

**City of Syracuse Zoning Administration**

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

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

For Office Use: Filing Date:  Case Number: SP-  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:**

**PROPERTY 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:  Location:  Type:

Size:  Location:  Type:

Size:  Location:  Type:

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

- Dining room  Bar Service  Drive-thru none really they make food for takeout only
- 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





# Short Environmental Assessment Form

## Part 1 - Project Information

### Instructions for Completing

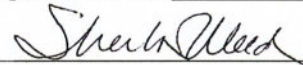
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available.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

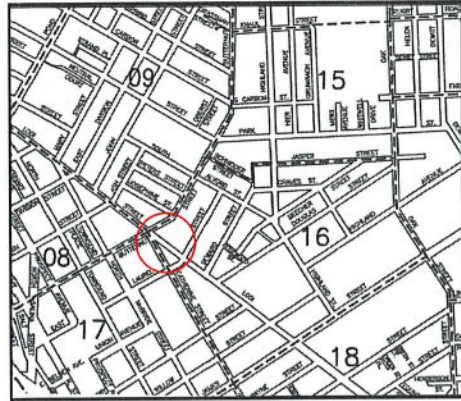
<b>Part 1 – Project and Sponsor Information</b>			
714 Catherine Street at Lodi Ave			
Name of Action or Project: 714 Catherine Street at Lodi Ave, Syracuse, NY			
Project Location (describe, and attach a location map): 714 Catherine Street at Lodi Ave, Syracuse, NY			
Brief Description of Proposed Action: Renovations to an existing one story concrete block building. The previous owner/ use was a Jreck Sub Shop. New owner will have the same/ similar type of business			
Name of Applicant or Sponsor: Group 1 Design- Sheila Weed Architect		Telephone: 315-434-1844	
		E-Mail: grouponedesign.sheila@verizon.net	
Address: 317 South Collingwood Ave			
City/PO: Syracuse		State: NY	Zip Code: 13206
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: Building Permit			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ .09 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? _____ .09 acres			
4. Check all land uses that occur on, are adjoining or near the proposed action: <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): <input type="checkbox"/> Parkland			



