

PLEASE TYPE OR PRINT (LEGIBLY)

For Office Use Only:	Application Number: V- <u>19-121</u>
Tax map Section: <u>105</u> Block: <u>02</u> Lot: <u>020</u> Zoning District: <u>RA</u>	

1. Address of subject property: 541-543 Park Avenue, Syracuse, NY 13204

2. Year property was purchased by current owner: JULY 1, 2013

3. Applicant/contact information:

a. Owner(s) (current titleholder):

Name(s): Meghan Page

Mailing Address: PO Box 715, Tonawanda, NY

Zip: 14151 Daytime phone number: 716-695-9250 home phone number: 716-695-9250

E-mail (alternate contact for additional information request): gpageproperties@hotmail.com

b. Contract purchaser(s) , Lessee , or Co-applicant (if applicable)

***note: Copy of contract to purchase must be included with application if this contract purchaser or lessee applies.**

Name(s):

Mailing Address:

Zip: Home phone number: Day Phone:

E-mail (alternate contact for additional information request):

c. Representative: Attorney , Architect , Contractor , Other

(Only if involved in this application)

Name(s): Joelle E. Rotondo Esq., Rotondo Law Offices PLLC

Mailing Address: 6701 Manlius Center Road Ste 204, East Syracuse NY

Zip: 13057 Telephone number: 315-437-3909 ext 2

4. Current use of property: (i.e., 1 family, 2 family, grocery store, etc.): 4 Unit/ Family

Proposed use and occupancy of property: 4 Unit/ Family

Current number of onsite (off-street) parking spaces: 7 Spaces

Proposed number of onsite (off-street) parking spaces: 7 Spaces

Days and hours of operation (for any business uses):

Explain in detail what (if any) new additions or construction is proposed on the site: NONE

10/25/19
REC'D 11/2/19

Reason for request:

The courts have distinguished between use variances (for uses which are not permitted) and area variance (for excess lot coverage, additions into required yards, etc.). Be aware that *the standards of proof for a use variance are much more demanding* than for an area variance and that *the burden is on the applicant* to provide such proof in arguing their case. (See Standard of Proof requirements on required submittal page.) Use additional sheets of paper to present proof if necessary

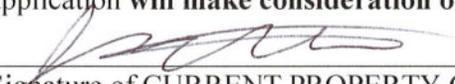
In 2013, Owner purchased building as a 4-unit/family home which was already converted. With 4 units/families, the units needed to be renovated. Owner spent \$162,500.00 on the renovation as follows: Replaced all drywall \$30,000.00, Insulated entire building \$6,000.00, changed all light fixtures \$2,000.00, Replaced all windows \$20,000.00, Replaced all doors \$5,000.00, All new bathrooms \$20,000.00, All new kitchens including cabinetry \$32,000.00, All new flooring throughout \$12,000.00, Painted all apartments and hallways \$8,000.00, Painted exterior \$4,500.00, Repaired plumbing \$5,000.00, Repaired porches \$3,000.00, Repaired masonry foundation \$5,000.00, and Miscellaneous Expenses \$10,000.00. Average cost in that neighborhood is \$30,000.00 per unit. This renovation plus purchase cost is \$50,000.00 per unit based on a four-family home. Owner was unaware that it was zoned as a 3 unit/family until a City Codes Enforcement Agent directed Owner's attention to it January of this year. Owner was never made aware of this fact previously and assumed it was zoned as 4 unit/family because that's the way they bought it. It would be a financial hardship for owner to turn it into a 3 unit/family.

The following affirmation must be signed and dated by the CURRENT PROPERTY OWNER or the owner's LEGAL representative (attorney, power of attorney, partner in the business, etc.).

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 make consideration of this application null and void.**


Signature of CURRENT PROPERTY OWNER (or owner's LEGAL representative) 12/7/2018
Date

Joelle E Rotondo Esq., Rotondo Law Offices PLLC, Attorney for Meghan Page Owner
Printed or typed name of person whose signature is above (if legal representative, also state relationship to owner).

SYRACUSE BOARD OF ZONING APPEALS
CITY HALL COMMONS, ROOM 101
201 EAST WASHINGTON STREET
SYRACUSE, NY 13202
(315) 448-8640

Board of Zoning Appeals application Procedures

Variance applications involve public hearings with the Board of Zoning Appeals. A variance application will not be considered complete on the applicant's part until all required submittals have been received and have been through a preliminary review by Zoning Office staff (and possibly other departments), including an evaluation of the application under the New York State Environmental Quality Review Act (SEQR).

Once an application has been determined to be ready for a public hearing with the Board of Zoning Appeals, it will be scheduled for the **next available** hearing date (allowing the necessary time from for the Board's authorization, newspaper publication, mailing schedules, etc.). A "Public Notice" regarding the hearing date will then be mailed to the applicant (and representative, if any), approximately ten (10) days prior to the hearing date.

The public notice is also published in the Syracuse Post Standard newspaper ten (10) days prior to the hearing date. Public notices are also sent to property owners contiguous to any property subject to a public hearing, and to other city departments and neighborhood organizations.

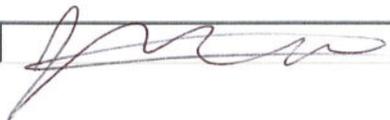
The application, and its contents, will then be open for inspection at the Syracuse Office of Zoning Administration during regular office hours.

Unless otherwise notified, all meetings at which public hearings are to be held will begin at 1:00 p.m. in the Common Council Chambers on the third floor of City Hall.

