

**City of Syracuse Zoning Administration**

**Application for SPECIAL PERMIT Review by the Planning Commission**

City Hall Commons \* Room 211 \* 201 E. Washington Street \* Syracuse, NY 13202-1426 \* 315-448-8640

For Office Use: Filing Date:  Case Number:  Zoning District:

NEW SPECIAL PERMIT  MODIFICATION OF EXISTING SPECIAL PERMIT

**LIST ALL ADDRESSES INVOLVED IN YOUR PROJECT:**

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

Section:  Block:  Lot:   
Section:  Block:  Lot:   
Section:  Block:  Lot:

**This APPLICATION is for a:**

- Restaurant (this also includes uses such as Bars, Taverns, Coffee Shops, Night Clubs)
- Gasoline Service Station
- Car Wash Facility
- Care Home
- Parking Lot or Parking Garage
- Transitional Parking Area
- Offices of Religious and Educational Institutions
- Bed and Breakfast
- Other Special Permit Uses (describe)

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

The tenant wishes to remodel the interior of the property for a take-out food business.  
The menu will be ethnic foods of the north African region. The service will be hot food, take-out without any sit-down facilities.  
The building is a 19th century, two story wood framed house, presently having three apartments. It was previously a commercial use, and was converted to full residential. One apartment will be converted to the take-out store. The property & the side adjacent properties are Business BA, and the rear property is Residential RA.  
The customer area is less than 700 SF, and does not require any off-street parking. Two spaces are required for the two remaining apartments, which will be provided on site.

**OWNER INFORMATION:**

Name(s):   
Mailing Address:   
Zip:  Daytime phone:  Home phone:   
E-mail:

**APPLICANT INFORMATION:**

(Copy of contract to purchase must be included with application)

Contract Purchaser(s)  **Tenant**  Co-Applicant  Other (please state):

Name(s):

Mailing Address:

Zip:  Home phone:  Day Phone:

E-mail:

**REPRESENTATIVE INFORMATION:**

(Only if involved in this application)

Attorney  **Architect**  Contractor  Other

Name(s):

Mailing Address:

Zip:  Telephone:  E-mail:

**DESCRIPTION OF OPERATION:**

Days of week open:

Hours of operation:

Maximum number of employees on premises at one time:

Number of off-street parking available (site plan required to indicate location):

Other uses currently on the property: FIRST FLOOR:

SECOND FLOOR  OTHER FLOORS:

Indicate types and uses of other structures on the property if any (i.e. garage, storage building, etc.):

**SIGNAGE INFORMATION:**

Size and location of all existing AND proposed signage (use additional sheet if necessary)

A sign plan is required, see attachment (Wall, Ground, Projecting, Window)

Size	<input type="text" value="12'-0 x 2'-0"/>	Location	<input type="text" value="front of building"/>	Type	<input type="text" value="wall sign"/>
Size	<input type="text"/>	Location	<input type="text" value="to existing"/>	Type	<input type="text"/>
Size	<input type="text"/>	Location	<input type="text"/>	Type	<input type="text"/>

**SPECIAL PERMIT FUNCTIONS:** (Check all that apply)

- Dining room  Bar Service  Drive-thru
- Entertainment  Stage  DJ Booth
- Light Duty auto repair  Heavy Duty auto repair
- Car Wash Facility  New Auto Sales  Used Auto Sales

Has owner obtained or applied for a Certificate of Use:  Yes  No

**DECLARATION:**

I understand that false statements made herein are punishable as a Class A Misdemeanor, pursuant to section 210.45 of the Penal Law of the State of New York. I declare that, subject to the penalties of perjury, any statements made on this application and any attachments are the truth and to the best of my knowledge correct.

I also understand that any false statements and/or attachments presented knowingly in connection with this application will be considered null and void.

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

11-09-20  
Date

Hassan Abdulkadir muse  
**PRINT NAME OF PROPERTY OWNER**

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

**FOR STAFF USE ONLY**

\*\*\*\*\*

**REFERRAL NEEDED**

ONONDAGA COUNTY PLANNING BOARD

SYRACUSE LANDMARK PRESERVATION BOARD (This project is located within \_\_\_\_\_ Historic District; is listed individually in the National Register of Historic Places; is Eligible for inclusion in the National Register of Historic Places; or is architecturally significant).

OTHER CITY/COUNTY/STATE AGENCY OR DEPARTMENT(S) \_\_\_\_\_

.....

**617.20**  
**Appendix B**  
**Short Environmental Assessment Form**

**Instructions for Completing**

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

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

<b>Part 1 - Project and Sponsor Information</b>			
Name of Action or Project: Renovations - 1011 Park Street; Syracuse, NY			
Project Location (describe, and attach a location map): 1011 Park Street, middle of block between Division Street & Mary Street, Syracuse, NY			
Brief Description of Proposed Action: Majority of work is interior renovations. New ADA ramp will be constructed next to the public sidewalk.			
Name of Applicant or Sponsor: <i>Hassan Muse</i>		Telephone: <i>315 414 7159</i>	
		E-Mail: <i>hassanamuse@yahoo.com</i>	
Address: <i>1224 park st</i>			
City/PO: <i>Syracuse</i>		State: <i>NY</i>	Zip Code: <i>13208</i>
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 governmental Agency? If Yes, list agency(s) name and permit or approval: Building permit from City of Syracuse, NY			YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		0.1 acres	
b. Total acreage to be physically disturbed?		0.01 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		0.1 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<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?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<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?	NO	YES	
	<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: _____	NO	YES	
	<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: _____	NO	YES	
	<input type="checkbox"/> NO <input type="checkbox"/> YES		

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)? If Yes, explain purpose and size: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor name: <u>Hassan Muse</u> Date: <u>11-17-2020</u>		
Signature: <u>Hassan Muse</u>		

**Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2.** Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

**Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3.** For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

\_\_\_\_\_  
Name of Lead Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name of Responsible Officer in Lead Agency

\_\_\_\_\_  
Title of Responsible Officer

\_\_\_\_\_  
Signature of Responsible Officer in Lead Agency

\_\_\_\_\_  
Signature of Preparer (if different from Responsible Officer)

**PRINT**

TAX ID: 009-16-29.0, 1011 PARK STREET  
 OWNER: SALAT MUSE  
 TENANT: SAME  
 DESIGNER OF RECORD: PITCHER ARCHITECT PLLC  
 EXISTING BUILDING PERMIT: NONE

NUMBER OF STORIES: 2 ABOVE GRADE, 1 BELOW GRADE  
 GROSS SQUARE FEET OF BUILDING: 2484 GSF  
 BUILDING GROSS AREA: MATERIALS OF CONSTRUCTION  
 BASEMENT 1480 GSF STONE FOUNDATION, CONC FLOOR  
 1ST FLOOR 1480 GSF WOOD FRAME FLOOR AND WALLS  
 2ND FLOOR 1205 GSF WOOD FRAME FLOOR & WALLS  
 ATTIC 1205 GSF WOOD RAFTERS

BUILDING HEIGHT ABOVE GRADE: 25 FEET  
 ANY OCCUPIED ROOF? NO

TYPE OF CONST.	EXTERIOR WALLS		INTR. B. WALLS	STRUCT'L. FRAME	VERT'L. SHAFTS	ROOF CONST.
	BEAR'G	NON-BR				
5B	O-HR	O-HR	O-HR	N.A.	N.A.	O-HR

