

City of Syracuse Zoning Office

Application for  PROJECT SITE REVIEW  SITE PLAN REVIEW-LAKEFRONT DISTRICT  
City Hall Commons - Room 500 \* 201 E. Washington Street \* Syracuse, NY 13202-1426 \* 315-448-8640

For Office Use Filing Date:

Case Number:

Zoning District:

**PROPERTY TAX ASSESSMENT ADDRESS(ES)**

(See Tax Assessment Roll at [syrgov.net/Assessment.aspx](http://syrgov.net/Assessment.aspx), or 315-448-8280)

**TAX ID/SBL**

(000.-00-00.0)

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

- Demolition (full and partial): \_\_\_\_\_
- New Construction: \_\_\_\_\_
- Exterior Alterations: New Building storefront sign-entrance door vinyl
- Site Changes: \_\_\_\_\_

**PROJECT DESCRIPTION**

removal of storefront sign and entrance door vinyl  
to be replaced with new occupant storefront sign  
and entrance door vinyl

**ZONING USE / BUILDING OCCUPANCY** (existing, proposed, changes)

Existing - New occupant provides same services  
of old occupant

<b>PROPERTY OWNER (required)</b> As listed on the Tax Assessment Roll available at <a href="http://syrgov.net/Assessment.aspx">syrgov.net/Assessment.aspx</a> or 315-448-8280					
First Name Leonard		Last Name Montreal		Title Member Company Salt City Enterprises, LLC	
Address 621 Hiawatha Blvd				Address	
City Syracuse		State NY	Zip 13201	Phone 315-474-0008	email
<b>APPLICANT (if applicable)</b>					
First Name Anthony		Last Name DePerno		Title President Company Victory Sign, Inc.	
Address 8915 Old State Rt. 13				Address	
City Canastota		State NY	Zip 13032	Phone 315-762-0220	email Tony@VictorySign.net
<b>REPRESENTATIVE (architect, engineer, attorney, sign company, other, if applicable)</b>					
First Name Anthony		Last Name DePerno		Title President Company Victory Sign, Inc.	
Address 8915 Old State Rt 13				Address	
City Canastota		State NY	Zip 13032	Phone 315-762-0220	email Tony@VictorySign.net

**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.

**PROPERTY OWNER SIGNATURE (required)**

As listed on the Syracuse Tax Assessment Roll available at [syrgov.net/Assessment.aspx](http://syrgov.net/Assessment.aspx), or 315-448-8280. If not listed as the current owner, please include a proof of ownership, e.g., a copy of the deed. Attorney's signing on behalf of the owner must include a one page letter describing the legal representative arrangement. If the property owner is a Corporation or Organization, the person signing must provide verification they are a member. **Contract purchasers, tenants, architects, engineers, contractors, etc. CANNOT sign on behalf of the owner.**

\* Please, see Sign waiver application

Signature		Date
Print Name Leonard Montreal		Title member
		Company Salt City Enterprises, LLC

# 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: <u>KabaFusion</u>			
Project Location (describe, and attach a location map): <u>922 Spencer Street, Syracuse, NY 13204</u>			
Brief Description of Proposed Action: <u>Installation of building store front sign and entrance door vinyl</u>			
Name of Applicant or Sponsor: <u>Victory Sign, INC</u>		Telephone: <u>315-762-0220</u>	
		E-Mail: <u>Tony@Victorysign.net</u>	
Address: <u>8915 Old State Rt 13</u>			
City/PO: <u>Canastota</u>		State: <u>NY</u>	Zip Code: <u>13032</u>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" 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 checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<u>N/A</u> acres	
b. Total acreage to be physically disturbed?		<u>N/A</u> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>N/A</u> acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

		NO	YES	N/A
5. Is the proposed action,	a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? 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 type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?  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"/>	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?  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"/>	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:  
 Shoreline    Forest    Agricultural/grasslands    Early mid-successional  
 Wetland    Urban    Suburban

15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?      NO   YES  
     

16. Is the project site located in the 100-year flood plan?      NO   YES  
     

17. Will the proposed action create storm water discharge, either from point or non-point sources?  
 If Yes,  
 a. Will storm water discharges flow to adjacent properties?      NO   YES  
        
 b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?  
 If Yes, briefly describe:              
 \_\_\_\_\_  
 \_\_\_\_\_

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?  
 If Yes, explain the purpose and size of the impoundment:      NO   YES  
        