The applicant or his or her representative **must attend** the public hearing to explain the case request to the Board of Zoning Appeals. (The rules of the Board of Zoning Appeals **do not permit postponements** due to the absences of applicants or their representatives.) A variance decision is not final until a written resolution is adopted by the Board of Zoning Appeals and filed with the secretary to the Board. Depending upon the situation, the resolution may possibly not be adopted until a later meeting. A copy of the resolution will be mailed to the applicant.

Depending upon the type and complexity of the application, additional necessary reviews, and the hearing schedule, the entire variance application process from the submission of the application to the release of the resolution may take approximately two months.

Please sign that you have read and understand the above information and return this page with the application.

Signed:  Date: 12/7/18

This application may be mailed or delivered in person to the Syracuse Office of Zoning Administration, located in Room 101 at City Hall Commons, 201 East Washington Street, Syracuse, NY 13202-1426. If you wish to discuss the application with a member of our staff, please call ahead for an appointment (448-8640).

NOTE: After receipt of the application, it may be necessary to require additional information from the applicant. *An application must be complete before a public hearing can be scheduled.*

Items that are submitted with the application will not be returned so it is important that the applicant must make any copies of items they need prior to submitting the application. **Copies will not be made by staff to the Board of Zoning Appeals.**

APPLICANT PLEASE NOTE: Approval of your application by the Board of Zoning Appeals does not relieve you or your agent from compliance with any other regulatory or licensing provisions additionally required by other Federal, State, County, or City authorities. You are still required to pursue and obtain permits from the Division of Code Enforcement.

05/2014

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: Use and Area Variance for 541-543 Park Avenue, Syracuse, NY			
Project Location (describe, and attach a location map): 541 - 543 Park Avenue, Syracuse, NY			
Brief Description of Proposed Action: Use variance to allow conversion of property from 3family to 4family house. Area variance for parking limitations			
Name of Applicant or Sponsor: Meghan Page		Telephone: 716-695-9250	
		E-Mail:	
Address: P.O. Box 715			
City/PO: Tonawanda		State: NY	Zip Code: 14151
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"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action? _____		.2 acres	
b. Total acreage to be physically disturbed? _____		0 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____		.2 acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input checked="" type="checkbox"/>	<input 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?	NO	YES	
	<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: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<input type="checkbox"/> NO <input type="checkbox"/> YES		

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>Meghan Page</u> Date: <u>6/15/18</u></p> <p>Signature: <u>Meghan Page</u></p>		

Syracuse Board of Zoning Appeals
City Hall Commons, Room 212
201 East Washington Street
Syracuse, NY 13202-1426
For Information Call: 448-8640

REQUIRED SUBMITTAL SHEET FOR USE VARIANCES
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

- ✓ 1. **Denial of Permit** from DOCE, Permit office - Room 101. (required even if a Notice of Violation has been issued)
- ✓ 2. One clean copy of a **current survey map** drawn by a licensed land surveyor. **Reduced, faxed or scanned copies will not be accepted**
NOTE: If plans are larger than 11x17 then a reduced copy must also be included with the application
- ✓ 3. **Site plan:** On a **copy** of the survey, show all walkways, driveways, screening devices, signage and any new construction **(must be drawn to scale and labeled with dimensions)**
NOTE: If plans are larger than 11x17 then a reduced copy must also be included with the application
- ✓ 4. **Floor plans:** (Must be drawn with a straight edge * Must be drawn to scale)
 - a. **One** copy of scaled floor plans for all floors showing current arrangement and labeled with dimensions current uses.
 - b. **Two** copies of proposed floor plans showing dimensions and proposed use. (One copy to be submitted to DOCE, Permit office, Room 101 and One copy with this application) If the use is a business all shelving, storage, restrooms, kitchen hardware (stoves, sinks, freezers etc.) must be shown.
No proposed floor plan
NOTE: If plans are larger than 11x17 then a reduced copy must also be included with the application
- ✓ 5. **Elevations:** (for all new construction) *No new Construction Requested*
Two sets of elevations (drawings of exterior walls) including doors and windows
 - a. **One** copy to be submitted to DOCE, Permit office, Room 101
 - b. **One** copy to be submitted with this application)
NOTE: If plans are larger than 11x17 then a reduced copy must also be included with the application
- ✓ 6. **Standards of Proof (for Use Variance):** The applicant must provide a written letter to the Board of Zoning Appeals detailing the proposed project and stating hardship. In addition the applicant must also show written **proof** of the following:
 - a. **Reasonable Return:** Applicant must show financial hardship caused by current use of property (**documentation must be submitted**)
 - b. **Unique Circumstances:** Applicant must show that the hardship is unique to the property not the neighborhood as a whole.
 - c. **Essential Character of the Locality:** The proposed use will not alter the essential character of existing neighborhood.
 - d. The alleged hardship has not been self-create
- ✓ 7. *No business operated on property*
Detailed letter explaining the nature of your business, for example: the hours of operation, number of employees on premise at one time, items to be sold, etc.
NOTE: If you are selling prepared food it is important to list each item to be prepared and sold at your place of business
- ✓ 8. **Photos:** Labeled photos of property will be helpful in the review of the application.
- ✓ 9. All parts of the application form and appropriate parts of the Environmental Assessment Form completed. Any blank sections will result in the application being returned and a delay in scheduling a Public Hearing.
- ✓ 10. **Fee of \$25.00**, MADE PAYABLE BY CHECK OR MONEY ORDER ONLY, to the COMMISSIONER OF FINANCE