EXISTING OCCUPANCIES  
 GROUP A-n ASSEMBLY  
 GROUP B- BUSINESS  
 GROUP M - MERCANTILE  
 GROUP R - RESIDENTIAL

CHANGE TO NEW OCCUPANCIES  
 GROUP A-n ASSEMBLY  
 GROUP B- BUSINESS  
 GROUP M - MERCANTILE  
 GROUP R - RESIDENTIAL

ELEVATOR CERTIFICATION  
 NONE  
 PHASE I RECALL ONLY  
 PHASE I & II RECALL

CURRENTLY CERTIFIED  
 NOT CURRENT, UPGRADE IN THIS WORK

AUTOMATIC SPRINKLERS  
 EXISTING SYSTEM TYPE: (WET MANUAL)  
 NO SPRINKLERS  
 THROUGH OUT BUILDING  
 ONLY PARTIAL COVERAGE  
 ADD NEW SYSTEM

AUXILIARY SYSTEM:  
 CHEMICAL, KITCHEN HOOD

FIRE ALARM SYSTEMS  
 EXISTING FIRE SYSTEM  
 LACKS FIRE SYSTEM  
 ADD MANUAL ALARM  
 ADD CENTRAL ALARM PANEL

EXISTING CARBON-MONOXIDE  
 LACKS CARBON-MONOXIDE  
 ADD SINGLE/MULTI-STATION UNITS  
 ADD TO CENTRAL ALARM PANEL

STANDPIPES  
 NONE  
 EXISTING SYSTEM

FIRE ALARM SYSTEM CLASSIFICATION (NFPA 12)  
 HOUSE HOLD FIRE ALARM: A SYSTEM IN A HOUSEHOLD.  
 PROTECTED PREMISES (LOCAL) FIRE ALARM SYSTEM: SOUNDS LOCAL ALARM WHEN ACTIVATED BY MANUAL ALARM BOXES, SPRINKLER WATER FLOW, CARBON DIOXIDE DISCHARGE DETECTION OF SMOKE OR HEAT.  
 AUXILIARY FIRE ALARM SYSTEM: CONNECTED TO PUBLIC FIRE ALARM COMMUNICATION CENTER. SAME SYSTEM & EQUIPMENT AS CITY FIRE ALARM BOXES.  
 LOCAL ENERGY  SHUNT  PARALLEL TELEPHONE  
 REMOTE SUPERVISING STATION FIRE ALARM SYSTEM: TRANSMITS ALARM SUPERVISORY, AND TROUBLE SIGNALS FROM ONE OR MORE PROPERTIES TO REMOTE LOCATION WHERE ACTION IS TAKEN.  
 PROPRIETARY SUPERVISING STATION FIRE ALARM SYSTEM: FOR SINGLE OWNERSHIP OF MULTIPLE PROPERTIES, CONSTANTLY ATTENDED LOCATION, RECEIVING SIGNALS FROM ADJACENT AND/OR REMOTE LOCATIONS.  
 CENTRAL STATION FIRE ALARM SYSTEM: SYSTEM OR GROUP OF SYSTEMS WHICH TRANSMIT TO A CENTRAL STATION WHICH RECORDS, MAINTAINS, AND IS SUPERVISED BY OPERATORS.  
 MUNICIPAL FIRE ALARM SYSTEM: TRANSMITS STREET ALARM LOCATIONS TO CENTRAL CONTROL CENTER USING WIRING SYSTEM OTHER THAN PUBLIC TELEPHONES.

SPECIAL EQUIPMENT  
 COMM. KITCHEN HOOD, W/ CHEMICAL FIRE SUPPRESSION

SMOKE CONTROL  
 YES  NO

STRUCTURAL RISK CATEGORY  
 ONE: LOW HAZARD TO HUMAN LIFE IF FAILURE: AGRIC. & STORAGE  
 TWO: BUILDINGS NOT ONE, THREE OR FOUR  
 THREE: GROUP E ) 250; GROUP A ) 300; GROUP I; G.T. 5000 PEOPLE  
 FOUR: ESSENTIAL FACILITIES: HOSPITALS, NURSING, FIRE, POLICE, ETC.

SEISMIC DESIGN  
 'A'  'B'  'C'  'D'  'E'

FLOOD PLAIN CLASSIFICATION  
 NOT IN  PLAIN CLASS: ?????

STRUCTURAL LOADING OF FLOORS  
 FIRST BUSINESS, 80 PSF, RESIDENCE 40 PSF  
 SECOND 40 PSF  
 THIRD  
 FOURTH  
 FIFTH

WORK AREA DESCRIPTION  
 AS SHOWN ON DRAWINGS  
 FLOORS FIRST FLOOR FRONT  
 FOR THESE:  
 MAX FEET, EXIT COMMON TRAVEL: N.A.  
 MAX FEET, EXIT TRAVEL DISTANCE: 40 FT  
 REQUIRED EXITS PER FLOOR: ONE EXIT  
 EXISTING OCCUPANCIES: SEE TO LEFT  
 PROPOSED OCCUPANCIES: SEE TO LEFT  
 ACTUAL EXITS PROVIDED: ONE EXIT  
 CORRIDOR FIRE RATINGS: NONE  
 NOT RATED  1-HR.  2-HR.  3-HR.  
 SEPARATED MIXED USE GROUPS  
 'A'  'B'  'E'  'M'  'R'

LOCALITY CODE DESIGN REQUIREMENTS

GROUND SNOW P.S.F.	WIND SPEED M.P.H.	SEISMIC DESIGN	WEATHER-ING	FROST DEPTH	TERMITE	DECAY
50	115	A,B,C	SEVERE	4'-0"	SLIGHT	NONE

DESIGN TEMP	ICE SHIELD	FLOOD HAZARD
SEE ENERGY	YES	NOT FLOOD

ENERGY CODE REQUIREMENTS - COMMERCIAL

COMPLIANCE METHOD: N.Y.S. ENERGY CODE 2020, CHAPTER RE-4  
 TABLE C-402.3.1 LOCATION: ONONDAGA CO., BY TABLE 302.1: 'ZONE 5'

CEILING R-VAL	WOOD WALL R-VAL	MASS WALL	FLOOR R-VAL	BSMT WALL R-VALUE	SLAB R-VAL	CRAWL WALL
R-38	20 OR 13+3.8	R9 C.I.	30	7.8 C.I.	R10, 2FT	

TABLE C-402.4  
 GLAZING

TYPE	U-FACT.	SHGC
FIXED	U 0.38	0.40
OPER.	U 0.45	
DOORS	U 0.71	
SKYLT.	0.50	

CERTIFICATION:  
 THE ARCHITECT CERTIFIES TO THE BEST OF HIS BELIEF, KNOWLEDGE AND UNDERSTANDING THAT THESE DRAWINGS CONFORM TO THE REQUIREMENTS OF THE N.Y.S. ENERGY CODE 2020.