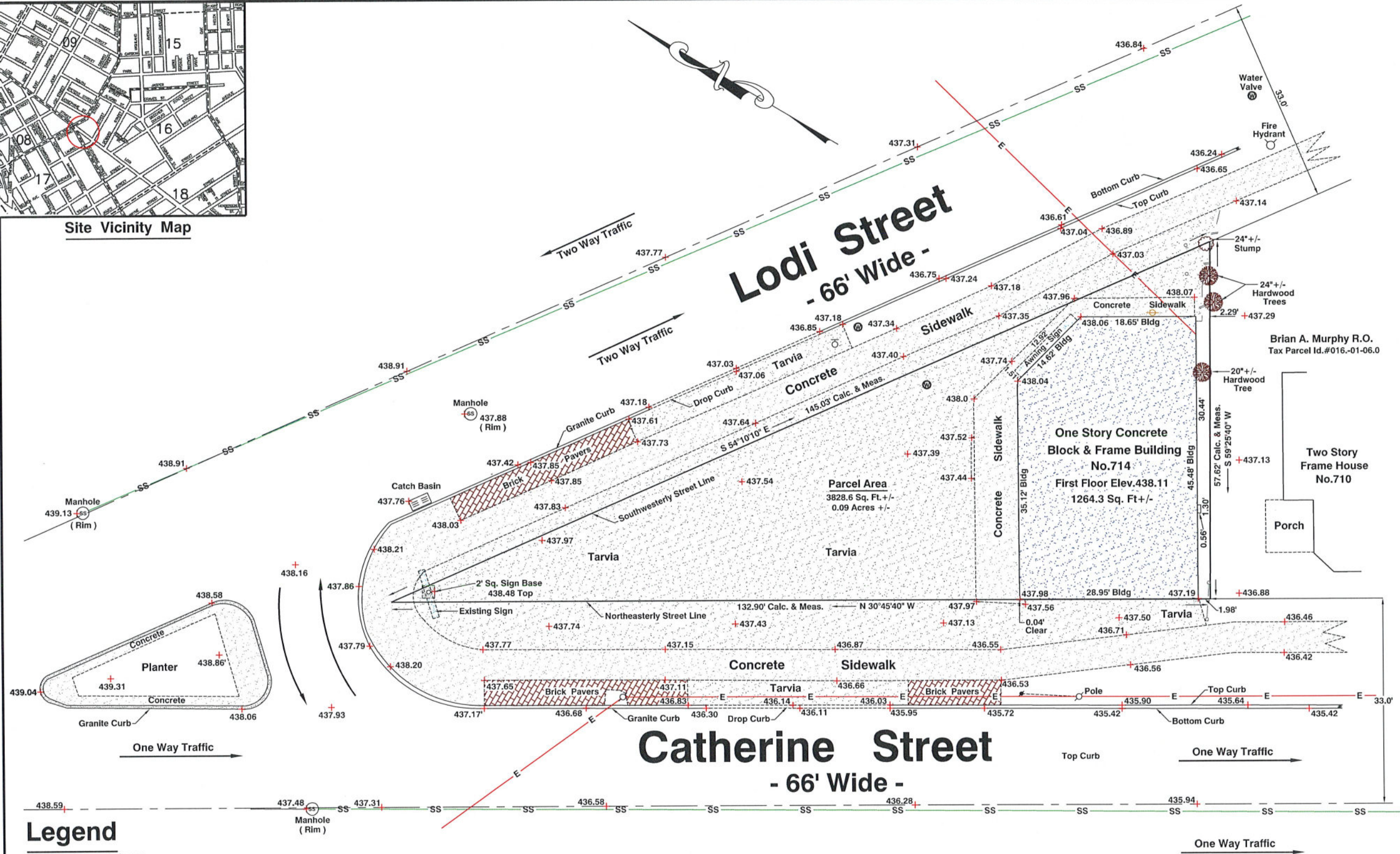
5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? 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? 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input 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 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?	NO	YES	
	<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: _____ _____ _____	NO	YES	
	<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? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input checked="" 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)? 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 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>Sheila Weed- Architect- Group 1 Design</u> Date: <u>March, 29, 2021</u> Signature: <u></u> Title: <u>Architect</u>		





Site Vicinity Map



**Legend**

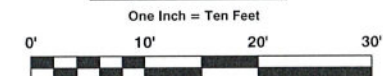
These standard symbols may be found in the drawing.

- Indicates Centerline Pavement
- Indicates Sanitary Sewer
- Indicates Overhead Utility Lines
- Indicates Metal Fence
- Indicates Sanitary Sewer Manhole
- Indicates Water Valve
- Indicates Utility Pole
- Indicates Shutoff Valve
- Indicates Utility Pole Anchor
- Indicates Metal Fence
- Indicates Gas Meter
- Indicates Catch Basin

**General Notes**

- 1.) This survey was prepared without the benefit of an up to date Abstract of Title, and is subject to any additional facts such as an up to date Abstract may disclose.
- 2.) Fieldwork performed February 2021.
- 3.) Elevations are based on NGVD 1988 Datum.
- 4.) This survey is subject to any and all subsurface conditions, improvements, if any, as well as any apparent encroachments within and/or adjacent to the platted parcel.
- 5.) The locations of underground utilities shown hereon were compiled from observable surface evidence the actual locations are subject to field excavation.

**Graphic Barscale**



Owner: Basim A. Alnashash  
Tax Parcel #016.-01-07.0

37 First Street, Camillus, New York 13031  
Email: jrlandsurveying@aol.com

**J.R.L. Land Surveying PLLC**

Phone: (315) 263-9621  
Fax: (315) 320-4298

James Richard Lighton New York State Licensed Land Surveyor #50606

I hereby certify that this map was made from an actual survey and same is correct. Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of Section 7209, 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 true valid 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 2021, J.R.L. Land Surveying PLLC.

