

City of Syracuse
Office of Zoning Administration

RESUBDIVISION / LOT ALTERATION APPLICATION

City Hall Commons - Room 500 * 201 E. Washington Street * Syracuse, NY 13202-1426
315-448-8640 * [zoning@syr.gov.net](mailto:zoning@syr.gov) * www.syr.gov.net/Zoning.aspx

Office Use Filing Date: _____ Case: _____ Zoning District: _____

REQUESTED (Check applicable and provide the subdivision name, existing and proposed number of lots, and total area.)

	<u>Subdivision Name</u>	<u>Number of Lots</u>	<u>Total Area</u>
<input checked="" type="checkbox"/> Resubdivision:	<u>621 and 625 Otisco</u>	<u>3 lots</u>	<u>10,741 SF</u>
<input type="checkbox"/> Lot Alteration:	_____	_____	_____

<u>TAX ASSESSMENT ADDRESS(ES)</u>	<u>TAX MAP ID(S)</u> (000.-00-00.0)	<u>OWNER(S)</u>	<u>DATE ACQUIRED</u>
1) <u>625 Otisco St, Syr 13204 100.-15-01.0</u>	<u>Home Head Quarters</u>	<u>8/31/17</u>	
2) <u>623 Otisco St, Syr 13204 100.-15-02.1</u>	<u>Home Head Quarters</u>	<u>4/15/10</u>	
3) <u>621 Otisco St, Syr 13204 100.-15-02.2</u>	<u>Steve Morris and</u>	<u>1/13/11</u>	
4) _____	<u>Sara O'Mahoney</u>		

As listed in the Department of Assessment property tax records at <http://syr.gov.net/Assessment.aspx> - 315-448-8280.

COMPANION ZONING APPLICATION(S) (List any related City Zoning applications, if applicable, e.g., Resubdivision, Special Permit, Project Site Review, etc.)

1) _____ 2) _____ 3) _____

PROJECT CONSTRUCTION (Check all that apply and briefly describe, as applicable.)

- Demolition (full and partial): _____
- New Construction: _____
- Façade (Exterior) Alterations: _____
- Site Changes: _____

PROJECT INFORMATION (Briefly describe, as applicable.)

Project Name: Resubdivision #621 and #625 Otisco St.
 Current Land Use(s): Residential and Vacant
 Proposed Land Use(s): Residential
 Number of Dwelling Units: _____
 Days and Hours of Operation: _____
 Number of Onsite Parking Spaces: _____

PROJECT DESCRIPTION (Provide a brief description of the project, including purpose or need.)

We would like to take the center lot at 623 Otisco St and divide it equally between #625 and #621, creating 2 equally proportioned lots.
This would allow for a buildable corner lot and give the adjacent neighbor a large yard while maintaining the character of the street.

City of Syracuse Office of Zoning Administration

PROPERTY OWNER(S) (required)

As listed in Department of Assessment property tax records (<http://syrgov.net/Assessment.aspx> - 315-448-8280). If not listed as the owner, please provide proof of ownership, e.g., a copy of the deed. Attorney's signing on behalf of the owner must include a letter describing the legal arrangement. If the property owner is a Corporation or Organization, the person signing must provide member verification. **Contract purchasers, tenants, architects, engineers, contractors, etc. CANNOT sign on behalf of the owner.**

Kerry P. Quaglia *CEO* *HomeHeadQuarters Inc.*
 First Name Last Name Title Company

538 Eric Blvd W. *Syracuse NY 13204* Phone: *315.474.1939*
 Street Address Apt / Suite / Other City St Zip Email: *kerry9@homehq.org*

* Signature: *[Signature]* Date: *3/13/21*

First Name Last Name Title Company

Street Address Apt / Suite / Other City St Zip Phone: Email:

* Signature: Date:

Steve Morris
 First Name Last Name Title Company

621 Otisco St *Syr NY 13204* Phone: *585.734.5875*
 Street Address Apt / Suite / Other City St Zip Email: *swmorris@gmail.com*