ZONING CODE REVIEW  
 CURRENT ZONING CLASSIFICATION: BUSINESS "BA"  
 ADJACENT PARCELS: SIDE, "BA"; REAR, "RA"  
 PARKING SCREENING REQUIRED:  YES  NO  
 OFF-STREET PARKING:  ONE PER DWELLING  "B" = 100 SF = ZERO  
 REQUIRED SETBACKS: FRONT 0 FT SIDE 0 FT REAR 4 FT-RA SIDE YARD

CURRENT USE: RESIDENTIAL  
 PROPOSED USE: BUSINESS & RESIDENTIAL  
 LOT: SIZE 3453 SF MAX. STRUCTURES 100% MAX. PAVEMENT 100%  
 ACTUAL: 1180/3453 = 52% ACTUAL: 186 SF = 22%

BUILDING AREAS  
 FIRST FLOOR:  
 SPECIAL PERMIT: 100 NSF (CUSTOMERS 80 NSF)  
 APARTMENT 180 NSF 1480 NSF  
 GARAGE 300 GSF  
 GROUND COVER 1,180 GSF  
 SECOND FLOOR:  
 APARTMENT 1,205 GSF

EXISTING VARIANCES:  
  
 EXISTING SPECIAL PERMITS:  
 SP18-24 = OLD BAR  
 SINCE THEN, FIRST FLOOR IS TWO APARTMENTS & 2ND FLR 1 APT.

BUILDING CODES  
 CODE REQUIREMENTS  
 APPLICABLE CODES  
 NYS BUILDING CODE 2020  
 NYS EXISTING BUILDING CODE 2020  
 NYS RESIDENTIAL CODE 2020  
 NYS ENERGY CODE 2020  
 SYRACUSE PROPERTY CONSERVATION CODE

NYS EXISTING BUILDING CODE 2020  
 COMPLIANCE METHOD: BY WORK AREA  
 REPAIRS, EB-CHAPTER 4  
 ALTERATIONS 1, EB-CHAPTER 1  
 ALTERATIONS 2, EB-CHAPTER 8  
 ALTERATIONS 3, EB-CHAPTER 9  
 CHANGE OF OCCUPANCY, EB-CHAPTER 10  
 ADDITIONS, EB-CHAPTER 11

124 Feigel Avenue  
 Syracuse, New York 13203

**PITCHER** architect PLLC

315.474.1219



**SPECIAL PERMIT**  
**FAST FOOD TAKE-OUT**  
**1011 PARK STREET**  
**SYRACUSE, NY**

TABLE OF CONTENTS

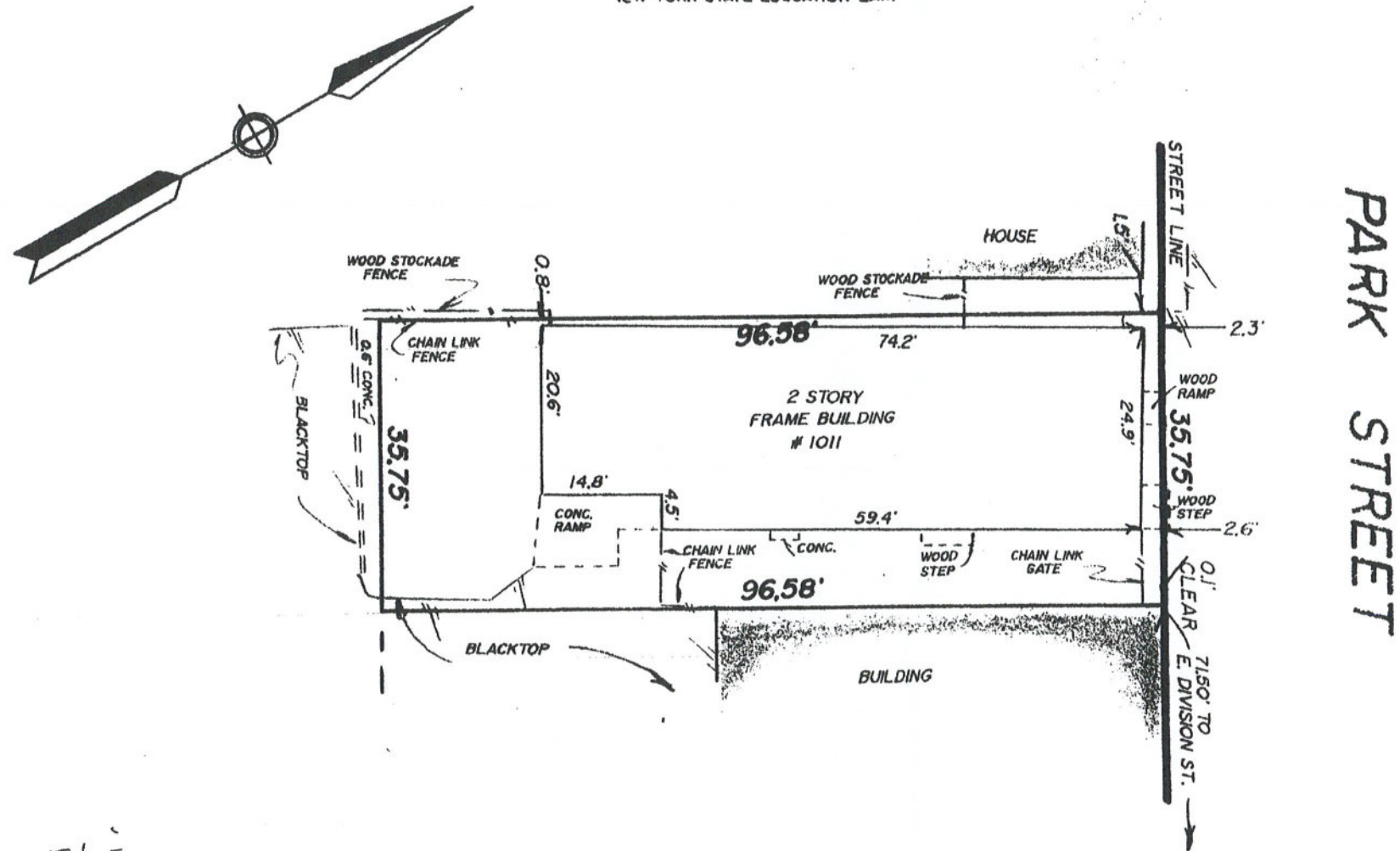
NO.	TITLE
A-0	TITLE SHEET & NOTES
L-1	PROPERTY SURVEY
L-2	SITE PLAN
A-1	FIRST FLOOR PLAN
A-2	SECOND FLOOR PLAN
A-3	ELEVATIONS
F-1	(FIRE PLANS - TO BE ISSUED)
F-2	(FIRE SCHEDULES - TO BE ISSUED)

FILE: 1220-21NF.mxd (10/1/20)



W05273

ONLY COPIES OF THIS SURVEY MADE FROM THE ORIGINAL SURVEY, WITH THE EMBOSSED SEAL, AND SIGNED IN RED INK ARE TRUE AND VALID COPIES.  
 UNAUTHORIZED ALTERATIONS OR ADDITIONS TO A SURVEY MAP BEARING A LICENSED LAND SURVEYOR'S SEAL IS A VIOLATION OF SECTION 7209, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW.



PARK STREET

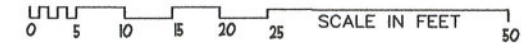
Julie  
451-3333

**LEHR**  
 LAND SURVEYORS  
  
 LIVERPOOL, NEW YORK

LICENSED LAND SURVEYOR  
 I HEREBY CERTIFY THAT THIS IS AN ACCURATE MAP MADE FROM AN ACTUAL SURVEY.  
  