Topographic and Location Survey on part of Lot No.1 - Block No.282 B - Prospect Hill Tract, City of Syracuse Known as No.714 Catherine Street, City of Syracuse, County of Onondaga, State of New York.

Scale: 1"= 10' Date: 03-01-2021 Drawn By: JRL  
Revisions:







2020 NYS EXISTING BUILDING CODE REVIEW  
NO CHANGE OCCUPANCY- EXISTING DELI/STORE TO BE DELI/STORE  
LEVEL 2 ALTERATIONS

GENERAL BUILDING INFORMATION

BUILDING CONSTRUCTION-

BUILDING IS TYPE 2B CONSTRUCTION -  
 EXISTING BUILDING IS CMU WALLS  
 THE FLOOR IS A SLAB ON GRADE  
 THE ROOF IS STEEL BAR JOISTS AND A METAL DECK

GROUP M- MERCANTILE

HT ALLOWED- 55', THIS BLDG IS 15'  
 STORIES ABOVE GRADE PLANE- 2, THIS BLDG IS 1 STORY  
 AREA ALLOWED- 12,500 SQ FT, THIS BUILDING IS 1120 SQ FT

FIRE PROTECTION-

NO SPRINKLERS ARE INSTALLED. SPRINKLERS ARE NOT REQUIRED IN THIS M OCCUPANCY.  
 AREA WILL HAVE HARDWIRED SMOKE/ HEAT/ CO DETECTION INSTALLED

MEANS OF EGRESS-

THERE IS 1 EXG MEANS OF EGRESS. THIS IS ALLOWED PER TABLE 1006.2.1

ACCESSIBILITY-

ENTRY IS ACCESSIBLE, PATH OF TRAVEL IS ACCESSIBLE. TOILET RM IS EXG & BUILDING IS NOT REQD TO MEET THE CURRENT CODE  
 THERE IS NO CHANGE OF OCCUPANCY OCCURRING