DENIAL OF PERMIT

REFERENCE ADDRESS 541-43 Park Ave

WARD NO. _____

OWNER GARRY PAGE & MEGHAN PAGE

OWNER'S ADDRESS P.O. Box 715

Tonawanda, NY 14151

CONTACT Joelle Rotondo 1315-437-3909 TELEPHONE _____

APPLICATION FOR PERMIT TO:

erect () convert (X) maintain () operate ()

CHANGE Nonconforming 3 FAMILY TO 4 UNIT APARTMENT

DENIED UNDER ARTICLE (s) _____

_____ of the zoning ordinance for the following reasons: _____

- PLANS ATTACHED, APPROVED BY _____ LOCATION OF REFERENCE ADDRESS:
ON _____ ASSESSOR'S ATLAS
- SURVEY ATTACHED BOOK (S) NO. _____
- ZONING REVIEWED BY _____ PLATE (S) NO. _____
- PARCEL (S) NO. _____

DATE January 22, 2019 SIGNATURE [Signature]

ROTONDO LAW OFFICES PLLC
6701 Manlius Center Road, Ste 204
East Syracuse, NY 13057
315-437-3909
Fax: 315-437-2260

Joelle E Rotondo Esq.

jrotondolaw@gmail.com

February 25, 2019

Dear Syracuse Board of Zoning Appeals;

In 2013, Owner purchased building as a 4-unit/family home which was already converted. With 4 units/families, the units needed to be renovated. Owner spent \$162,500.00 on the renovation as follows: Replaced all drywall \$30,000.00, Insulated entire building \$6,000.00, Changed all light fixtures \$2,000.00, Replaced all windows \$20,000.00, Replaced all doors \$5,000.00, All new bathrooms \$20,000.00, All new kitchens including cabinetry \$32,000.00, All new flooring throughout \$12,000.00, Painted all apartments and hallways \$8,000.00, Painted exterior \$4,500.00, Repaired plumbing \$5,000.00, Repaired porches \$3,000.00, Repaired masonry foundation \$5,000.00, and Miscellaneous Expenses \$10,000.00. Average cost in that neighborhood is \$30,000.00 per unit. This renovation plus purchase cost is \$50,000.00 per unit based on a four-family home. Owner was unaware that it was zoned as a 3 unit/family until a City Codes Enforcement Agent directed Owner's attention to it January of this year. Owner was never made aware of this fact previously and assumed it was zoned as 4 unit/family because that's the way they bought it. It would be a financial hardship for owner to turn it into a 3 unit/family.

Meghan Page purchased this property from owner/occupier Marcia H. Hatherill on July 1, 2013 at which time it was a 4 unit/family building. According to her son, Richard Hatherill, she is elderly and unable to competently sign an affidavit of support or assist in any way. However, Richard Hatherill has expressed that he remembers living in the property at 541-543 Park Avenue, Syracuse NY. He stated that the Property was and has always been a 4 unit/family apartment building. At Closing and during his family's residence and ownership, they were unaware of the fact that the property was zoned as a 3 unit/family but being used as a 4 unit/family. Prior owner and son presently live out of state and is in process of moving but Richard expressed his willingness to speak in regards to this issue. Richard Hatherill: email aunixguru@gmail.com, Phone # 315-516-0445 & 315-395-2300.

This Hardship is unique to the property not the neighborhood as a whole because it has always been used as a 4 unit/family prior to owners purchase. Changing the zoning from a 3 unit to 4 units will not change the neighborhood in anyway. Converting this from a 4 unit to 3 units would cause financial hardship on the owner.

Converting this property from 4 units to 3 units would initially cost an estimated \$49,500.00. These costs include but not limited to the following: \$19,000 to remove partition of

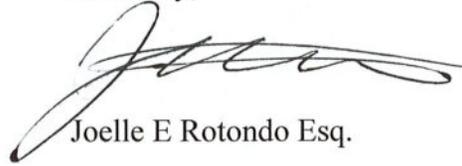
wall between apartments; \$23,500.00 to remove one of the kitchens; \$3,000.00 to repaint apartment; and \$4,000 for 2 months of lost rent during renovation. (For more details please see attached "Cost to Convert 541-543 Park Avenue into a 3 Unit"). In addition, converting property from 4units to 3 units would create a loss of rental income totaling \$9,600.00 per year. Therefore, converting this property from a 4 unit to 3 units would in fact cause financial hardship to the owner.

The proposed use will not alter the essential character of existing neighborhood because it has been used as a 4 unit prior to owners purchase in 2013.

There is no business being operated on this property by the owner or being requested to be operated. It is an income property for the owner and owner stands to lose a lot of money if use is not granted.

In conclusion, Hardship is not self-created based on the fact, Owner, Meghan Page purchased this property as and being used as a 4 unit/family being unaware that it was only zoned as a 3 family. Owner Spent \$162,000.00 in renovations to all 4 units. Therefore, a financial Hardship would be created if variance was not granted and owner would have to change property from 4 unit/family to 3 unit/family.

Sincerely,



Joelle E Rotondo Esq.