* Signature: *[Signature]* Date: *3/16/21*

Sara O Mahony
 First Name Last Name Title Company

621 Otisco St *Syr. NY 13204* Phone: *585.734.5875*
 Street Address Apt / Suite / Other City St Zip Email: _____

* Signature: *[Signature]* Date: *3/16/21*

*** OWNER SIGNATURE 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.

APPLICANT(S) (if applicable)

James Williams *Construction PM* *Home HeadQuarters*
 First Name Last Name Title Company

538 Eric Blvd W, Syr NY 13204 Phone: *315.807.9036*
 Street Address Apt / Suite / Other City St Zip Email: *jim.w@homehq.org*

First Name Last Name Title Company

Street Address Apt / Suite / Other City St Zip Phone: Email:

REPRESENTATIVE(S)/CONTACT(S) (if applicable)

First Name Last Name Title Company

Street Address Apt / Suite / Other City St Zip Phone: Email:

First Name Last Name Title Company

Street Address Apt / Suite / Other City St Zip Phone: Email:

Short Environmental Assessment Form

Part 1 - Project Information

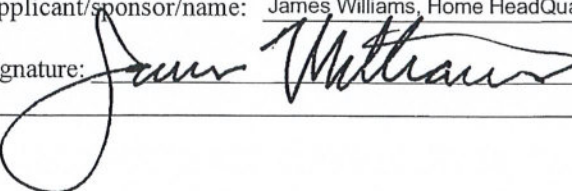
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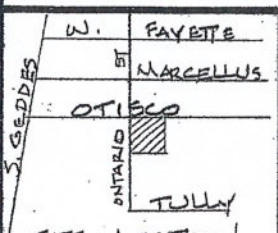
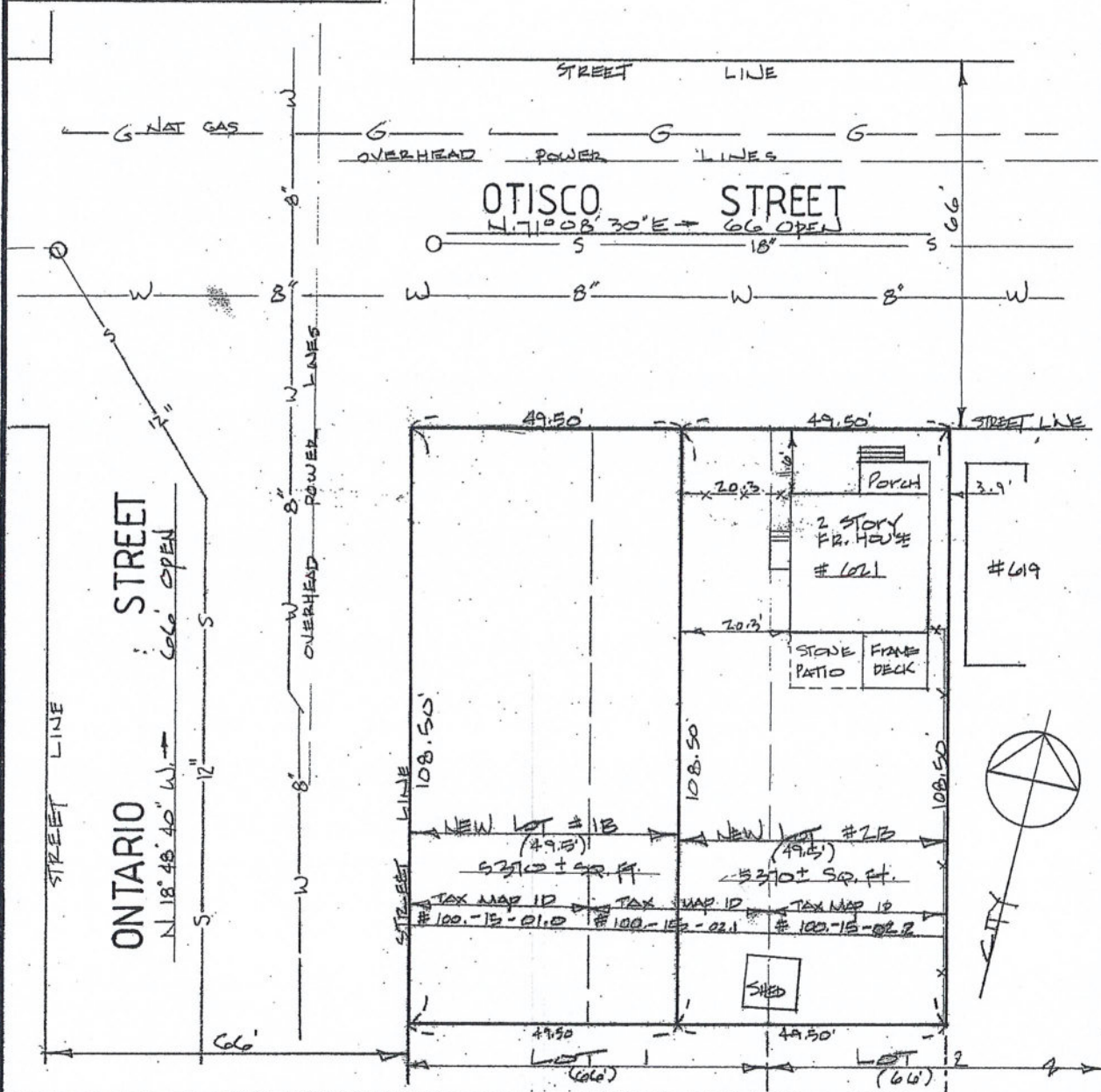
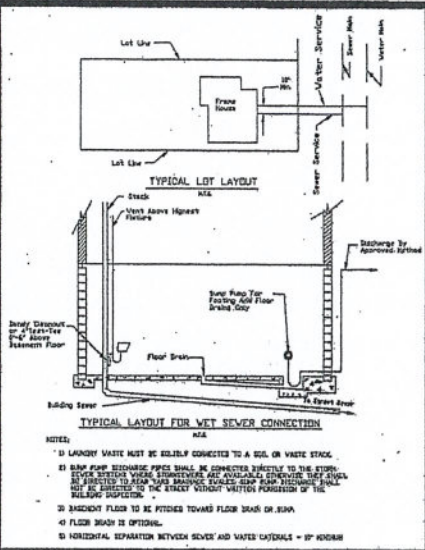
Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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: Resubdivision of 23 Vacant parcels and a single family residential home			
Project Location (describe, and attach a location map): Corner parcels on Otisco and Ontario Street. Properties know as 625, 623 and 621 Otisco St			
Brief Description of Proposed Action: Resubdivision of 3 parcels to 2, this will create a buildable corner lot and provide the adjacent neighbor with some much needed additional yard. The new parcels will be equal and the consistent size will retain the character of the street while allowing the corner lot to be developed into a single family home			
Name of Applicant or Sponsor: Home HeadQuarters		Telephone: 315-459-6676	
Address: 538 Erie Blvd West, Suite 100		E-Mail: jimw@homehq.org	
City/PO: Syracuse		State: NY	Zip Code: 13204
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ 0.246 acres			
b. Total acreage to be physically disturbed? _____ 0 acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 0.246 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 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,	NO	YES	N/A
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?	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?	NO	YES	
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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services 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 the 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?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies:			
NA - resubdivision only _____	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	<input type="checkbox"/>	<input checked="" 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

