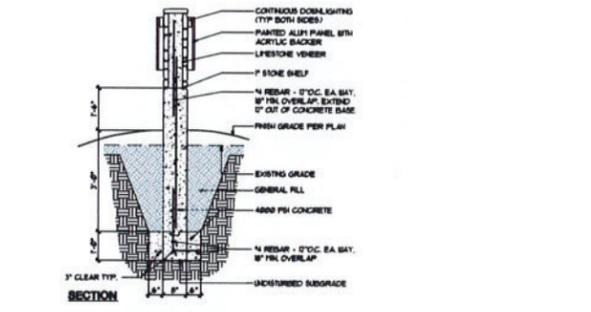
**SECTION - NON-PAVED AREA**



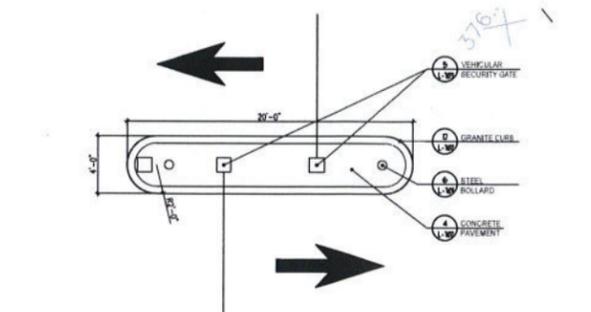
**4 BICYCLE RACK (FOOTING)**  
NOT TO SCALE 22-4000-04



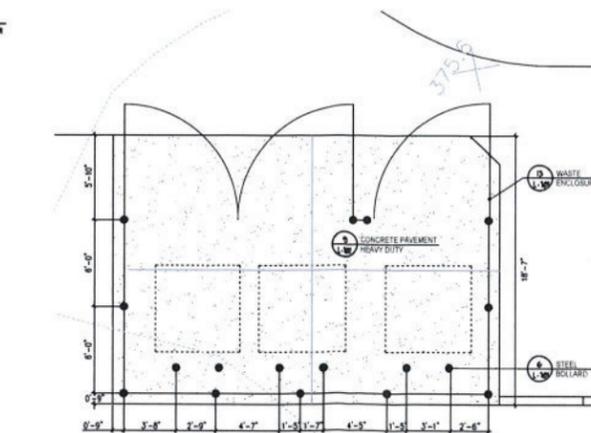
**ELEVATION**



**3 BHG - MONUMENT SIGN**  
SCALE 1/2\"/>



**2 PARTIAL PLAN - ENTRANCE GATE - TYPICAL**  
SCALE 1/4\"/>



**1 PARTIAL PLAN - WASTE ENCLOSURE**  
SCALE 1/4\"/>

**Banker's Healthcare Group  
New Office Construction**

300 SPENCER ST. & SOLAR ST.  
SYRACUSE, NY 13204

DATE	DESCRIPTION
11/11/2019	ISSUED FOR CONSTRUCTION
11/11/2019	ISSUED FOR PERMITTING
11/11/2019	ISSUED FOR BIDDING
11/11/2019	ISSUED FOR RECORD