Cost to convert 541-543 Park Avenue back into a 3 Unit:

Initial Cost: \$49,500

Additional Yearly Cost: \$ 9,600

Initial Costs:

- **\$19,000** Total cost to remove partition wall between apartments
 - Remove and dispose of approximately 25 linear feet of partition wall (\$3,000)
 - Original cost of flooring (\$6,000)
 - Remove/dispose of/replace/repair flooring where wall would be removed (\$6,000)
 - Drywall and ceiling repair where wall would be removed (\$4,000)
- **\$23,500** Total cost to remove 1 kitchen
 - Initial cost of renovating the 2nd kitchen (\$2,500 appliances + \$8,000 original cost of custom cabinets + \$3,000 flooring = \$13,500)
 - Remove/cap plumbing and gas lines for 2nd kitchen (\$3,000)
 - Demolition and disposal of second kitchen (\$2,000)
 - Remove/replace flooring in 2nd kitchen (\$5,000)
- **\$3,000** cost to repaint apartment
- **\$4,000** lost rent during renovations (2 months)

TOTAL = \$49,500

Yearly Cost Thereafter:

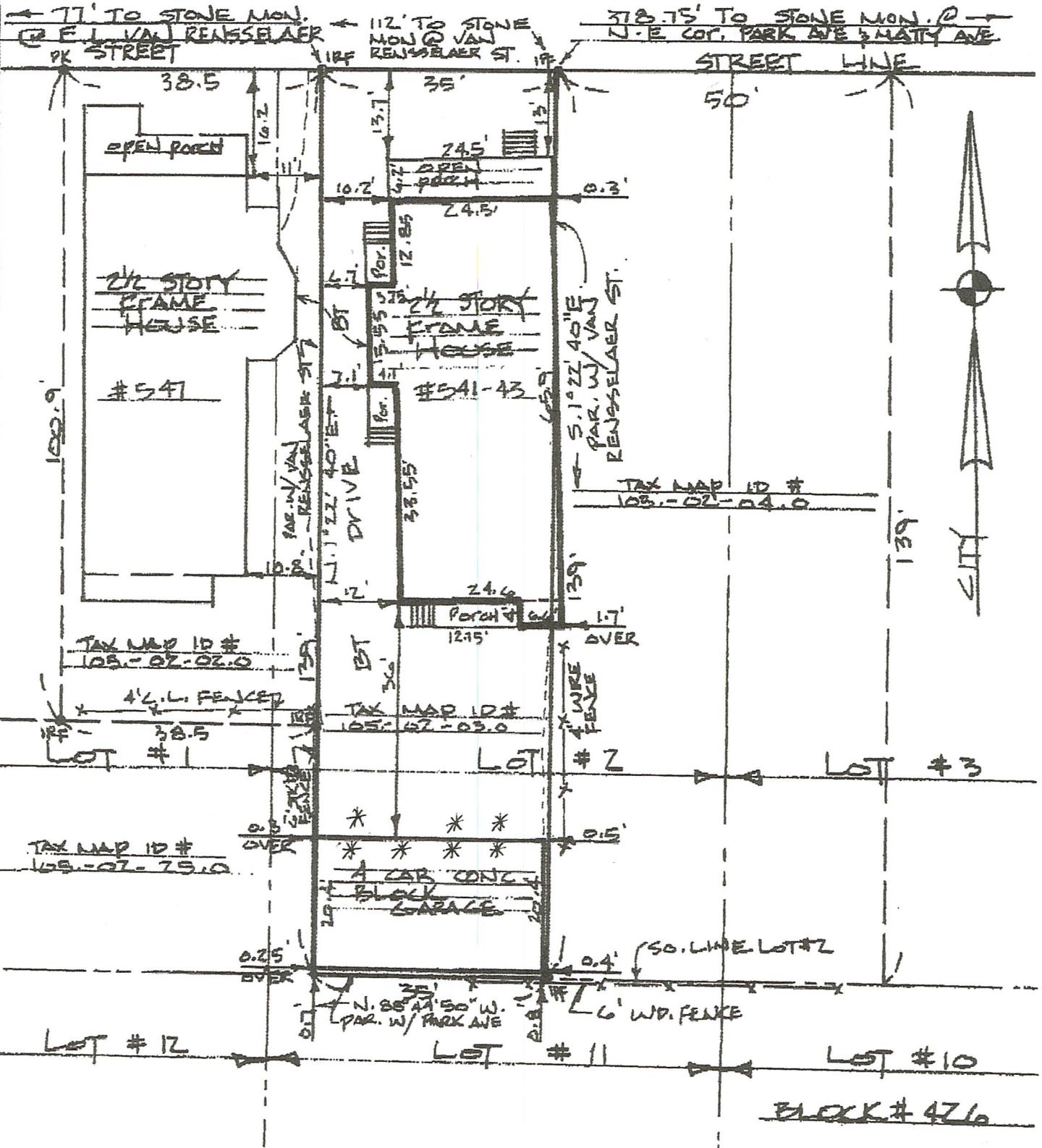
- **\$9,600 /year** (loss of rental income if converted to 3 unit)

PARK AVENUE

S. 88° 44' 50" E. → 150' OPEN

* = 7 PARKING SPACES

(4 Spaces inside garage / 3 spaces in front of garage)



Location Survey on part of Lot #2, Block #426, part of Farm Lot #280, City of Syracuse, County of Onondaga, and State of New York.
Known as #541-543 Park Avenue.