 \_\_\_\_\_  
 \_\_\_\_\_

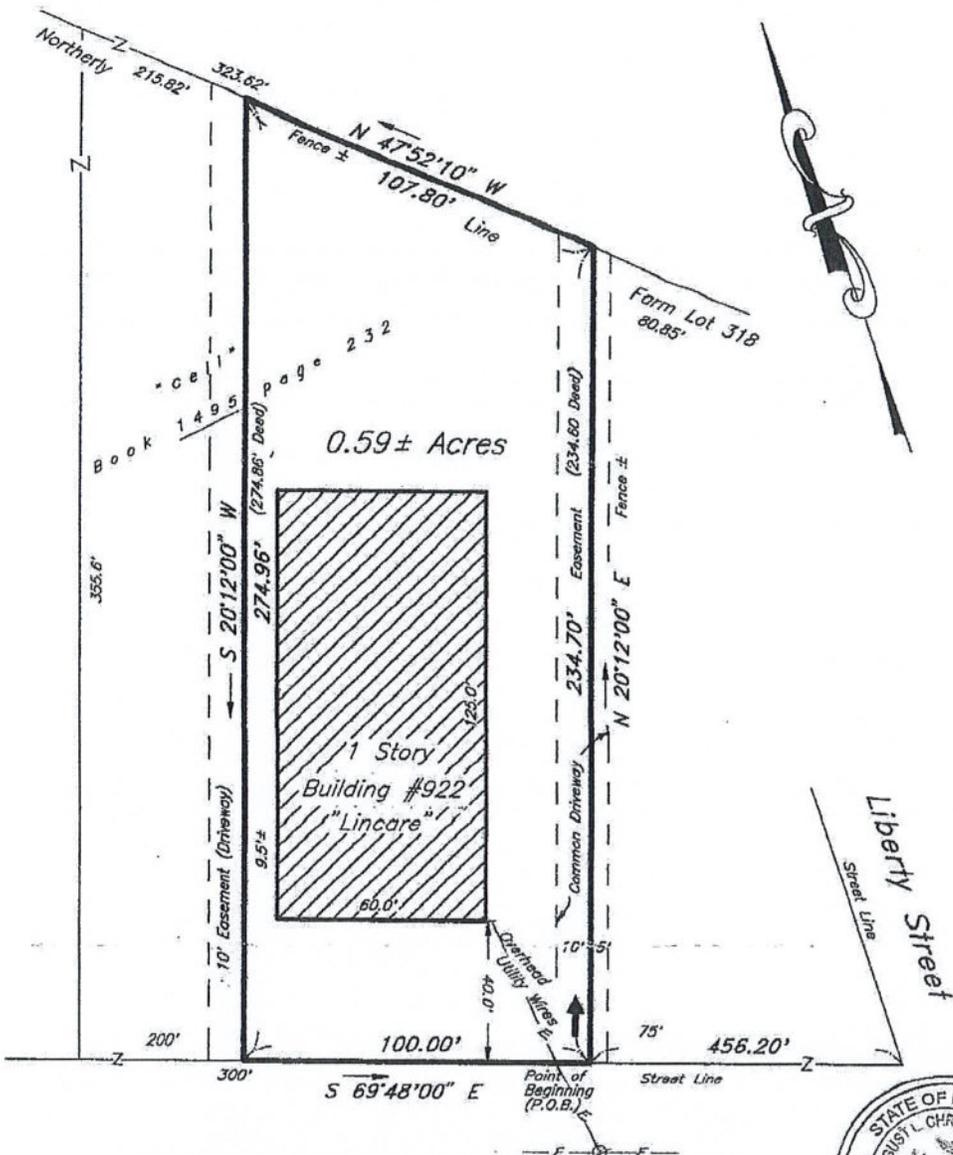
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?  
 If Yes, describe:      NO   YES  
        
 \_\_\_\_\_  
 \_\_\_\_\_

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?  
 If Yes, describe:      NO   YES  
        
 \_\_\_\_\_  
 \_\_\_\_\_

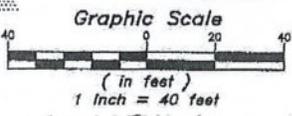
**I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE**

Applicant/sponsor/name: Anthony DePenna      Date: 7/30/2020  
 Signature: Anthony DePenna      Title: President

**PRINT FORM**



Edge of Pavement:  
**SPENCER STREET**



Tax Map No.: 115-02-19  
 Deed Reference: Cell, Book 1495 page 232  
 Salt City Enterprises, LLC  
 Book \_\_\_\_\_ page \_\_\_\_\_  
 Subject to a Current Abstract of Title  
 Not To Be Used For Construction Purposes.