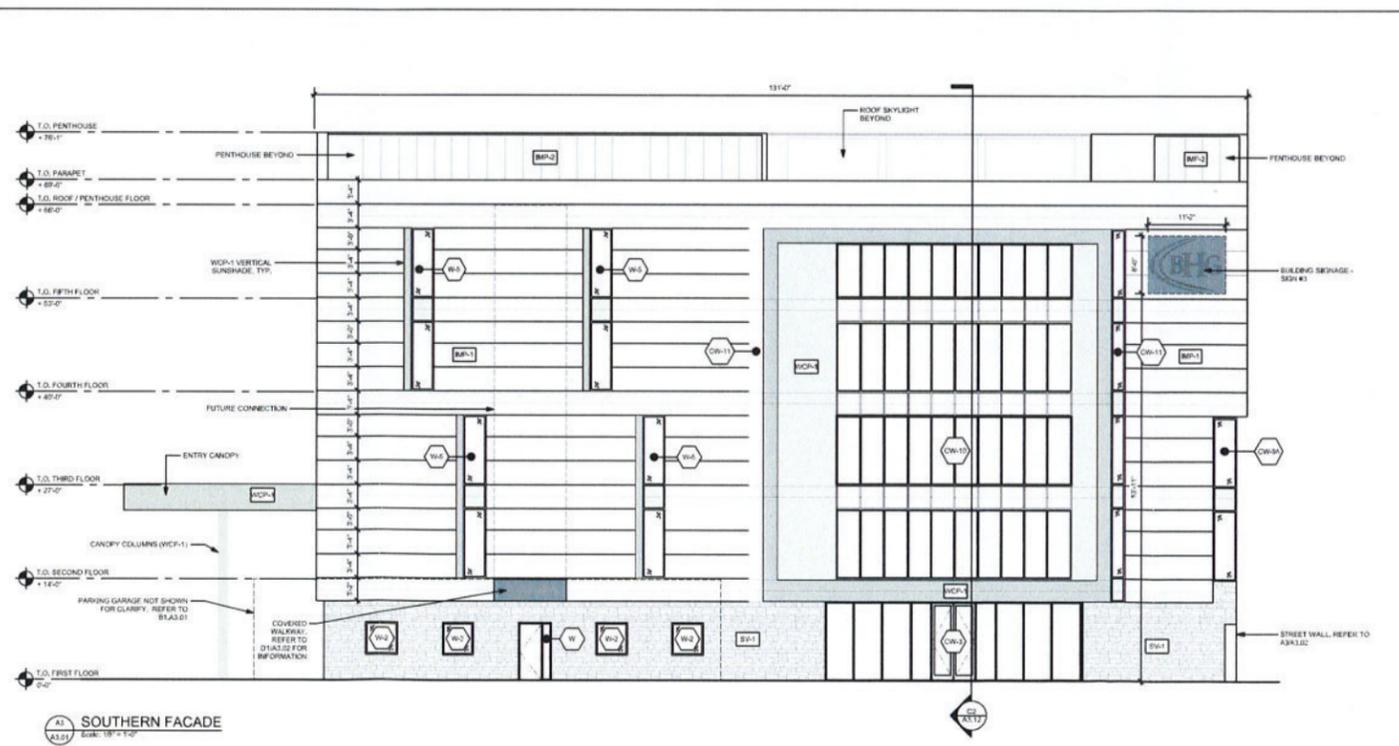
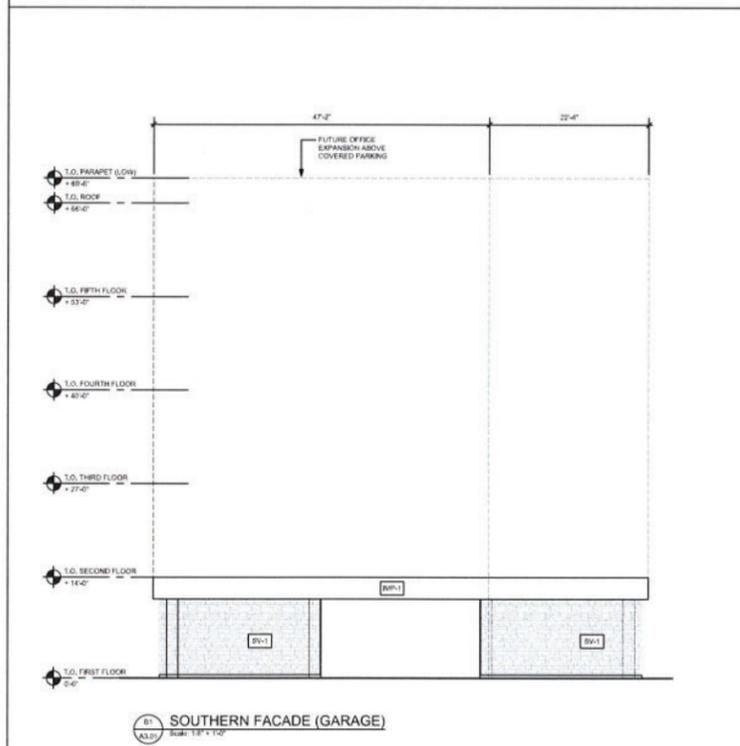
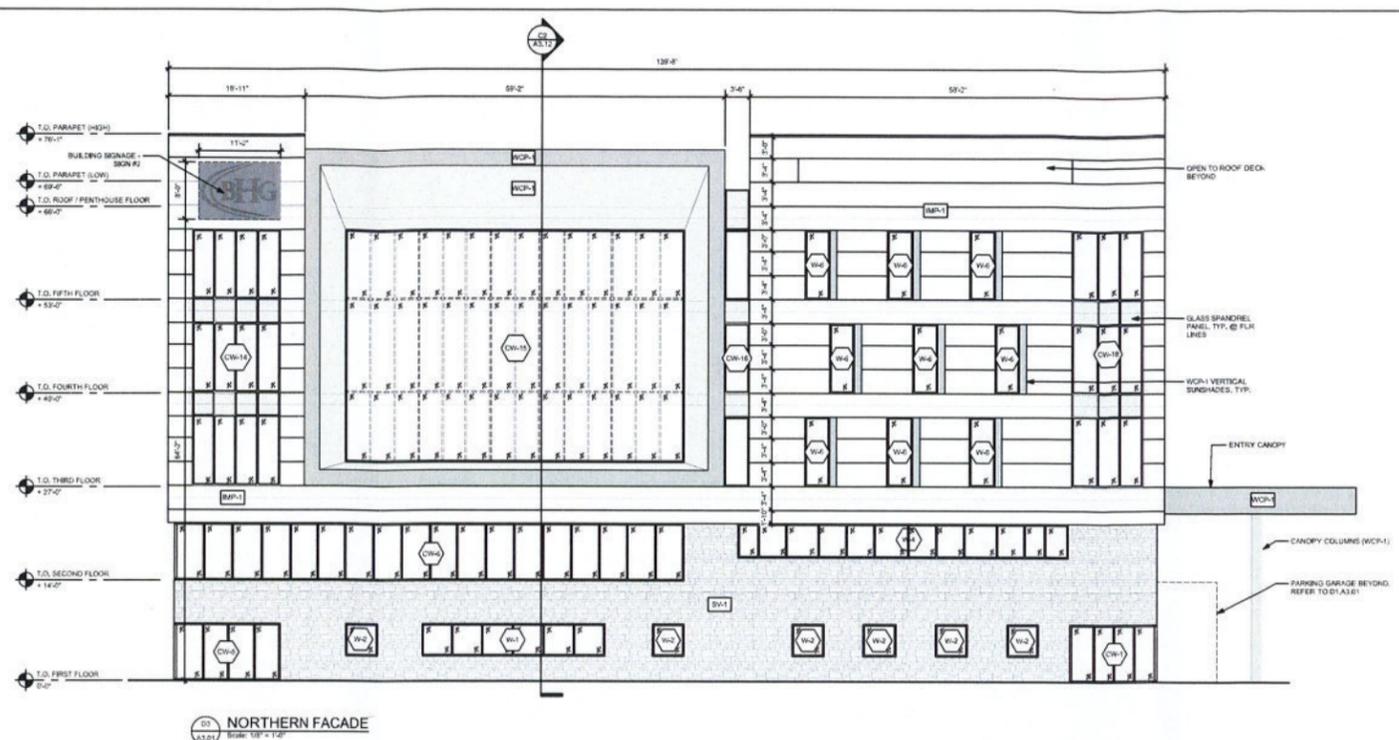