THE UNDERSIGNED SURVEYOR HEREBY CERTIFIES THAT THIS IS AN ACCURATE MAP OF AN ACTUAL SURVEY

MARTIN E. DAVIS
409 RIDGEWOOD DRIVE
LICENSED LAND SURVEYOR SYRACUSE, NEW YORK

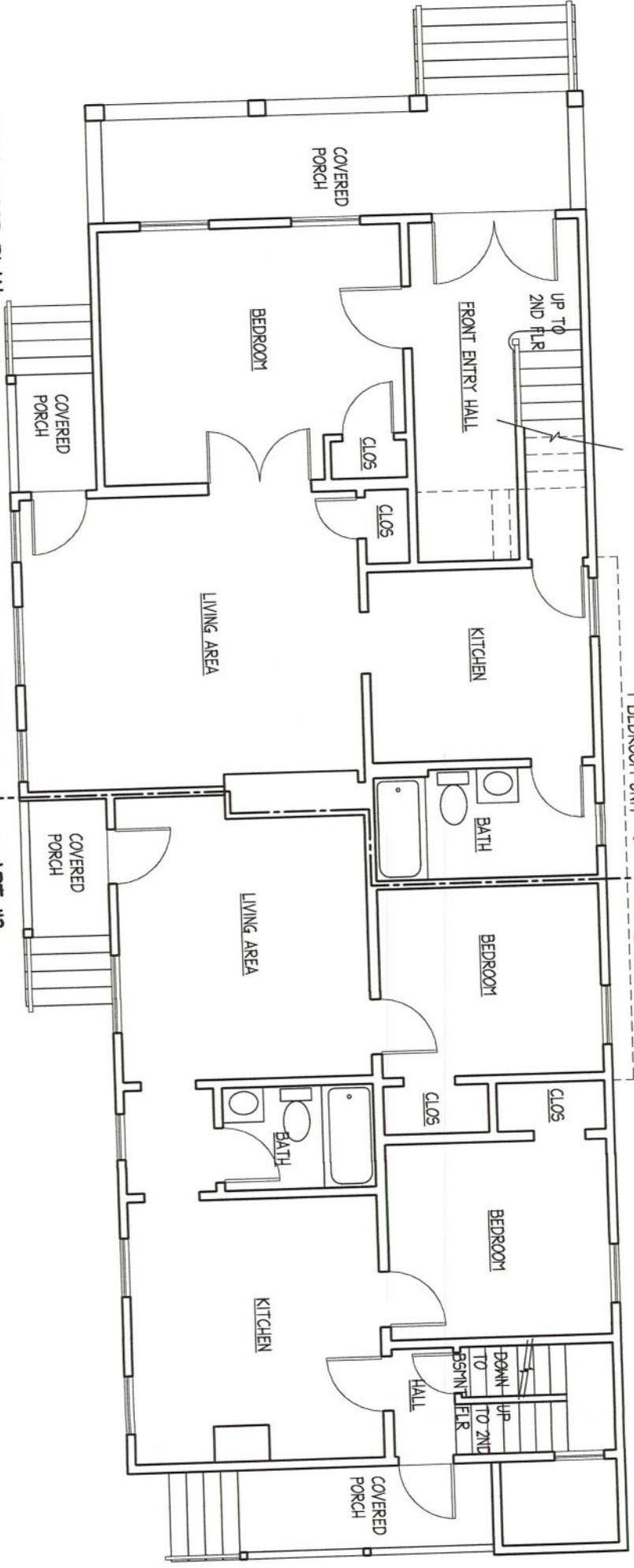
DRAWN BY:
MD
DATE:
06/15/13
SCALE:
1"=20'
REVISIONS:



MAIN FLOOR PLAN
SCALE : 3/16" = 1'-0"

APT #1 ← 1 BEDROOM UNIT
→ **APT #3** 2 BEDROOM UNIT

APT #1 ← 1 BEDROOM UNIT
→ **APT #3** 2 BEDROOM UNIT



GROUP 1 DESIGN
SHEILA WEED - ARCHITECT
317 S. COLLINGWOOD AVENUE
SYRACUSE, NY 13206
GROUPONEDESIGN.SHEILA@VERIZON.NET
315-434-1844