CERTIFIED TO:

Certifications are not transferable to additional institutions or subsequent owners. Certifications shall run only to the person for whom the survey is prepared, and on his behalf to the title company, governmental agency and lending institution listed hereon, and to the assignees of the lending institution.

This Certification shall be null & void if a Re-Survey/Update of Survey Map is done by others, except by the undersigned surveyor or his successor. Utilities & Underground Structures Not Certified. Property corner stakes, if any (found or set) as noted above. It is a violation of Article 145 of the N.Y.S. Education Law to alter this map without the direct consent of the undersigned surveyor or his successor.

The undersigned surveyor hereby certifies that this map is made from an actual survey of the property shown hereon.

**(VOID UNLESS SIGNED WITH RED INK.)**  
*G. Christopherson*  
 Professional Land Surveyor

Building Location Survey for Mortgage Purposes

Part of Farm Lot 318  
 City of Syracuse  
 County of Onondaga  
 State of New York  
 Known as: #922 Spencer Street

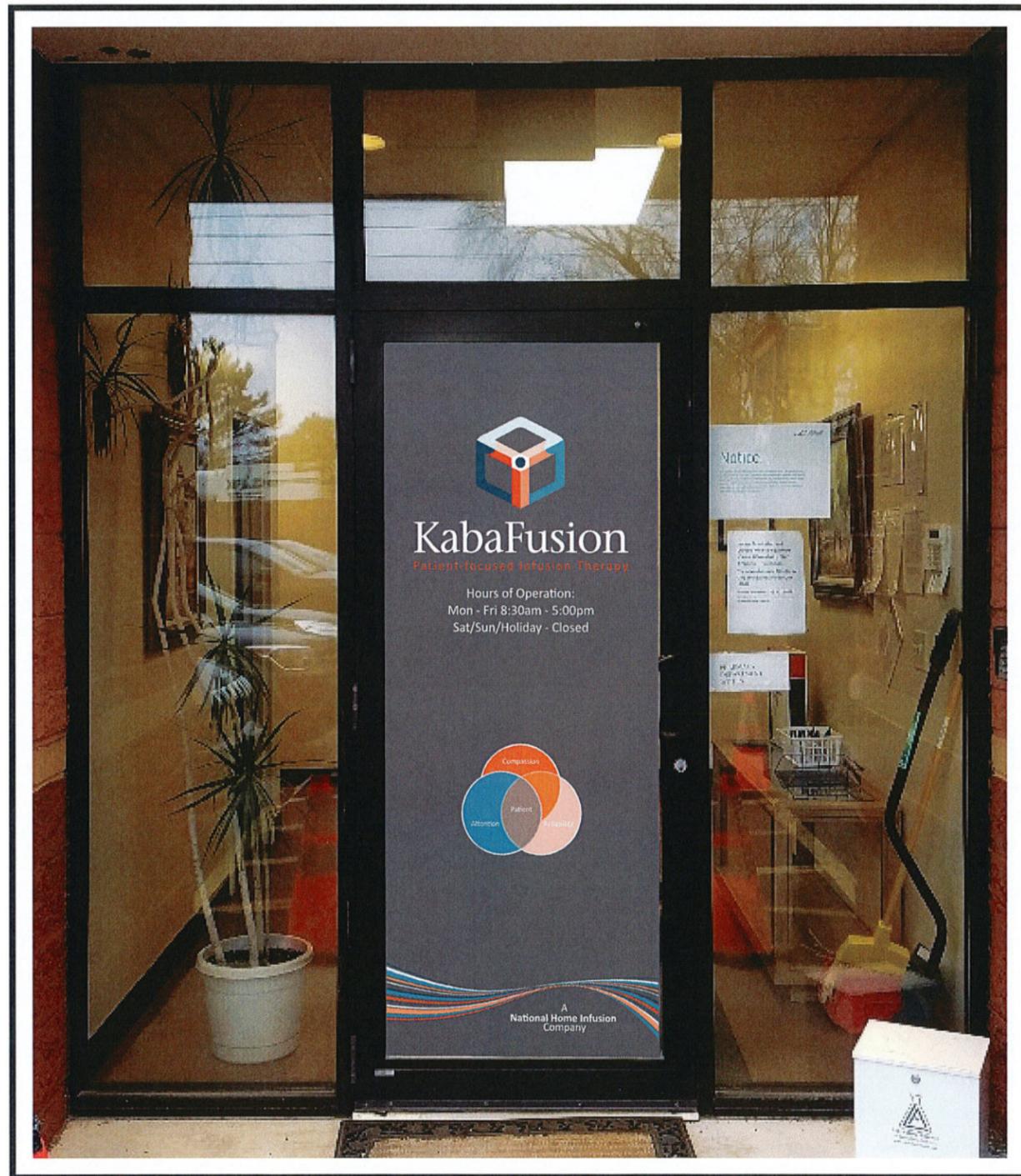
**CHRISTOPHERSON**  
 LAND SURVEYOR  
 Syracuse & Tully, New York  
 Phone: (315)-437-9848