PLUMBING-

ONE TOILET IS EXISTING, THERE IS AN EXTERIOR TOILET

2020 NYS EXISTING BUILDING CODE

CHAPTER 8- LEVEL 2 ALTERATIONS

SECTION 801- GENERAL

BUILDING WILL MEET LEVEL 1 COMPLIANCE

SECTION 802- BLDG ELEMENTS AND MATERIALS

NO VERTICAL OPNGS- 1 STORY  
 NO SMOKE COMPARTMENTS/ GUARDS OR FIRE RESISTANCE CONSTRUCTION REQ'D

SECTION 803- FIRE PROTECTION

NO CORRIDOR RATING REQ'S/ SPRINKLER IS NOT REQ'D  
 ALL DETECTORS TO BE HARDWIRED

SECTION 804- CARBON MONOXIDE DETECTION

BUILDING WILL COMPLY WITH THIS REQUIREMENT

SECTION 805- MEANS OF EGRESS

ONE EXIT REQUIRED FOR BUILDING THIS SIZE, BUILDING COMPLIES

SECTION 806- STRUCTURAL

NO STRUCTURAL WORK BEING PERFORMED

SECTION 807- ELECTRICAL

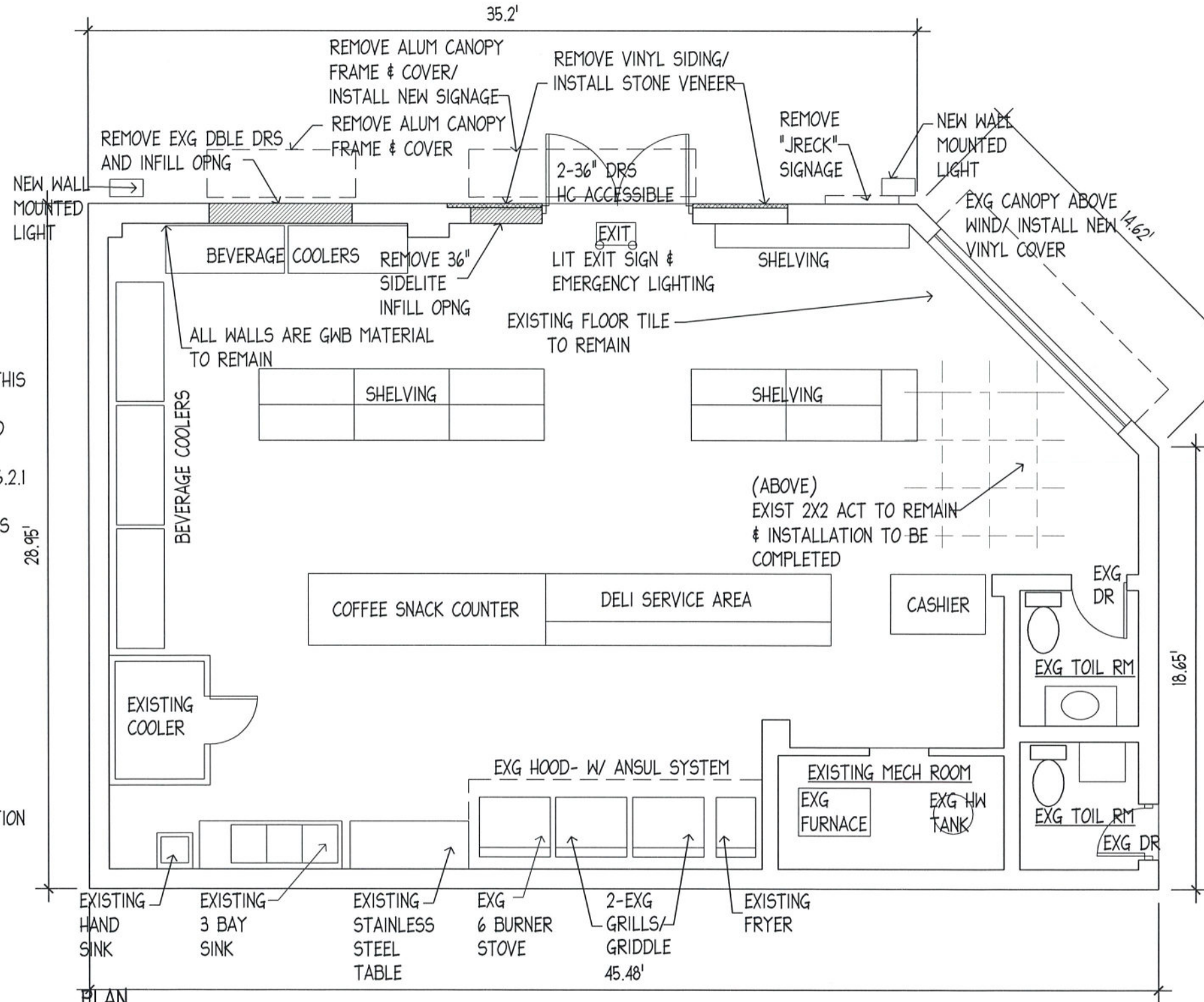
ALL NEW WORK TO COMPLY WITH THE CODE

SECTION 808- MECHANICAL

EXG MECHANICAL SYSTEM UNDERGOING REPAIRS/ REPLACEMENT WILL COMPLY WITH CODE REQUIREMENTS

SECTION 809- PLUMBING

PLUMBING MATERIALS & SUPPLIES SHALL COMPLY W/ THE CURRENT CODE



PLAN

SCALE - 3/16" = 1'-0"

TOTAL BUILDING AREA- 1121 SQ FT  
 TOTAL STORE AREA- 1002 SQ FT  
 MERCANTILE- 60 SF GROSS PER PERSON= 19 PEOPLE

EXISTING DOUBLE SIDED POST SIGNAGE TO REMAIN  
 EXISTING WALL MOUNTED SIGN ABOVE ENTRY DOOR TO REMAIN  
 INSTALL COMBINATION SMKE/ CO2 DETECTORS