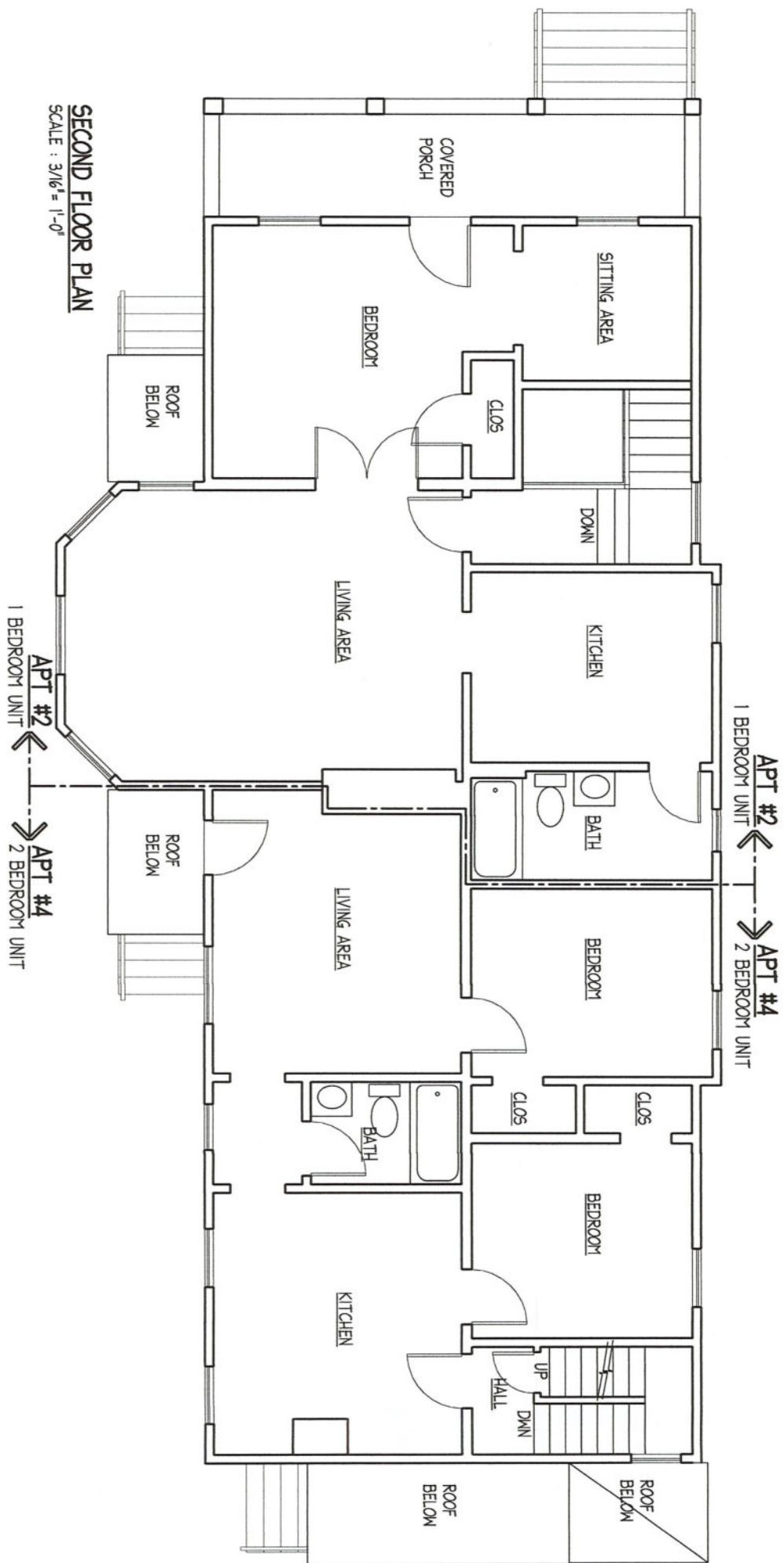
SEAL

APARTMENT BUILDING
541 PARK AVENUE/ SYRACUSE, NEW YORK

DRAWING
EXISTING MAIN FLOOR PLAN

SHEET	A-1
DATE	4/8/2019
SCALE	AS NOTED

SECOND FLOOR PLAN
SCALE : 3/16" = 1'-0"



GROUP 1 DESIGN
SHEILA WEED - ARCHITECT
317 S. COLLINGWOOD AVENUE
SYRACUSE, NY 13206
GROUPONEDSIGN.SHEILA@VERIZON.NET
315-434-1844

SEAL

APARTMENT BUILDING
541 PARK AVENUE/ SYRACUSE, NEW YORK

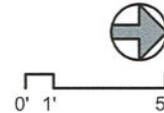
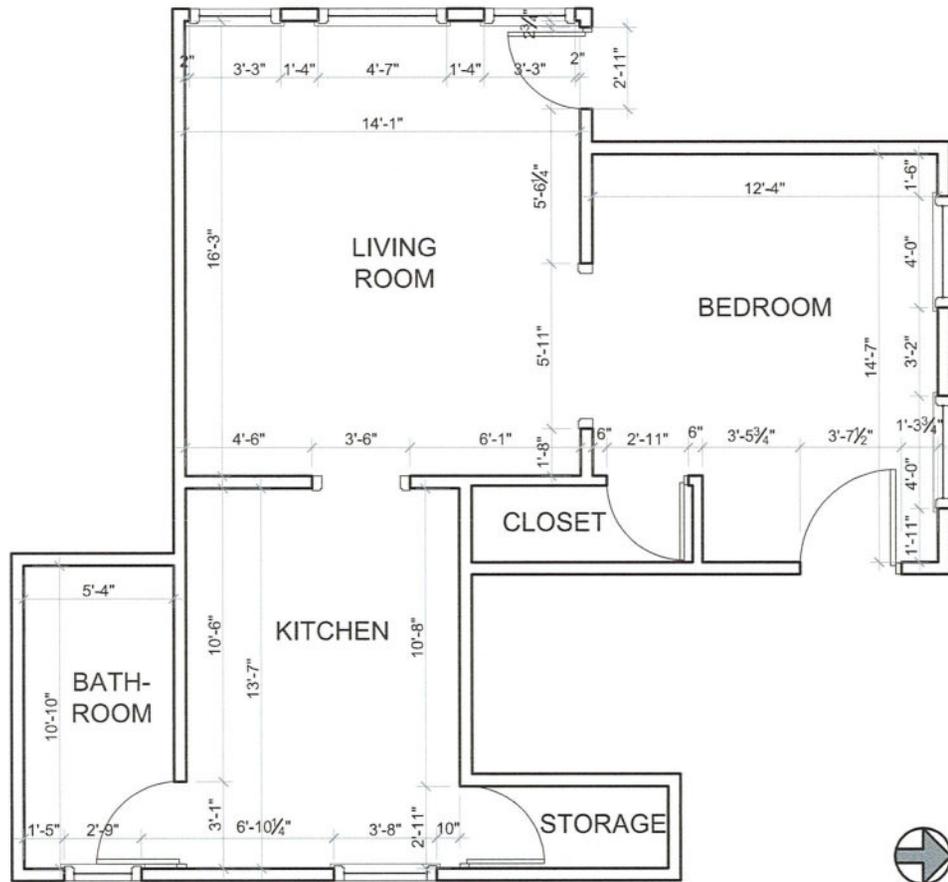
DRAWING
EXISTING SECOND FLOOR PLAN