 DOUGLAS S. LEHR  
 LICENSED LAND SURVEYOR  
 NYSLS 40223

LOCATION SURVEY LOT NO.4, BLOCKS NO.119 AND NO.120 OF THE SALINA VILLAGE PLOT AMENDED, FILED MAY 11, 1875.  
 KNOWN AS NO.1011 PARK STREET, CITY OF SYRACUSE, COUNTY OF ONONDAGA, NEW YORK.

DRAWN BY: SLL	SCALE: 1" = 20'	DATE: 4 JUNE 1996
REVISIONS:		DRAWING NO. 96-05-90



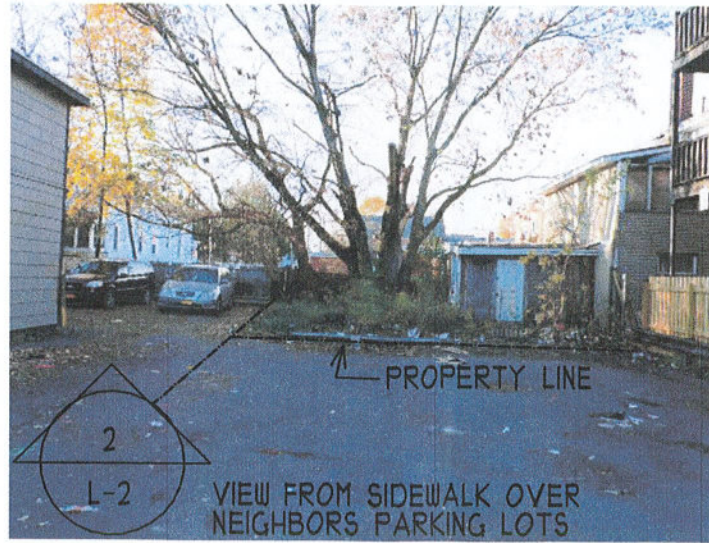
REGISTERED ARCHITECT  
 WILLIAM J. PITCHER  
 STATE OF NEW YORK  
 No modifications shall be made to these drawings except as provided by NYS Education Law.

JOB#: 220-3T  
 DATE: 11-3-2020

124 Feigel Avenue  
 Syracuse, N.Y. 13203  
  
 PITCHER architect PLLC  
 315.474.1219

SPECIAL PERMIT  
 FAST FOOD TAKE-OUT  
 1011 PARK STREET  
 SYRACUSE, NY  
 ©Pitcher Architect plc, 2019. All rights reserved. Drawings are instruments of service and remain the property of the Architect.

PROPERTY SURVEY  
 L-1



VIEW FROM SIDEWALK OVER NEIGHBORS PARKING LOTS

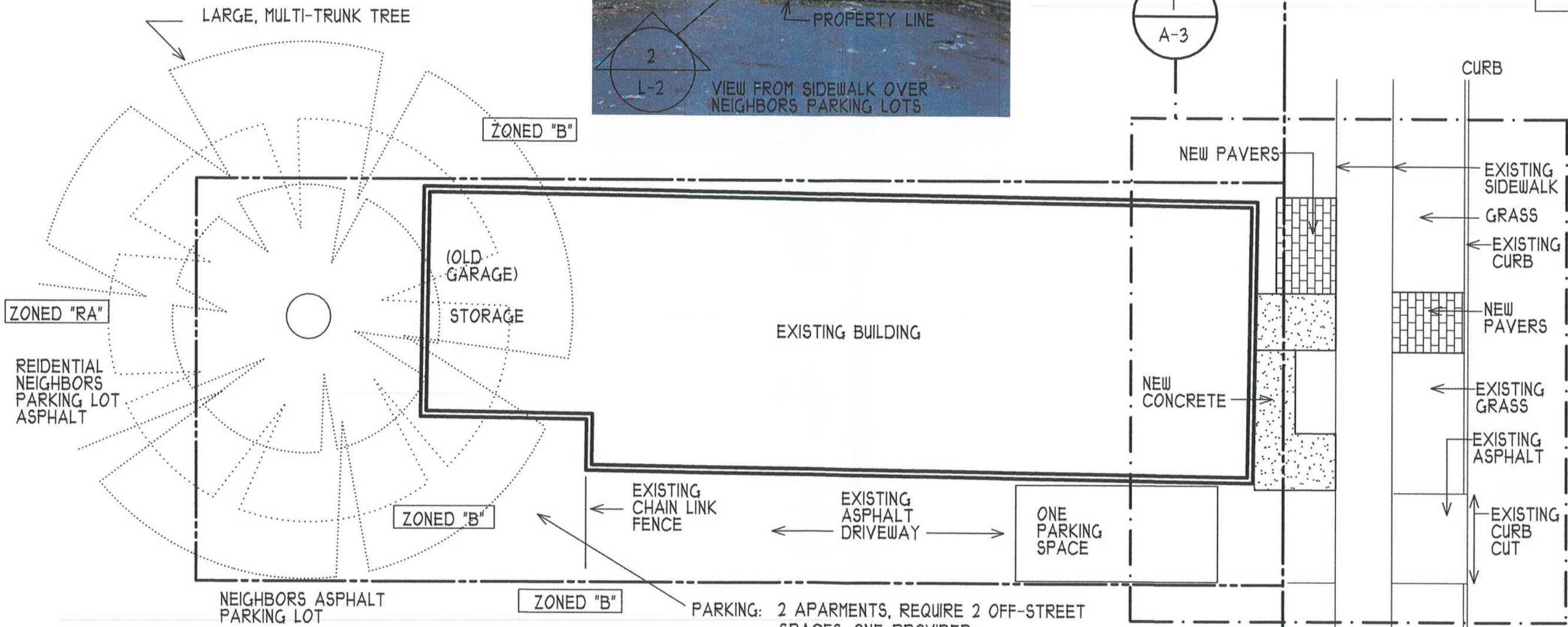


JOB#: 220-31  
DATE: 11-3-2020

124 Feigel Avenue  
Syracuse, N.Y. 13203  
PITCHER architect PLLC  
315.474.1219

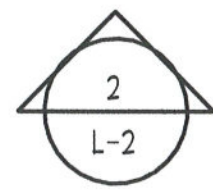
SPECIAL PERMIT  
FAST FOOD - TAKE OUT  
1011 PARK STREET  
SYRACUSE, NY  
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SITE PLAN & NOTES  
L-2

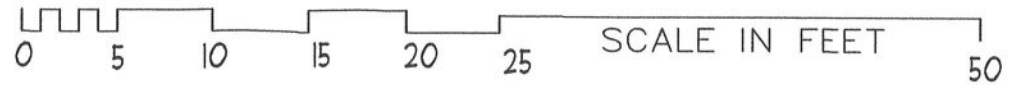


PARKING: 2 APARTMENTS, REQUIRE 2 OFF-STREET SPACES, ONE PROVIDED.  
BEYOND CHAIN LINK FENCE IS "YARD" -- REQUEST WAIVER FROM PLANTING/SCREENING BETWEEN THIS PROPERTY AND EXISTING PARKING LOTS OF NEIGHBORING PROPERTIES THAT ARE NOT SCREENED TO THIS PROPERTY.