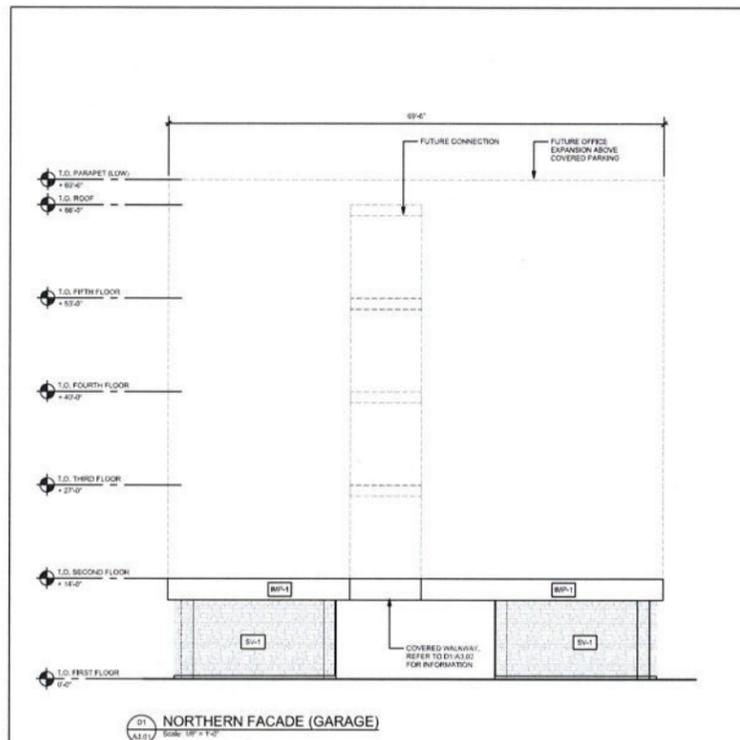
**PARTIAL PLAN  
DETAILS**  
L-701