SHEET	A-2
DATE	4/8/2019
SCALE	AS NOTED

FNAME

REVDATE

USER



General Notes

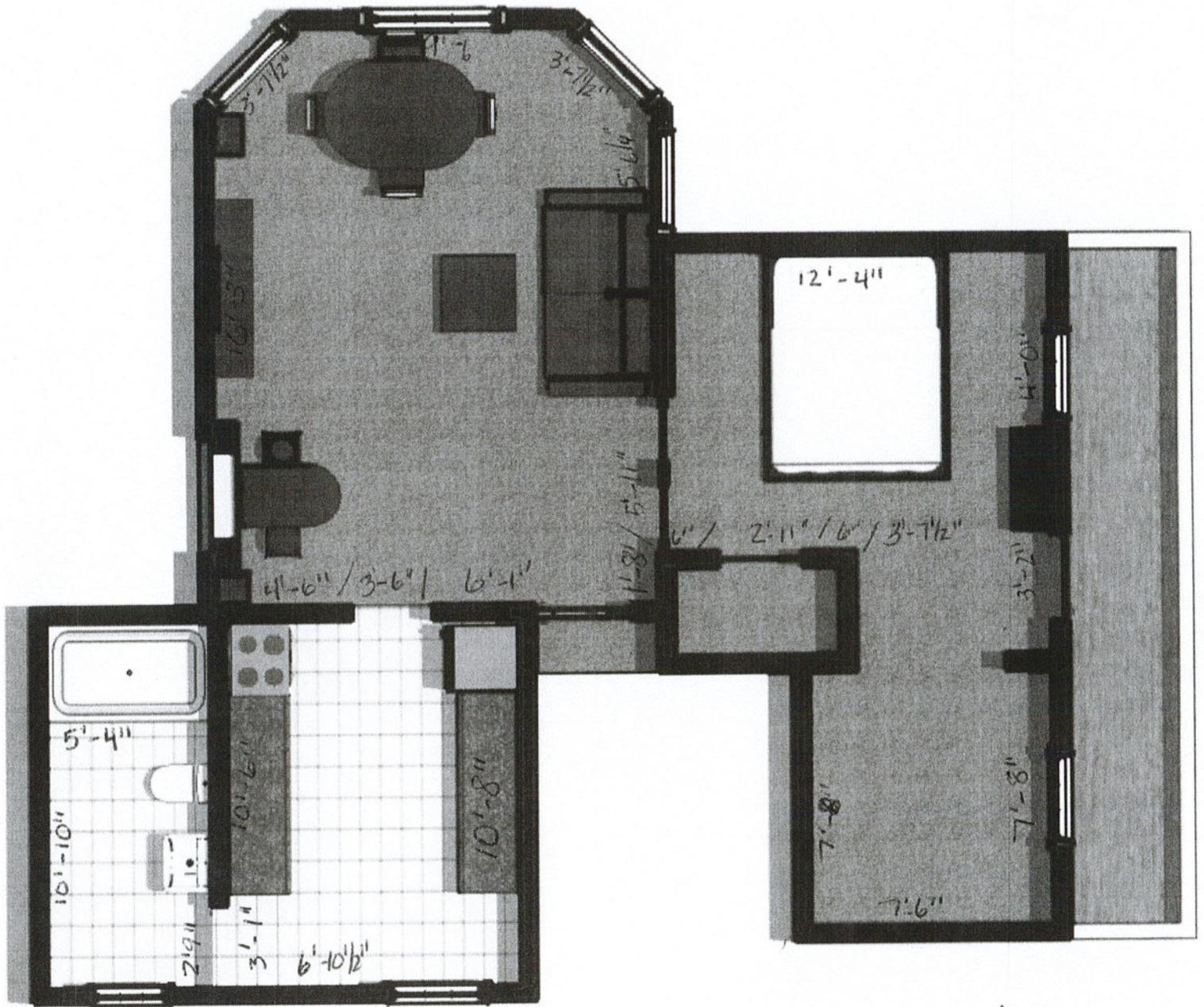
- All dimensions are approximate.
- All window and door dimensions are clear (including frame)
- Wall thickness assumed at 5 1/4"

