

**Syracuse Zoning Administration**

**Application for Resubdivision/Lot Alteration**

City Hall Commons \* Room 101 \* 201 East Washington Street \* Syracuse, NY 13202-1426 \* 315-448-8640

**For office use only:**

District: \_\_\_\_\_

Filing Date: \_\_\_\_\_

Case #: \_\_\_\_\_

Resubdivision

Lot Alteration

**SUBJECT PROPERTY ADDRESS(ES):**

409 Pacific Avenue, Syracuse, NY 13207

419 Pacific Avenue, Syracuse, NY 13207

**TAX MAP NUMBERS: (of each property involved)**

Section: 073 Block: -12 Lot: 06.0

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Section: 073. Block: -12 Lot: 05.0

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

**PROPERTY OWNER(S): (If more than one owner, attach additional pages)**

NAME: Greater Syracuse Property Development Corporation

MAILING ADDRESS: 431 E. Fayette Street, Ste. 375, Syracuse NY

ZIP: 13202

DAYTIME PHONE: 315-422-2302

HOME PHONE: \_\_\_\_\_

E-MAIL: kwright@syracuselandbank.org

**REPRESENTATIVE:** Attorney or Other contact: NEHDA, Inc.

*(Complete only if a representative is involved with this application)*

NAME: Tysha Martin

MAILING ADDRESS: 101 Gertrude Street

ZIP: 13203

TELEPHONE: 315-425-1032

E-MAIL nehda@nehda.org

**CURRENT LAND USES ON ALL INVOLVED PROPERTIES:**

409 Pacific Ave - Single family residential

419 Pacific Ave - Residential vacant lot

**CURRENT DESCRIPTION OF ALL STRUCTURES ON ALL INVOLVED PROPERTIES:**

409 Pacific Ave - Two Story, Single Family Residential w/ 1,054 sq. ft of living space

**DESCRIBE THE REASON FOR YOUR REQUEST and YOUR OVERALL PROJECT IN DETAIL:**

GSPDC mission is to put vacant properties back into productive use. The homeowner would like to enlarge their green space and fence in the property.

**IS THIS RESUBDIVISION/LOT ALTERATION PART OF A LARGER OVERALL PROJECT?**

YES

NO

**\*NOTE: IF THE PROPOSED USE DOES NOT COMPLY WITH APPLICABLE ZONING LAWS ADDITIONAL APPLICATIONS MAY BE NECESSARY.**

**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 are correct.

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

*Katelyn Wright* 12/23/2020  
Signature of CURRENT PROPERTY OWNER(s) (or owners' LEGAL representative) Date

Katelyn Wright - GSPDC

**PLEASE PRINT NAME** of person(s) whose signature is above. If legal representative, also state their relationship to owner(s). Use additional pages if necessary.

**REQUIRED SUBMITTALS**

- APPLICATION** – Must be **completely filled out** including tax map numbers, and current and proposed uses of property/properties and must be signed by the property owner(s) or legal representative(s).
- SHORT ENVIRONMENTAL FORM** – Must be completely filled out (side one only) and signed.
- MAPS – RESUBDIVISION/LOT ALTERATION MAPS –**
  - a. **7 COPIES** – Drawn by a licensed land surveyor on paper. If maps are larger than 11 x 17, then a reduced copy must also be submitted.
  - b. Must show existing and proposed lot lines along with addresses and new lot numbers (see attached example). Must also illustrate all existing and any proposed physical features on the property (i.e. driveways, walkways, retaining walls, fences, etc.)
  - c. Must also contain a location map for the subject property.
  - d. Please have your land surveyor contact the Onondaga County Health Department at 315-435-6600 prior to drawing your resubdivision/lot alteration map for map requirements.

**\*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) \_\_\_\_\_

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Section: 073. Block: -12 Lot: 05.0 Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

**PROPERTY OWNER(S): (If more than one owner, attach additional pages)**

NAME: Anthony & Germesia Grady

MAILING ADDRESS: 409 Pacific Avenue

ZIP: 13207 DAYTIME PHONE: 315-378-4122

HOME PHONE: \_\_\_\_\_ E-MAIL: n/a

**REPRESENTATIVE: Attorney or Other contact: NEHDA, Inc.**

*(Complete only if a representative is involved with this application)*

NAME: Tysha Martin

MAILING ADDRESS: 101 Gertrude Street

ZIP: 13203 TELEPHONE: 315-425-1032 E-MAIL: nehda@nehda.org

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YES  NO

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ADDITIONAL APPLICATIONS MAY BE NECESSARY.**

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



2/20/20  
 Signature of CURRENT PROPERTY OWNER(s) (or owners' LEGAL representative) Date

Anthony & Germesia Grady 409 Pacific Ave, Syracuse, NY 13207

PLEASE PRINT NAME of person(s) whose signature is above. If legal representative, also state their relationship to owner(s). Use additional pages if necessary.