Made By: H.B.C.  
 Date: 2/9/2008  
 Scale: 1"=40'

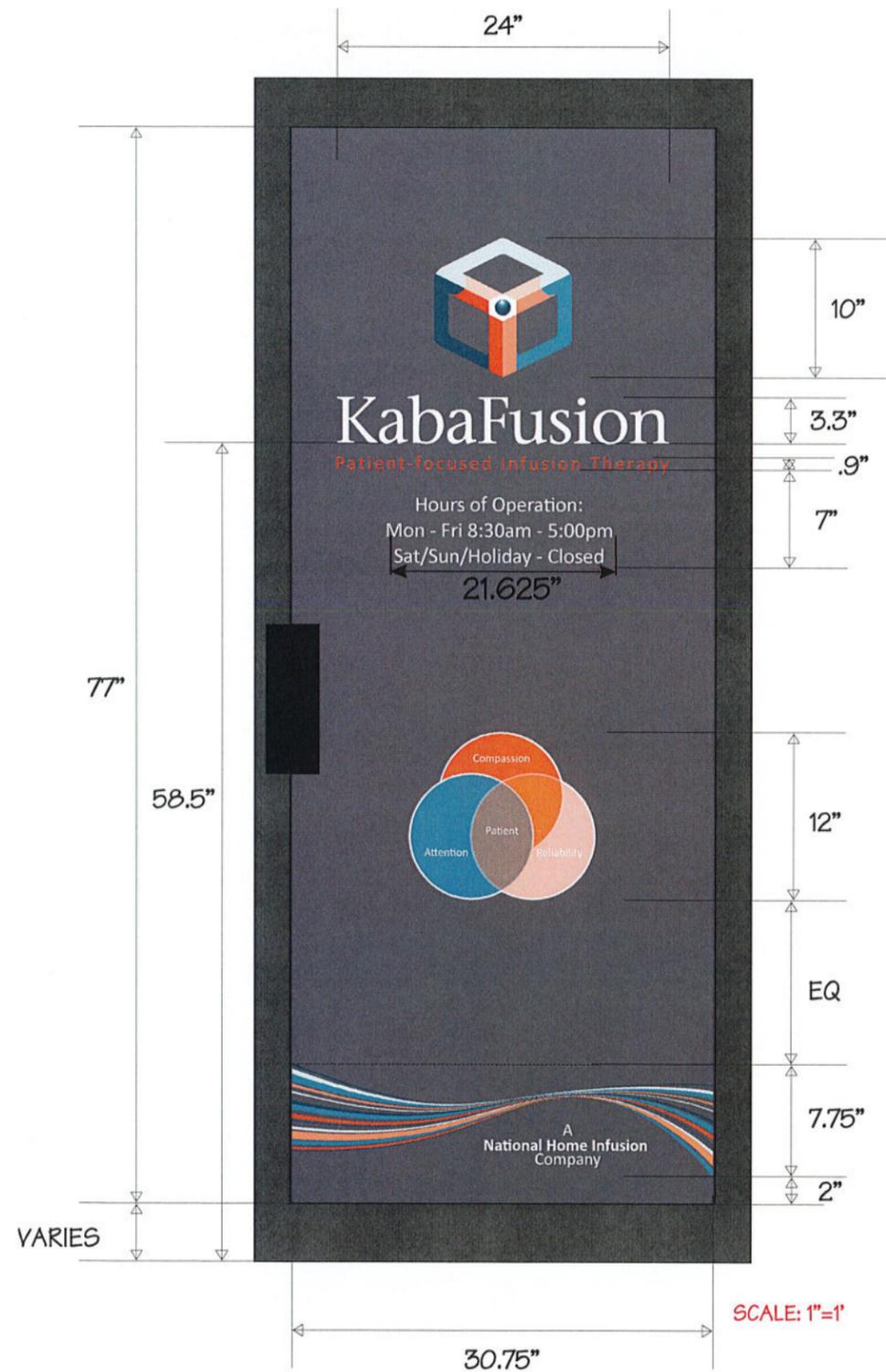
File: 2469  
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Re-Certified:



SCALE: 3/4"=1'

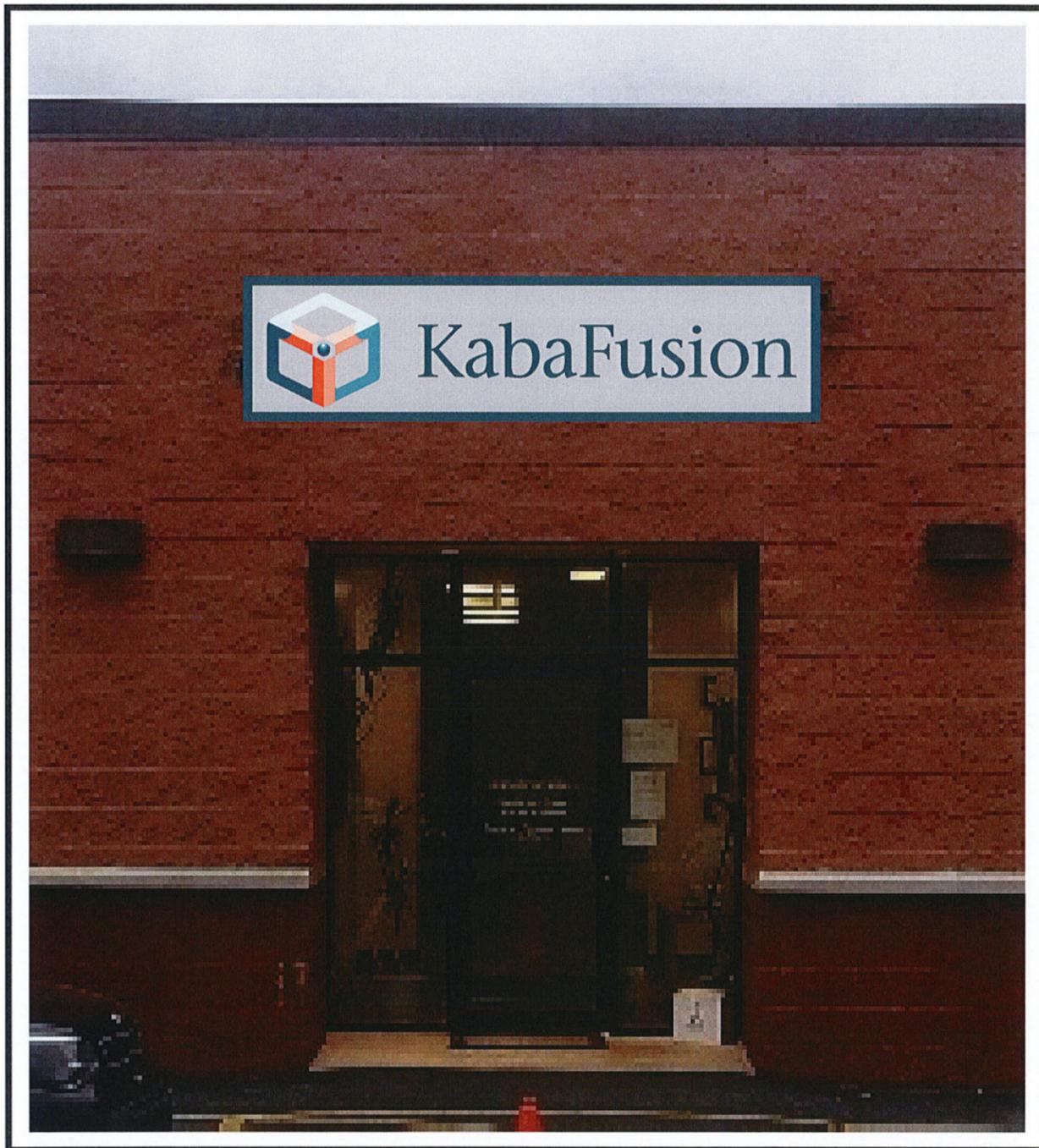


**COLORS**

- PMS 656 C
- PMS 719 C
- PMS 1565 C
- PMS 549 C
- PMS 3165 C
- PMS 166 C
- WHITE
- SILVER/GRAY

**GENERAL NOTES**

> PAN SIGN



SCALE: 3/8"=1'