No.	Revision/Issue	Date

Project Name and Address
541 PARK AVE

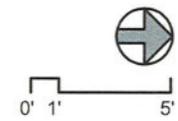
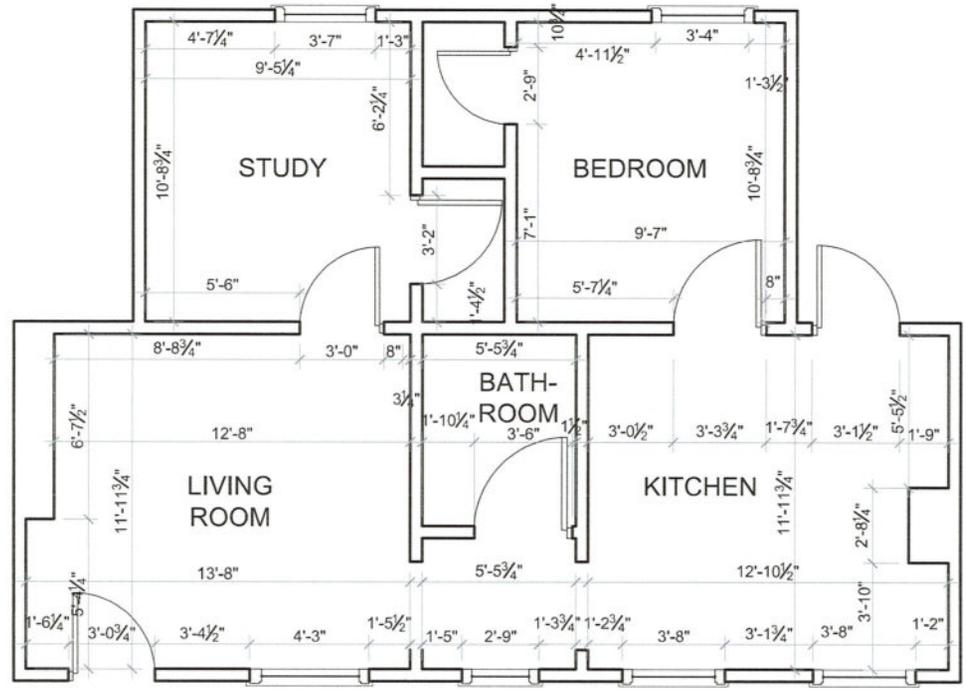
Project	Sheet #
APT #1	01
Date	
SEPT. 28, 2017	
Scale	
NTS	

Apt #1



APT #2

USER REVDATE RNAME



General Notes

- All dimensions are approximate.
- All window and door dimensions are clear (Including frame)
- Wall thickness assumed at 5 1/4"

No.	Revision/Issue	Date

Project Name and Address
541 PARK AVE

Project	Sheet #
APT #3	03
Date	
SEPT 28, 2017	
Scale	
NTS	

Apt #3



Renovated Kitchens including Cabinetry
Photo 1

DEC 2 1 2014

MARK D. B. SMITH



Renovated Kitchens including Cabinetry
Photo 2

PHOTO 1

PHOTO 2

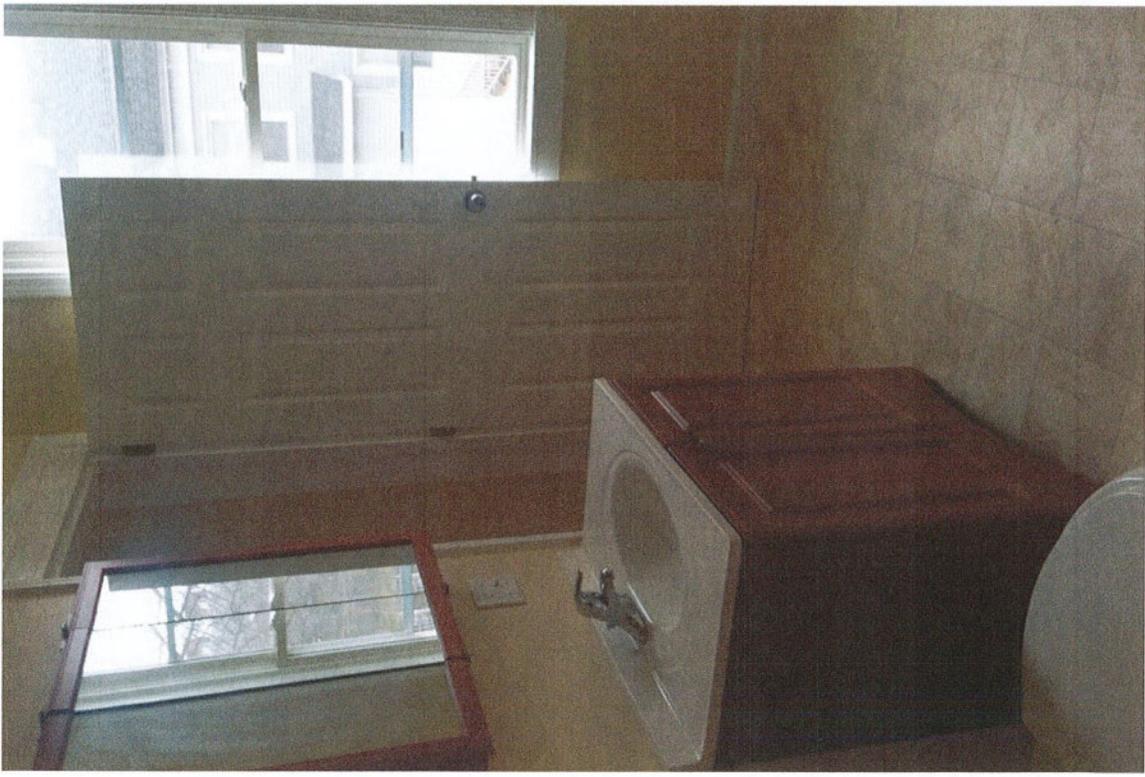
PHOTO 3

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All New Bathrooms Photo 1



All New Bathrooms

Photo 2

MAR 0 9 AM



Refinished Fireplace and New drywall and Paint throughout building



Replaced all doors



New Doors, Light Fixtures, Drywall and Paint



New Drywall and Paint in Rooms and Hallways

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