EIGHT OF WAY



1 SITE PLAN  
L-3 1/10" = 1'-0"

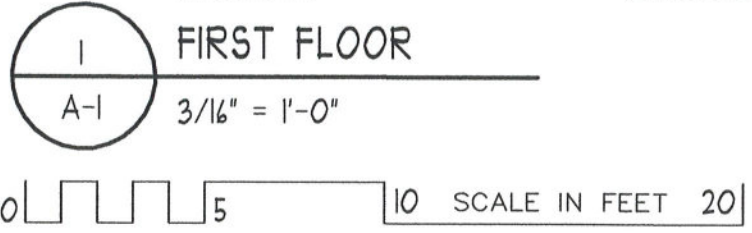
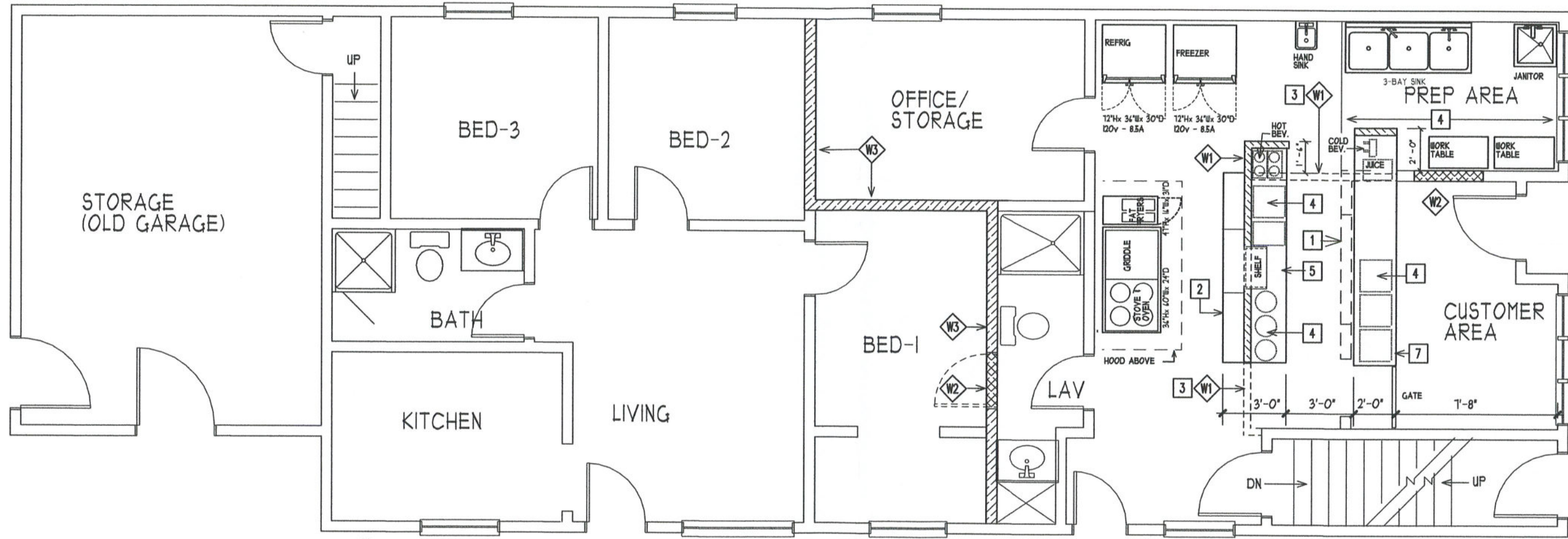
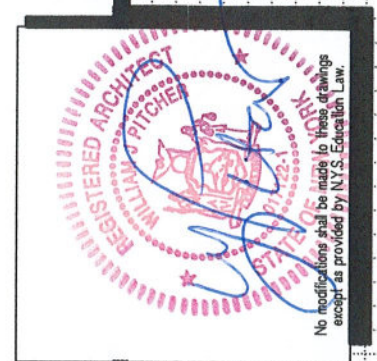


**WALL TYPES**

SEE SHEET 1/N-1 FOR FULL SPECIFICATIONS

- W1 NEW WALL: 2X4 16" O.C. 1/2 DRYWALL EACH SIDE FLOOR TO CEILING
- W2 IN-FILL DOOR OPENING, 2X4 STUDS 16" O.C.
- W3 NEW 2-HOUR WALL: NYS 14-14 REMOVE EXISTING WALL FINISHES (DRYWALL OR PLASTER). INSTALL 2 LAYERS 5/8" TYPE X DRYWALL EACH SIDE.
- C1 NEW 2-HOUR CEILING: REMOVE SUSPENDED CEILING AND ALL MISCELLANEOUS MATERIALS BACK TO WOOD BEAD BOARD CEILING, INSTALL NEW 2-HOUR DRYWALL

- 1 DEMOLISH EXISTING WALL, FROM FLOOR TO CEILING
- 2 COUNTER TOP WITH OPEN SHELVES ABOVE AND BELOW
- 3 NEW WOOD STUD & DRYWALL SOFFIT, SUSPENDED FROM CEILING, MIN 6'-8" CLEAR UNDER BOTTOM EDGE.
- 4 HOT & COLD FOOD HOLDING CASES ON COUNTER TOPS
- 5 COUNTER TOP WITH REFRIGERATED CASES BELOW
- 6 DEMOLISH PEEL-STICK FLOOR TILES AND PLYWOOD. FLASH-PATCH FLOOR TO SMOOTH, INSTALL 12"X12"X1/8" COMMERCIAL VINYL TILE FLOORING.
- 7 NEW KITCHEN BASE CABINET, OR PLYWOOD UNITS, NEW PLASTIC LAMINATE COUNTER TOPS

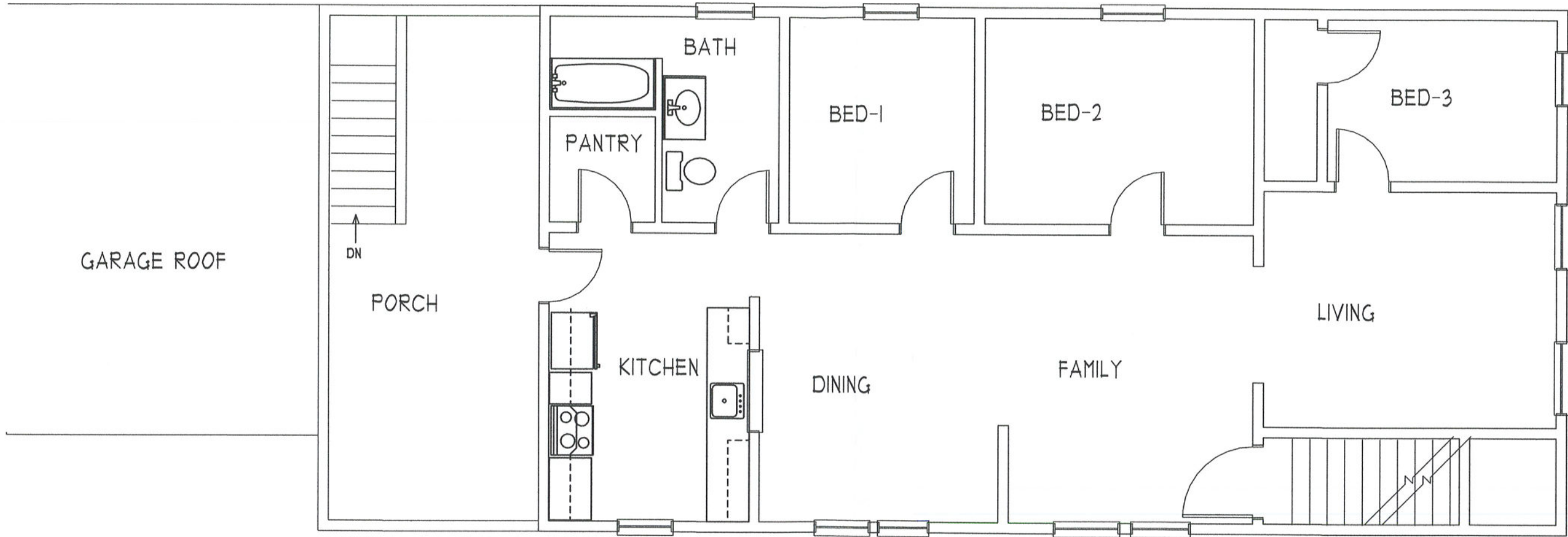
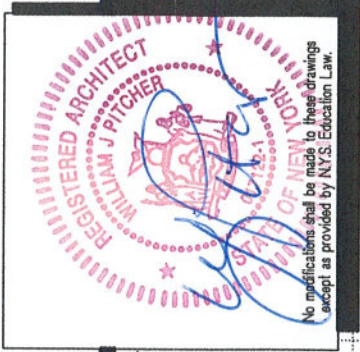