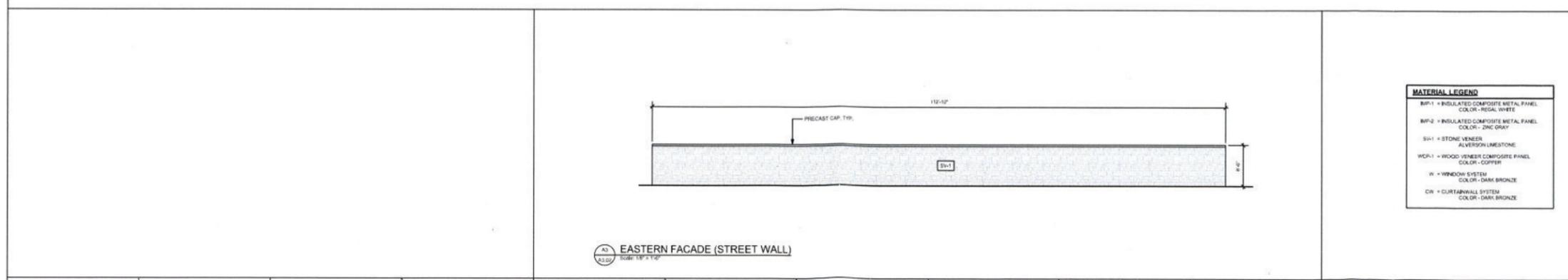
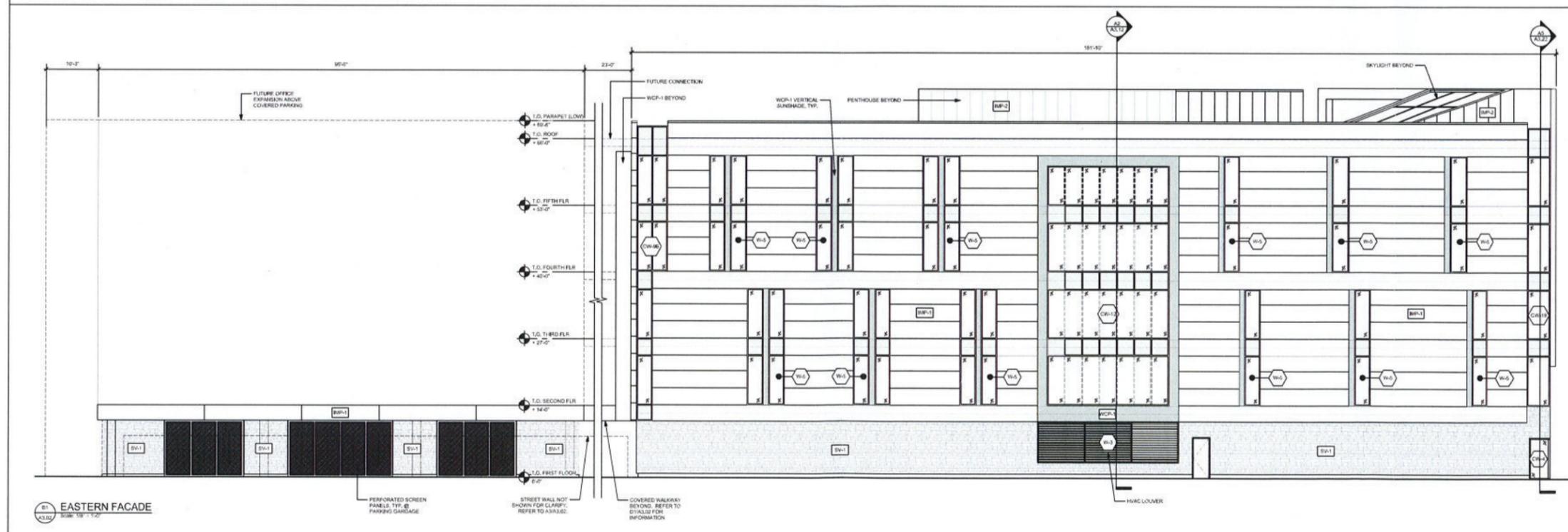
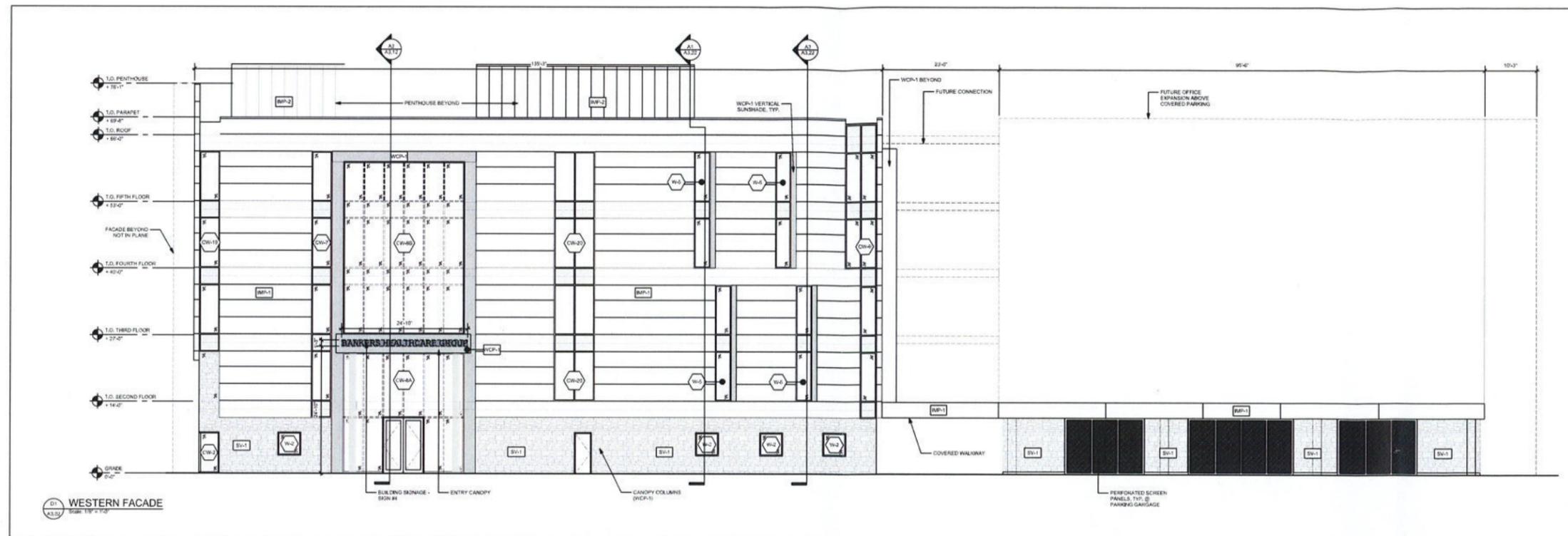