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# Short Environmental Assessment Form

## Part 1 - Project Information

### Instructions for Completing

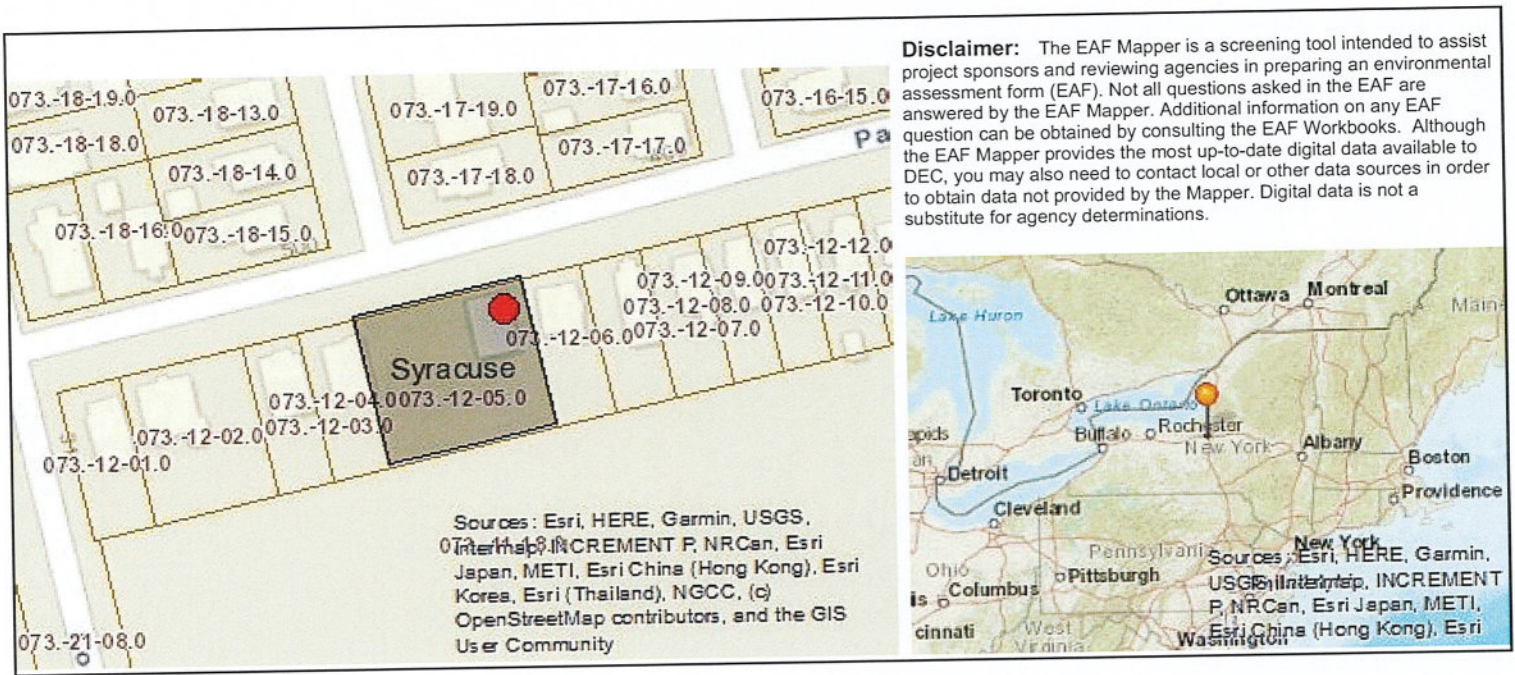
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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.

<b>Part 1 – Project and Sponsor Information</b>			
Name of Action or Project: Resubdivision of a vacant parcel with an adjoining Single Family Residence with Land Bank maintaining a buildable vacant lot			
Project Location (describe, and attach a location map): 409 and 419 Pacific Avenue (between Empire Ave and Girard Ave)			
Brief Description of Proposed Action: The Land Bank intends to merge half of the vacant lot at 419 Pacific Avenue with the Single Family Residence at 409 Pacific Avenue. The owner occupant at 409 Pacific Avenue will acquire 56' of the vacant lot. The remaining 56' of the vacant lot will be retained by the Land Bank as a buildable lot. The applicant (409 Pacific) would like the opportunity to expand their greenspace and eventually install fencing. The Land Bank will retain their portion of the property for potential new construction. This resubdivision helps fulfill the Land Bank's mission to return vacant property to productive use in ways that strengthen the economy and improve quality of life. In addition the property will generate taxes, increase surroundings property value and improve the entire neighborhood.			
Name of Applicant or Sponsor: Greater Syracuse Property Development Corporation		Telephone: 315-422-2302 E-Mail: kwright@syracuselandbank.org	
Address: 431 E. Fayette Street, Suite 375			
City/PO: Syracuse		State: New York	Zip Code: 13202
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	YES
		<input checked="" type="checkbox"/>	<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:		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____		0.3260 acres	
b. Total acreage to be physically disturbed? _____		_____ acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____		0.3260 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			