ADDITIONAL NOTE/ REQUIREMENTS

- NEW HOOD INSTALLED TO COMPLY WITH CODE REQUIREMENTS
- NEW EXHAUST FAN AT THE ROOF TO BE MIN 10' FROM PROPERTY LINE-
- COMPLY WITH MAKE UP AIR REQUIREMENTS FOR NEW FIXTURES
- NEW GREASE TRAP TO BE SIZED AS PER CODE- OBTAIN PERMIT FROM ONONDAGA COUNTY

SHEET	A-1
DATE	3/29/2021
SCALE	AS NOTED

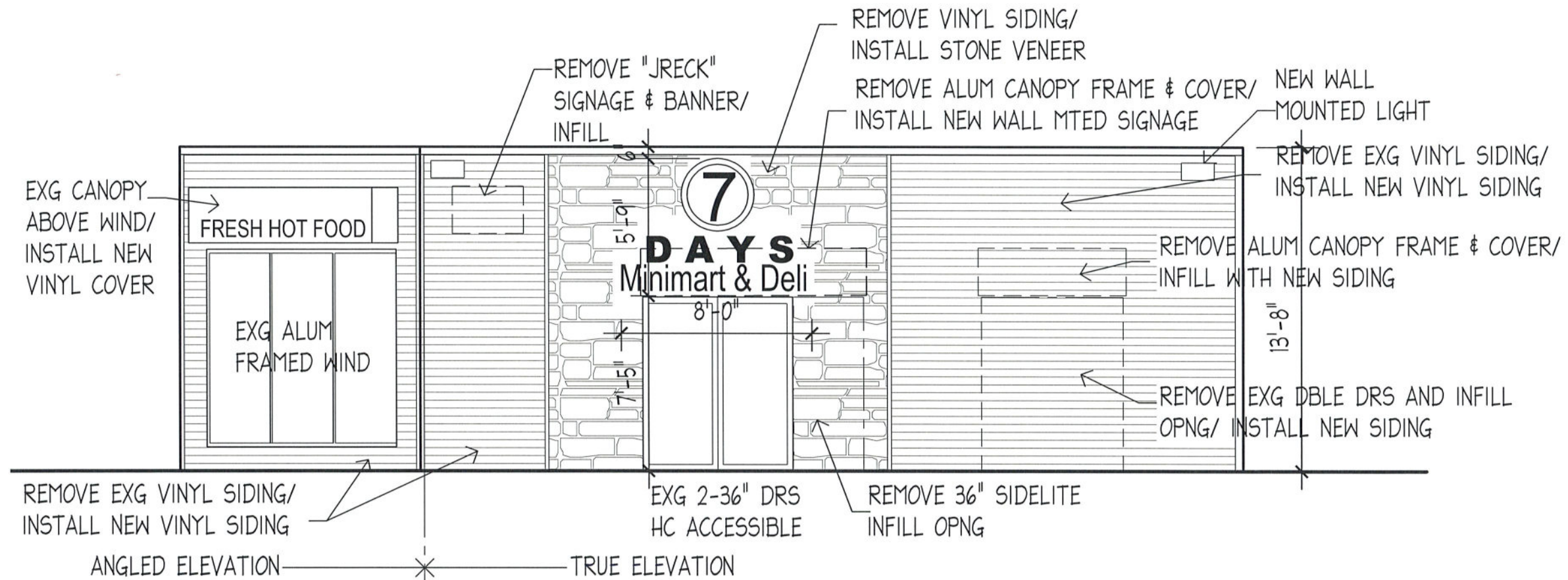
PROJECT NORTH

**FOOD STORE and DELI**  
 714 CATHERINE STREET  
 INTERIOR REPAIRS- NO CHANGE OF OCCUPANCY  
 SYRACUSE, NY, 13203

DRAWING FLOOR PLAN & CODE NOTES

**GROUP 1 DESIGN**  
 SHEILA WEED - ARCHITECT  
 317 S. COLLINGWOOD AVENUE  
 SYRACUSE, NY 13206  
 GROUP1DESIGN.SHEILA@VERIZON.NET  
 315-434-1844