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 plan?	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? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
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
	<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 type="checkbox"/>	<input checked="" type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>James Williams, Home HeadQuarters Inc.</u> Date: <u>3-13-2021</u>		
Signature: <u></u> Title: <u>Construction Project Manager</u>		



Resubdivision on part of Lots #1 & #2 in Block #291, into New Lots #1B and #2B, City of Syracuse, County of Onondaga, State of New York.
Known as #621 and #625 Otisco Street.

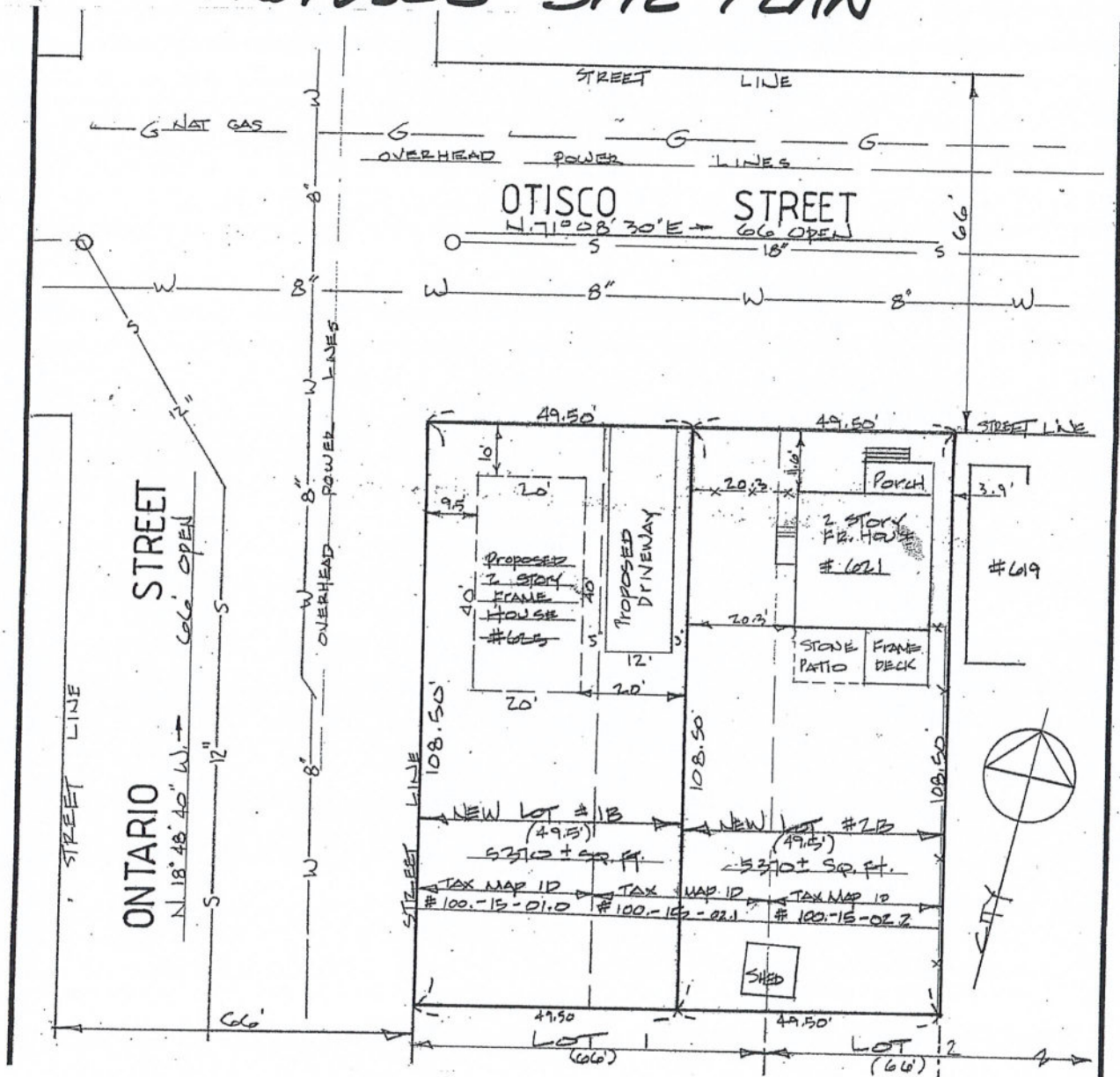
THE UNDERSIGNED SURVEYOR HEREBY CERTIFIES THAT THIS IS AN ACCURATE MAP OF AN ACTUAL SURVEY

Martin E. Davis
MARTIN E. DAVIS

DRAWN BY:	MD
DATE:	03/10/21
SCALE:	1"=20'
REVISIONS:	