JOB#: 220-37  
DATE: 11-2-2020

124 Feigel Avenue  
Syracuse, N.Y. 13203  
**PITCHER architect** PLLC  
315.474.1219

SPECIAL PERMIT MOD.  
FAST FOOD TAKE-OUT  
1011 PARK ST  
SYRACUSE, NY  
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FIRST FLOOR PLAN & NOTES  
A-1



1 SECOND FLOOR APT  
A-2 3/16" = 1'-0"

0 5 10 SCALE IN FEET 20

NO WORK PROPOSED ON SECOND FLOOR

JOB#: 220-37

124 Feigel Avenue  
Syracuse, N.Y. 13203

PITCHER architect PLLC

315.474.1219

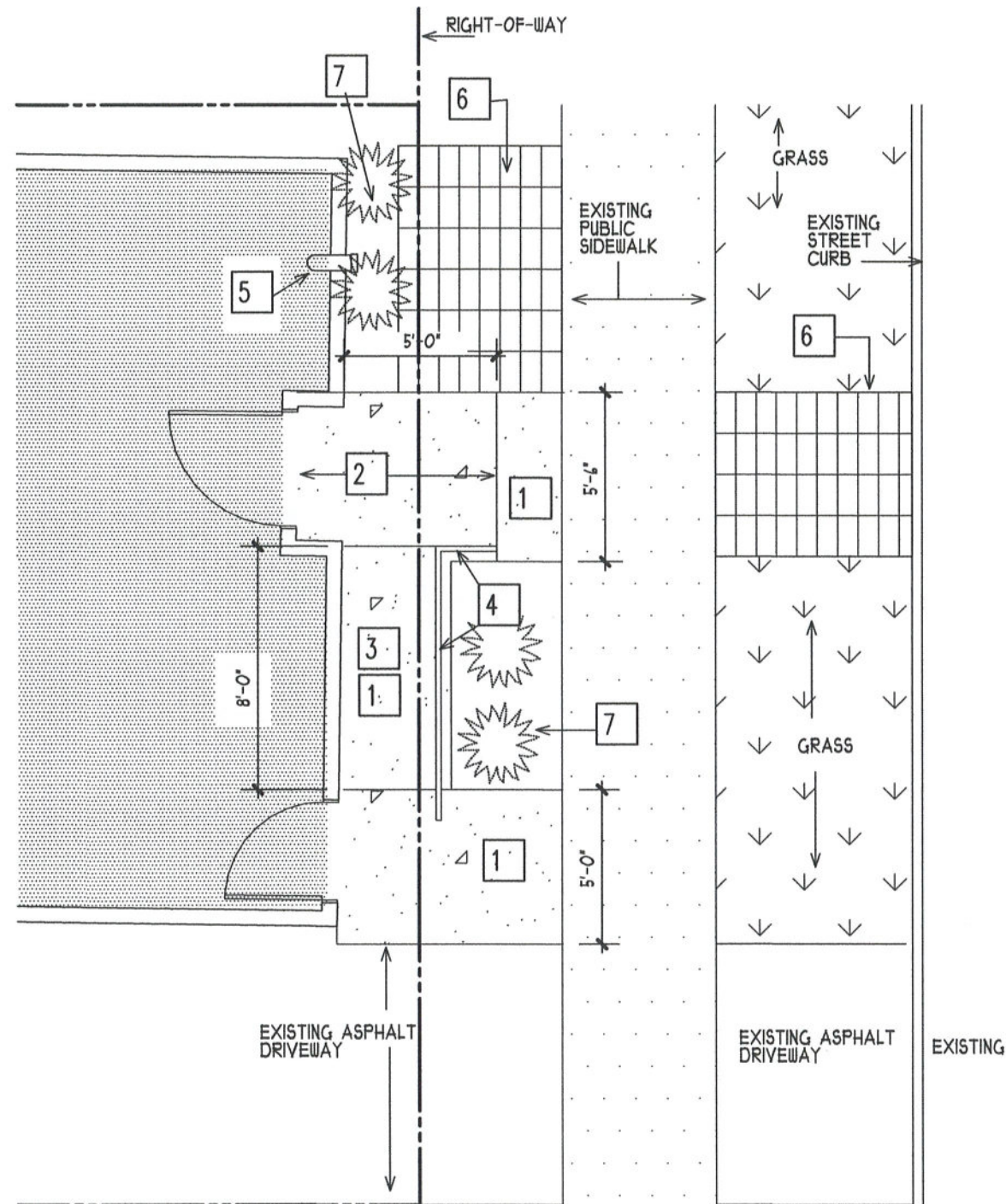
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SECOND FLOOR PLAN

A-2

- 1 NEW CONCRETE WALK, 4" T, 3500 PSI CONCRETE, 4% TO 1% AIR ENTRAINMENT
- 2 NEW LANDING, FLUSH WITH DOOR THRESHOLD, SLOPE 1/4" PER FOOT AWAY FROM THRESHOLD.
- 3 NEW RAMP, MIN 3/4" CLEAR BETWEEN WALL AND RAILING, 8'H +/-
- 4 NEW PIPE RAILING, 1-1/2"DIA., 3/4" H WITH CENTER RAIL, AND 4"H METAL CURB BETWEEN VERTICAL POSTS.
- 5 NEW GREASE TRAP IN BASEMENT. INSTALL ENCLOSED 4" DIA PVC PIPE FROM TRAP TO EXTERIOR WALL OF FIRST FLOOR. PROVIDE REMOVABLE CAP FOR MAINTENANCE ACCESS.
- 6 GRAY CONCRETE PATIO PAVERS, 8"X16"X1"
- 7 CREEPING JUNIPER PLANTS



1 SITE PLAN  
A-3 3/16" = 1'-0"

0 5 10 SCALE IN FEET 20



SPECIAL PERMIT SIGNAGE: SIGN "A"  
 C-IV-2-8.1 SIGNS PER C-VI. C-VI-3-A.2 BUSINESS SIGN C-VI-15-D: 2 SF PER 1 LF  
 PERMITTED: 24.9' X 2' = 49.8 SF MAX.  
 PROPOSED: 2' X 12' = 24 SF  
 MATERIAL: OPAQUE SIGN, PAINT ON WOOD, NOT ILLUMINATED.