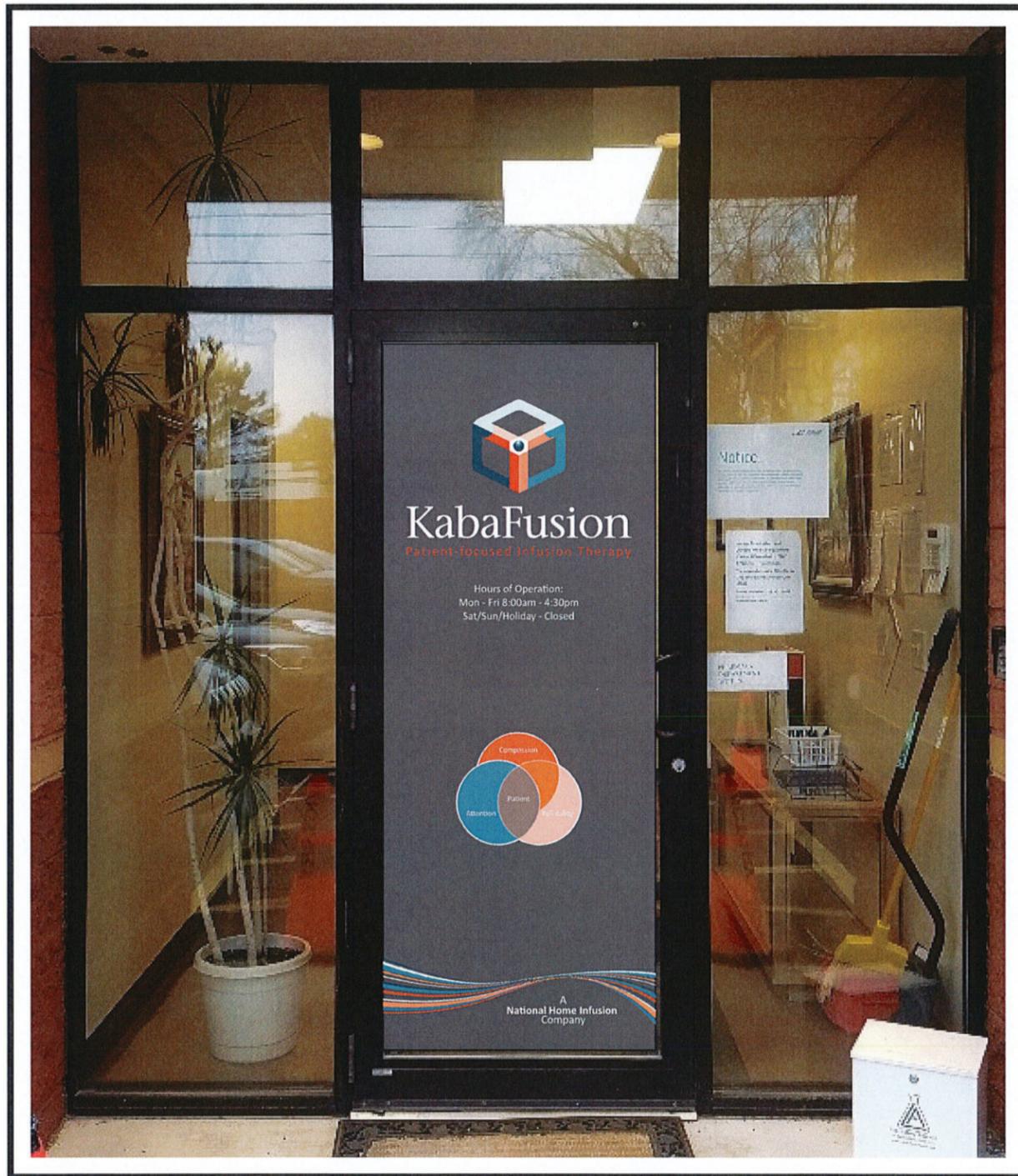
SCALE: 1/2"=1'