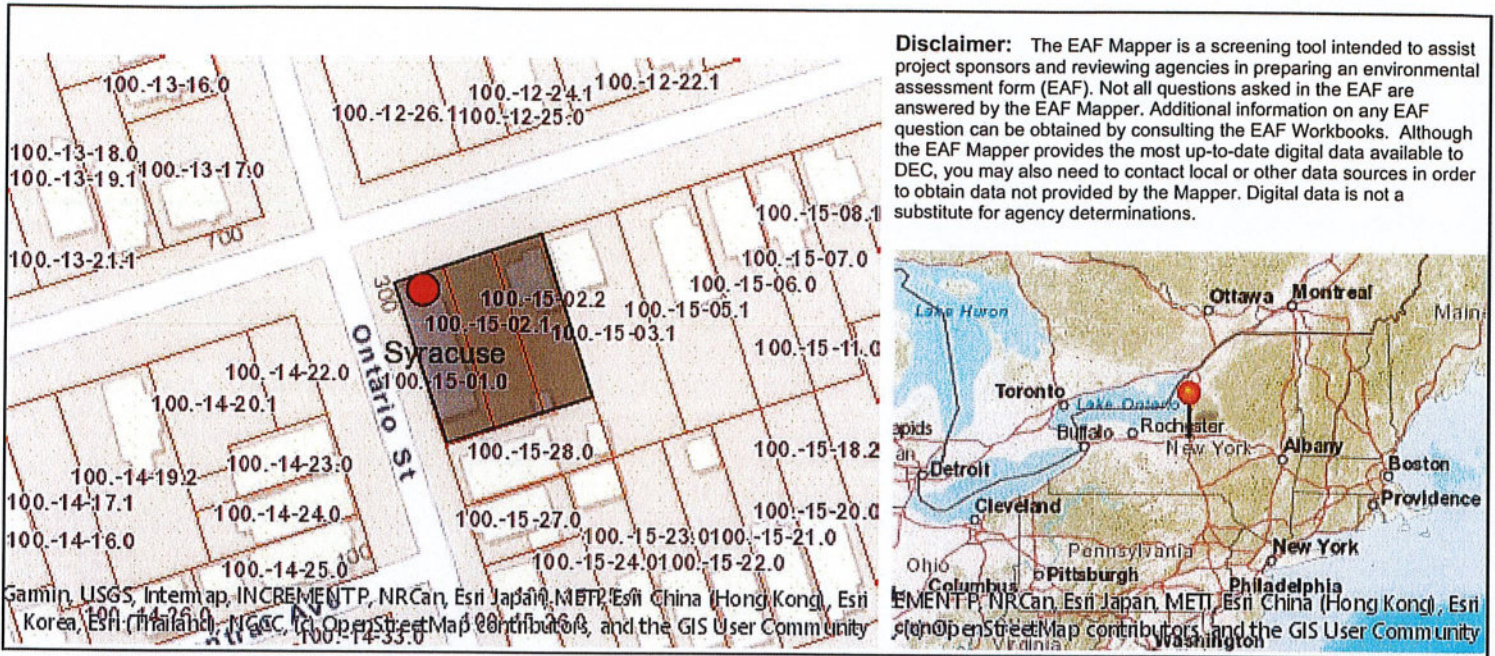
#625 OTISCO AND #621 OTISCO

PROPOSED SITE PLAN



SCALE: 1" = 20'





Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	No
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	Yes



March 13, 2021

Office of Zoning Administration
City Hall Commons, Room 101
201 East Washington Street
Syracuse, NY 13202
Attn: Jeff Harrop

Re: Resubdivision – 625 Otisco, 623 Otisco and 621 Otisco Street

Dear Mr. Harrop:

Enclosed please find Home HeadQuarters' application for a resubdivision of 625, 623 and 621 Otisco Street in Syracuse. The following documents are included:

- Application for Resubdivision/ Lot Alteration
- Short EAF
- Resubdivision Map – 11 x 17
- Supporting documents

Home HeadQuarters is looking to equally divide the center parcel, 623 Otisco, to allow for the formation of a buildable lot at the corner and provide a larger yard for the adjacent property owner at 621 Otisco. This should allow for greater enjoyment of the property for the owner at 621 and parcels that are both in character of the neighborhood

Thank you for your time discussing this submission the other day. Please let me know if you have any questions or require a hard copy of any documents attached.

Sincerely,

A handwritten signature in black ink that reads "James Williams". The signature is written in a cursive style with a large, looping initial "J".

James Williams
Construction Project Manager
Home HeadQuarters, Inc.