REMOVE EXG VINYL SIDING/  
INSTALL NEW VINYL SIDING

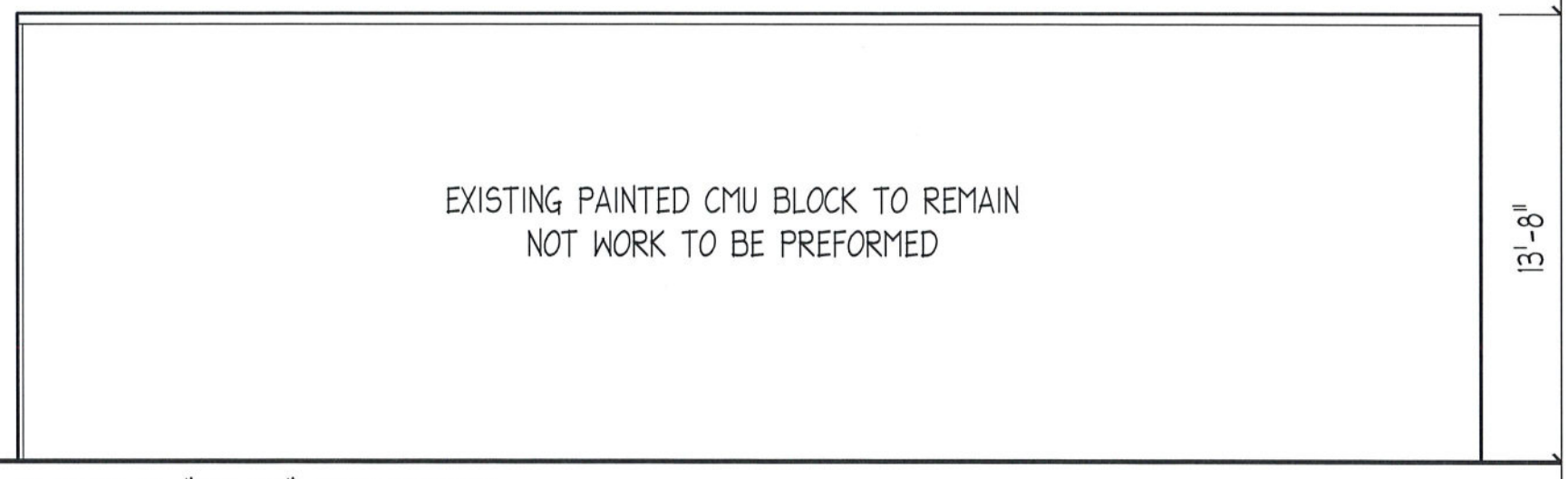
EXG 2-36" DRS  
HC ACCESSIBLE

REMOVE 36" SIDELITE  
INFILL OPNG

ANGLED ELEVATION \* TRUE ELEVATION

**BUILDING "FRONT" ELEVATION**

SCALE : 1/8" = 1'-0"