		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 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: N/A - Resubdivision Only _____ _____		<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 type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? 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?  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:		
<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?	NO	YES
If Yes,	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input type="checkbox"/>
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)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____	<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?	NO	YES
If Yes, describe: _____	<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?	NO	YES
If Yes, describe: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____		
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor/name: <u>Katelyn Wright, GSPDC</u> Date: <u>12/23/2020</u>		
Signature: <u><i>Katelyn Wright</i></u> Title: <u>Executive Director</u>		



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]	No

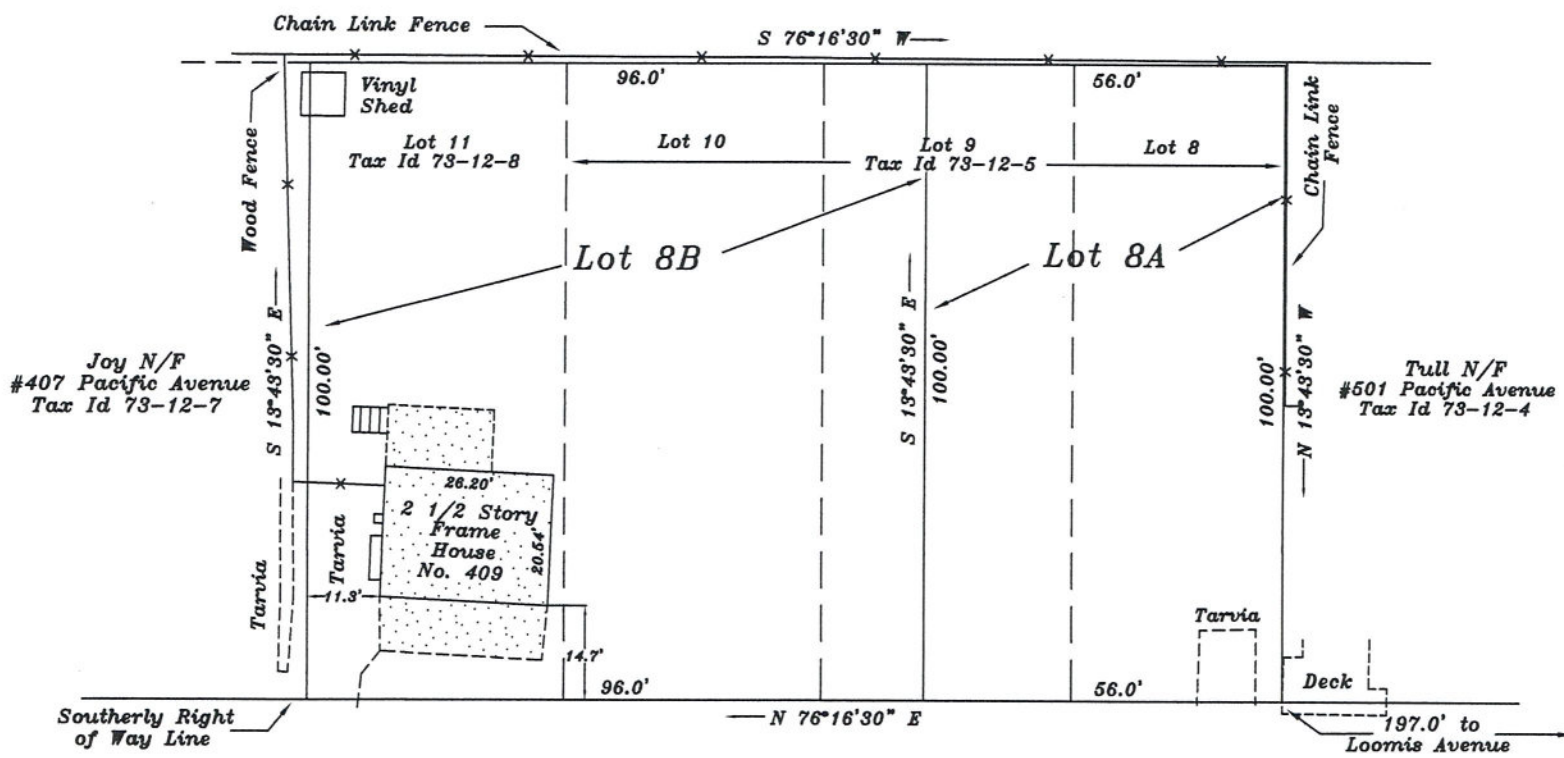




Site Vicinity Locator  
(not to scale)