**COLORS**

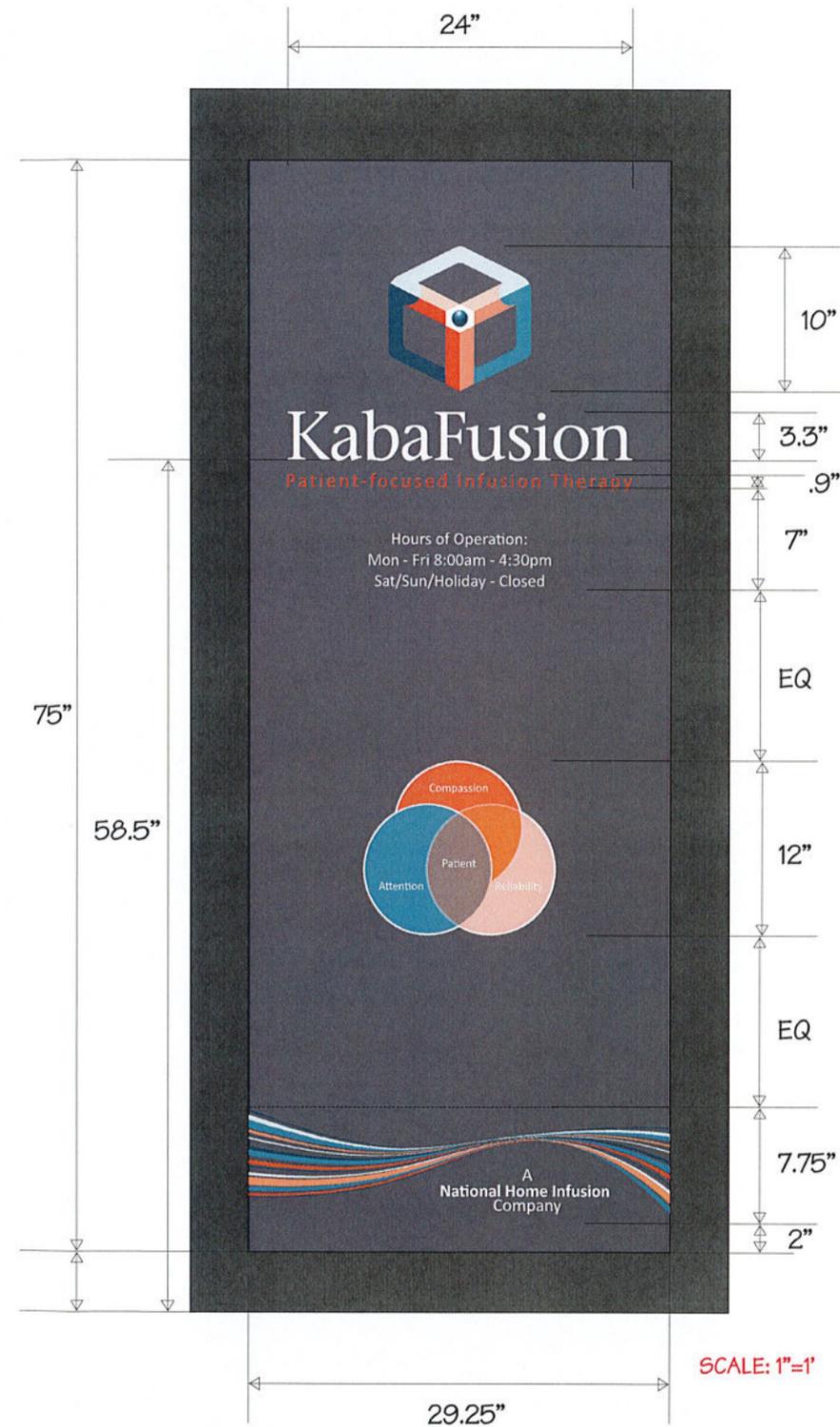
- PMS 656 C
- PMS 719 C
- PMS 1565 C
- PMS 549 C
- PMS 3165 C
- PMS 166 C
- WHITE
- SILVER/GRAY

**GENERAL NOTES**

> PAN SIGN



SCALE: 3/4"=1'



SCALE: 1"=1'

**COLORS**

- PMS 656 C
- PMS 719 C
- PMS 1565 C
- PMS 549 C
- PMS 3165 C
- PMS 166 C
- WHITE
- SILVER/GRAY

**GENERAL NOTES**

> PAN SIGN