**BUILDING "REAR" ELEVATION**

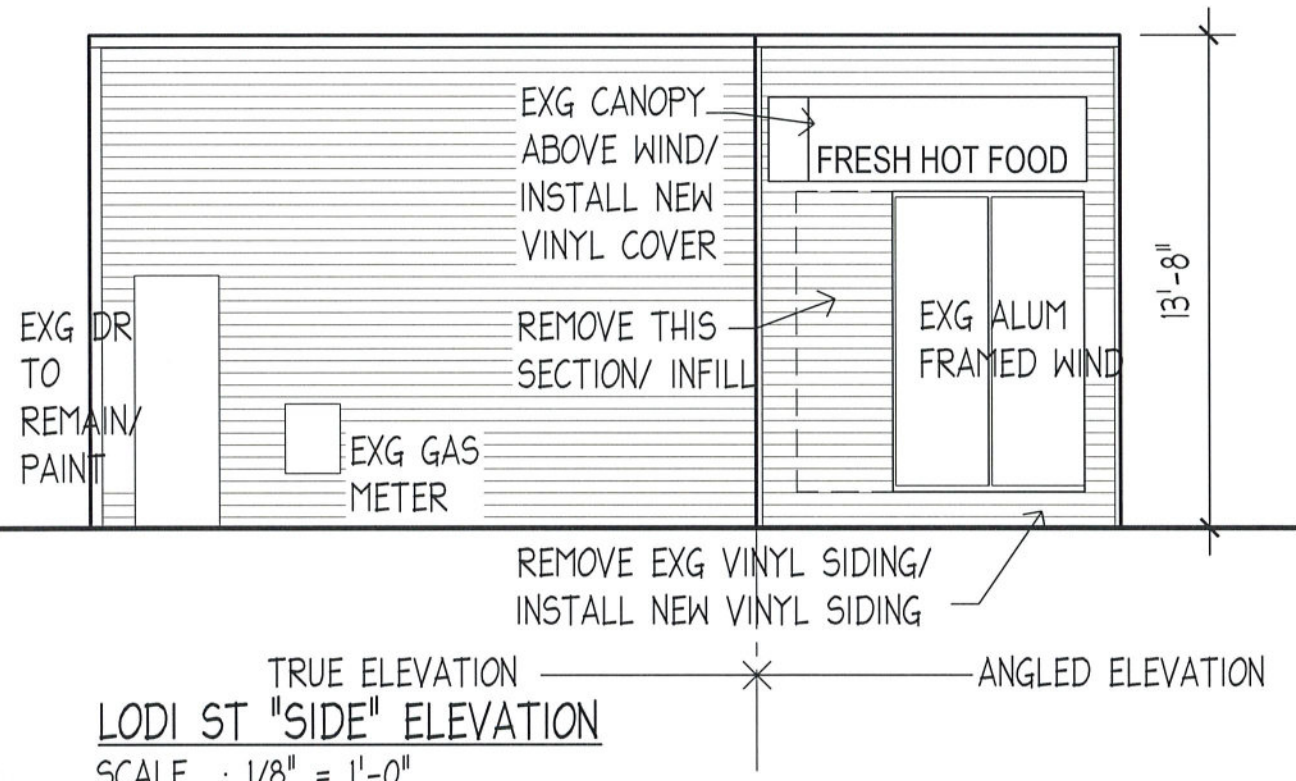
SCALE : 1/8" = 1'-0"

SHEET	A-2
DATE	3/29/2021
SCALE	AS NOTED

PROJECT NORTH	FOOD STORE and DELI
	714 CATHERINE STREET
	INTERIOR REPAIRS- NO CHANGE OF OCCUPANCY
	SYRACUSE, NY, 13203
DRAWING	FRONT AND REAR ELEVATIONS

**GROUP 1 DESIGN**  
SHEILA WEED - ARCHITECT  
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GROUPONEDSIGN.SHEILA@VERIZON.NET  
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TRUE ELEVATION  
LODI ST "SIDE" ELEVATION  
 SCALE : 1/8" = 1'-0"

ANGLED ELEVATION



CATHERINE ST "SIDE" ELEVATION  
 SCALE : 1/8" = 1'-0"

SHEET	A-3
DATE	3/29/2021
SCALE	AS NOTED

PROJECT NORTH	FOOD STORE and DELI
	714 CATHERINE STREET
	INTERIOR REPAIRS- NO CHANGE OF OCCUPANCY
	SYRACUSE, NY, 13203
DRAWING	SIDE ELEVATIONS

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

## BUILDING AND SITE SIGNAGE

Existing pole mounted sign on property to remain  
new signage panels to be installed at each side,  
same copy on each side. Location is shown  
on the property survey and site plan. Sign size is 6'w x 4'h  
(48 sq ft)



New wall mounted signage, back lit. Overall size of area of signage is 8'-0" w x 5'-9" h.  
Location is shown on building elevations on contract documents. (46 sq ft)

New wall mounted  
Vinyl canopy w/ aluminum  
Frame.  
Signage 11'w x 10"h  
(9.15 sq ft)





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**NEW BUILDING PRODUCTS**

**Applied Veneer Stone**



**Vinyl Siding**