City of Syracuse N/F  
#415 Loomis Avenue  
Tax Id 73-11-18



**Pacific Avenue**  
(Open - 50' Wide)

Approvals

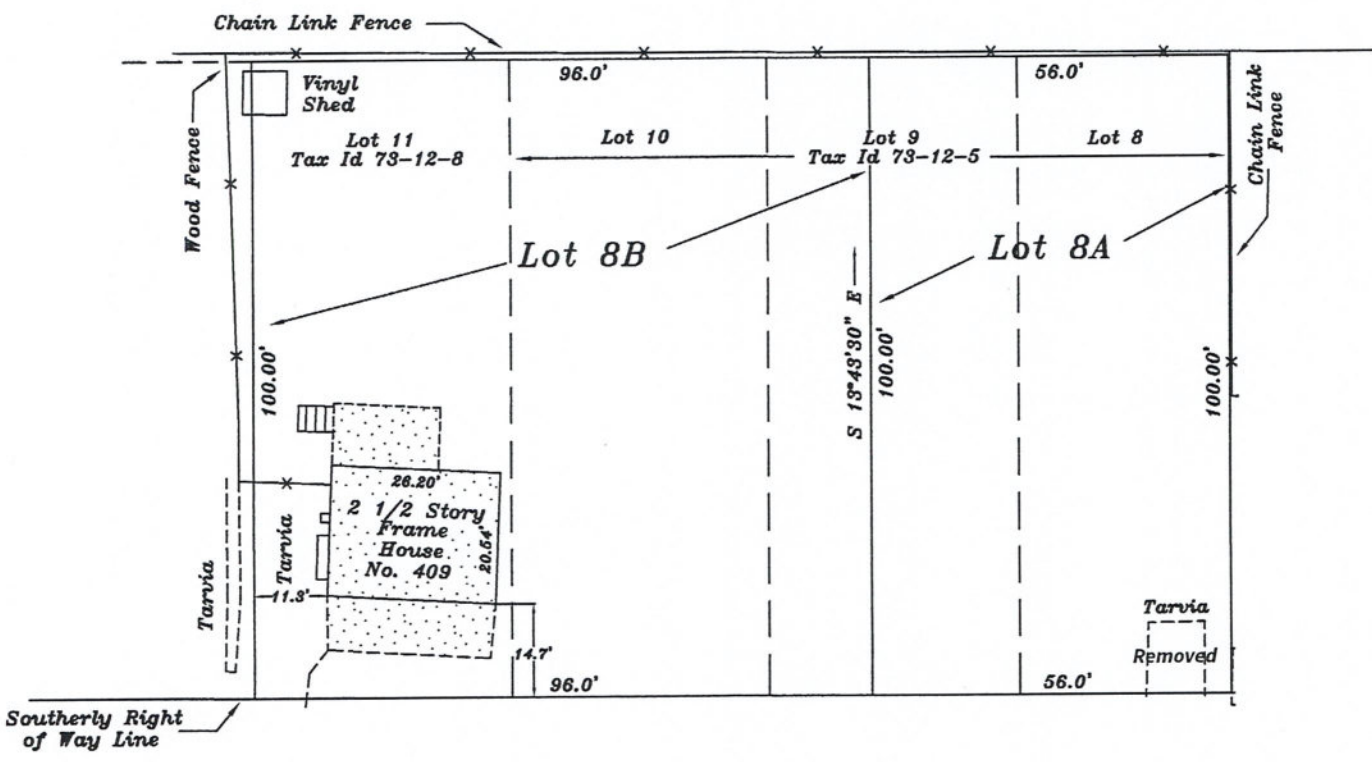
Notes/References:

- \*Survey prepared without the benefit of an up-to-date abstract of title.
  - \*Adjoiner information obtained using ImageMate Online.
  - \*Buildings/Structures shown for informational purposes only.
  - \*Subject parcel(s) has access to public utilities.
  - \*New Lot 8 A Area = 5600.0 Sq. Ft.
  - \*New Lot 8 B Area = 9600.0 Sq. Ft.
  - \*Parcel(s) Owner : Creater Syracuse Property Development Corporation, and Anthony Grandy,
  - \*Survey Revised 12/15/20 to remove 501 Pacific from the resubdivision. Survey based on fieldwork from 1/8/20 survey.
- \*Proposed Only\***