**MATERIAL LEGEND**

- MP-1 = INSULATED COMPOSITE METAL PANEL  
COLOR - REGAL WHITE
- MP-2 = INSULATED COMPOSITE METAL PANEL  
COLOR - ZINC GRAY
- SW-1 = STONE VENEER  
ALVERNOR LIMESTONE
- WCF-1 = WOOD VENEER COMPOSITE PANEL  
COLOR - COPPER
- W = WINDOW SYSTEM  
COLOR - DARK BRONZE
- CG = CURTAINWALL SYSTEM  
COLOR - DARK BRONZE

ISSUED FOR ZONING SUBMISSION  
DRAWING DATE: 11/01/2011  
SCALE: 3/8" = 1'-0"  
DRAWING TITLE: EXTERIOR ELEVATIONS



**MATERIAL LEGEND**

- MP-1 = INSULATED COMPOSITE METAL PANEL  
COLOR - REGAL WHITE
- MP-2 = INSULATED COMPOSITE METAL PANEL  
COLOR - ZINC GRAY
- SH-1 = STONE VENEER  
ALVERSON LIMESTONE
- WCP-1 = WOOD VENEER COMPOSITE PANEL  
COLOR - COPPER
- W = WINDOW SYSTEM  
COLOR - DARK BRONZE
- CR = CURTAINWALL SYSTEM  
COLOR - DARK BRONZE

BANKERS HEALTHCARE GROUP  
OFFICE BUILDING

300 SOLAR STREET  
SYRACUSE, NY 13204

REVISIONS

NO.	DATE	DESCRIPTION

Issued for Zoning Submission  
DRAWING DATE: 11/19/2019  
SCALE: 1/8" = 1'-0"  
DRAWING TITLE: EXTERIOR ELEVATIONS

**A3.02**