2 FRONT (NORTHEAST) ELEVATION  
A-3 3/16" = 1'-0"



JOB#: 220-37  
DATE: 11-9-2020

124 Feigel Avenue  
Syracuse, N.Y. 13203  
PITCHER architect m.l.c.  
315.474.1219

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SITE PLAN  
DETAIL &  
FRONT  
ELEVATION  
A-3

PLANS REVIEW FORM

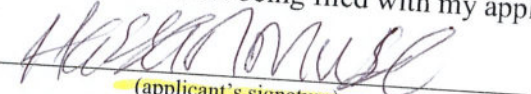
This form is to be signed by the person who reviews the submitted plans at the Division of Code Enforcement, 201 E. Washington Street, Room 101. This signed form must accompany any applications for variances, special permits, site plan reviews, or other similar zoning reviews that are to be filed by the applicant with the Syracuse Zoning Office, City Hall Commons, Room 211, 201 East Washington Street., Syracuse, NY 13202.

We, the Division of Code Enforcement, have received two sets of plans from \_\_\_\_\_ on \_\_\_\_\_ ;  
(applicant) (date)

one set which we have reviewed, and one set for transmittal to the Fire Prevention Bureau for its review.

\_\_\_\_\_  
(Division of Code Enforcement Signature)

I, the applicant, certify that the plans submitted to the Division of Code Enforcement are the same as the set being filed with my application.

  
(applicant's signature)

**APPLICANT PLEASE NOTE:** Approval of your application by the Board of Zoning Appeals, the City Planning Commission, or the Common Council does not relieve you or your agents from compliance with any other regulatory or licensing provisions applicable thereto by the properly constituted federal, state, county, or city authorities, including the issuance of permits by the Division of Code Enforcement.

SPECIAL PERMIT

1011 Park Street

Syracuse, NY

November 12, 2020



PITCHER architect PLLC

124 Feigel Avenue | Syracuse, NY 13203  
315.474.1219 | [JobsPitArch@gmail.com](mailto:JobsPitArch@gmail.com)

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Rezone Syracuse, code requirements, MX-1

## SPECIAL PERMIT APPLICATION

The applicant is proposing to convert an apartment to a hot-food take-out store. The change of occupancy will have a small waiting/service area for customers, food preparation area, and a storage room. The property is in a Business-B zone, and commercial uses are by-right.

The neighborhood has many immigrants from northern Africa, but lacks any store that provides traditional ethnic foods. Proposed operation would be 7 days per week from 9:00 a.m. to 11:00 p.m., with two full-time staff.

The property was constructed in the late 1800's as a residential house. In the past the entire building had been a bar. It was then converted to three apartments (two on the first floor and one on the second floor). It is proposed to convert the first floor front apartment back into the new hot-food take-out.

Proposed exterior renovations are (see drawings A-3 & a-4):

- New handicapped ramp.
- New sidewalk and pavers.
- New signage on the building and on the existing ground sign (see drawing A-4).

Off-street parking requirements will be one parking space for each of the two apartments, and no spaces are required for the store because it is under 1000 square feet. The existing driveway only permits one space, and the applicant requests a waiver of the other spaces.

The property, a Business-A, shares a rear property line with a Residential-RA property. But since the parking does extend into the rear yard because of a large existing tree, and rear property line abuts the residential property's parking lot, we do not believe that screening is necessary. The applicant asks for a waiver of that requirement.



Park street runs southeast to north west.



1. Across street from 1011, looking down Park Street to southeast. Division street is at the far end of the apartment building.



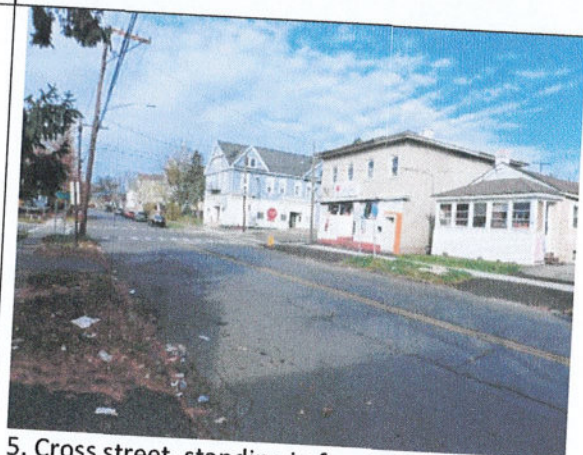
2. 1011, house to left.



3. To right: diagonally across Park Street



4. Looking down Park Street to northwest, to Mary St intersection.



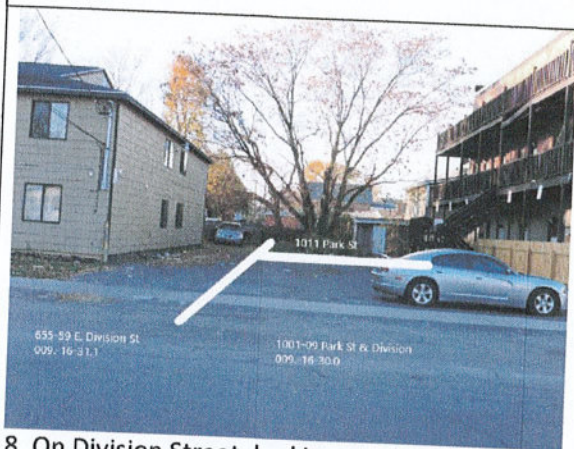
5. Cross street, standing in front of 1011, looking northwest down Park Street to Mary Street



6. Turning right, houses across the street.



7. Turning right, Park St to southeast, towards Division Street.



8. On Division Street, looking northwest towards 1011 garage: two property's parking lots abutting rear lot lines of 1011 Park St. Small addition at white door is 1011's garage.



9. The big tree is on 1011 Park Street lot. Parking lots of the RA property (left) and B property (right) are not screened from rear yard of 1011. 1011 driveway stops before garage. Big tree prevents parking at rear of lot.

# Abdi Yarow

## Menu

10/23/20

### Sambusa:

- Spring roll wrapper made with flavor, this will be made with ground beef with vegetables and spices.

- Also made with chicken and vegetable with spices.

- Beside the two made with beef and chicken, the third option be all vegetable and spices.