<p><b>Michael J. McCully</b> Land Surveying PLLC 5875 Fieldstone Drive Casenovia New York 13035 Phone : (315) 440-5096</p>		<p>Proposed Resubdivision on Lots 8-11, Block 17 of Walnut Grove, Map 577. To be New Lots 8A, 8B.</p>
<p>I hereby certify that this map was made from an actual survey and same is correct.</p> <p><i>[Signature]</i> M.J. McCully NYSLLS 50696</p>		<p>Known as No.'s 409 and 419 Pacific Avenue, City of Syracuse, County of Onondaga, State of New York.</p> <p>Drawn by: MJM Scale: 1" = 30' Date(s): 01-08-20 12-15-20</p>

Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of Section 7208, Subdivision 2 of the New York State Education Law. Only copies from the original of this survey marked with an original of the land surveyor's inked seal or his embossed seal shall be considered to be valid true copies. Certifications shall run only to the person or entities for whom the survey is prepared and are not transferable to subsequent persons or entities. Copyright 2019, Michael J. McCully Land Surveying, all rights reserved.

## Site Plan 409 and 419 Pacific Ave



# Pacific Avenue

Site Plan prepared by  
Syracuse Land Bank  
12/17/2020

Scale: 1" = 30'



NEHDA  
101 Gertrude Street  
Syracuse, NY 13203  
[www.nehda.org](http://www.nehda.org)  
315-425-1032

January 7, 2021

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

Re: 409 & 419 Pacific Avenue Resubdivision

Dear Jeff,

Enclosed please find the Greater Syracuse Land Bank's application for the resubdivision of 409 and 419 Pacific Avenue in the City of Syracuse.

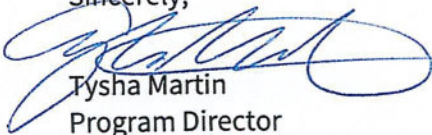
To support our application, please find the attached information:

- Application for Resubdivision/Lot Alteration
- Short EAF
- Resubdivision Map
- Site Maps
- Aerial Map

The Land Bank demolished a dilapidated single family house on 419 Pacific Avenue. The lot is buildable and measures 112' x 110.' The Land Bank would like to sell half of the lot to the owner occupant at 409 Pacific and retain the other half as a separate lot. The resubdivision will provide more defensible space and increase the property value. The owner occupant will pay taxes on the land and maintain the property. We believe this is in the best interest of the neighborhood and the City.

Please let me know if you require any additional information or documentation to facilitate your review of this request.

Sincerely,



Tysha Martin  
Program Director

Attachments

Google Maps 419 Pacific Ave



Google

Map data ©2020, Map data ©2020

20 ft

## Zoning

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**From:** Tysha Martin <tysha@nehda.org>  
**Sent:** Thursday, January 7, 2021 11:53 AM  
**To:** Zoning  
**Cc:** Terri Lockett  
**Subject:** Application for Resubdivision - 409 & 419 Pacific Avenue  
**Attachments:** 419 Pacific Ave - Site Plan Revised 07Jan2021 (z).pdf; 409 & 419 Pacific Ave - Zoning Applctns Signed - 07Jan2021 (z).pdf; 419pacific - 11x17 Survey (z).pdf; 409 & 419 Pacific Ave - Cvr Ltr & Aerial Map - 07Jan2021 (z).pdf; 419 Pacific SEQR Short App - 07Jan2021 Signed KW (z).pdf

Good Morning-

Please find attached an application for the resubdivision of 409 & 419 Pacific Avenue. The following documents are included in this email:

- Cover Letter
- Aerial Map
- Short EAF
- Site Map
- Application for Resubdivision/Lot Alteration
- 11x17 Resubdivision Map

Please feel free to contact me if you have any questions or require additional information. Our office is currently closed, so the best way to reach me is via e-mail or on my cell phone @ 315-399-3300.

Thank you and have a nice day!!!

Warm regards,

Tysha

**Tysha Martin**  
**Program Director**  
**Northeast Hawley Development Association**  
**101 Gertrude Street**  
**Syracuse, New York 13203**  
**P: (315) 425-1032**  
**F: (315) 425-1089**  
**[www.nehda.org](http://www.nehda.org)**

NEHDA facilitates community development that promotes strong and safe neighborhoods, thriving businesses, and active civic engagement.

Learn more at [nehda.org](http://nehda.org)