Rice - Boil rice Served with Chicken, Beef or goat meat

Chicken Wing – Fried Chicken wings, plain or hot

Bread - Baked bread

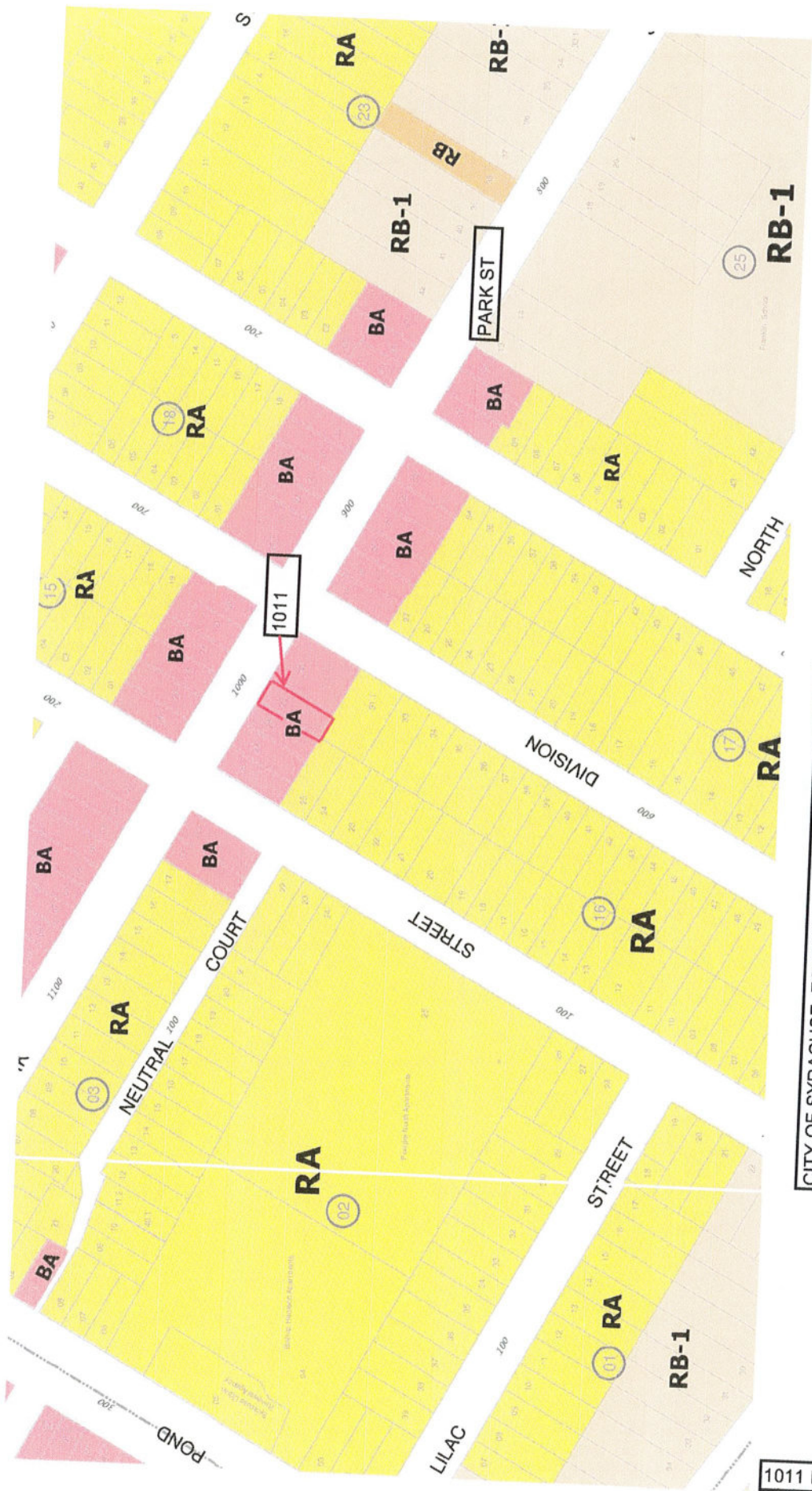
Igera – Made with flour, it is usually tiny flat and is severed with soup.

Jabati(sabaayad) – made with flour, flatbread

Soor – made with grit, usually served with spinach, Sukuma and beef soup. Also good with buttermilk.

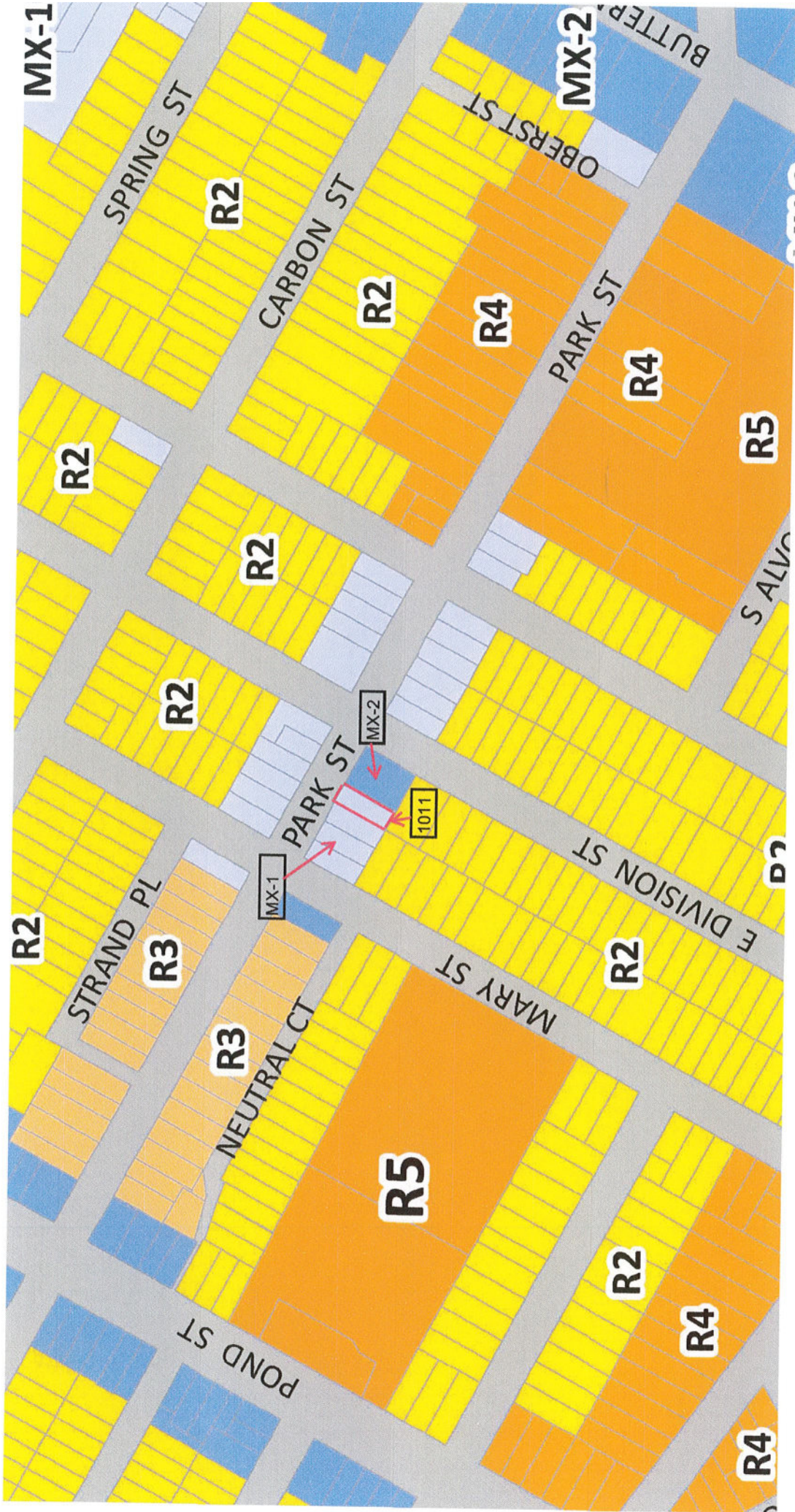
Pasta – boiled and served with a stew

Beverages – Coffee, tea, soda, juice, water



CITY OF SYRACUSE ZONING MAP NOVEMBER 2020

1011 PARK STREET



REZONE SYRACUSE MAP REVISED 2019