

Office of Zoning Administration One Park Place, 300 S State St, Suite 700 Syracuse, NY 13202 Phone: (315) 448-8640 Email: zoning@syrgov.net

# Summary of Special Use Permit Procedure

The Special Use Permit procedure is summarized below. For complete details, see Sections 7.3 and 7.4.B of the Zoning Ordinance.

1	Pre-Application Conference	Required	
2	Application Submittal and Processing	Submit to Office of Zoning Administration	Submittal and
3	Staff Review and Action	Review by Office of Zoning Administration	Internal Review
4	Scheduling and Notice of Public Hearings	Public hearing required for Common Council	Hearings and
5	Review and Decision	Review and decision by Common Council	Decision- Making
6	Post-Decision Actions and Limitations	Special use permits run with land	

### 1. Pre-Application Conference

- Opportunity for the applicant to meet with Zoning staff to review applicable submittal requirements, identify applicable procedures, and identify any issues associated with the proposed development
- 2. Application Submittal and Processing
  - Submit to Office of Zoning Administration along with applicable fees
- 3. Staff Review and Action
  - Applications are not considered complete until all required submittals are received
  - Includes evaluation of the application under the State Environmental Quality Review Act (SEQR)

## 4. Scheduling and Notice of Public Hearings

- Once an application is determined ready for a public hearing, it will be scheduled for the next available hearing date with the Common Council
- Notice of hearing is mailed to the applicant (and representative, if any), approximately 10 days prior to hearing
- Unless otherwise notified, all public hearings are held at 1:00 p.m. in Common Council Chambers on the third floor of City Hall

### 5. Review and Decision

- The Common Council shall hold a public hearing within 62 days of the application being determined complete, unless the applicant consents to an extension
- The decision on the complete application must be made within 62 days of the close of the public hearing

### 6. Post-Decision Actions and Limitations

- A special use permit shall expire if the authorized use or construction has not obtained all necessary building permits within one year of after the date of special use permit approval
- All conditions of the special use permit approval shall be met within 18 months or the approval shall become null and void



#### For Office Use Only

Zoning District: \_\_\_\_\_\_\_Application Number: SP-\_\_\_\_\_\_-\_\_\_\_

Date:

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## **Special Use Permit Application**

This application may be emailed, or mailed, or delivered in person to the Syracuse Office of Zoning Administration. Do not bind application materials. Faxed submissions will not be processed. **Email submissions must be packaged together in a single PDF with all applicable materials, please call if you want to discuss another electronic delivery method**. If you wish to discuss the application with a member of our staff, please call ahead for an appointment.

### **General Project Information**

Business/project name:					
Street address (as listed in the Syracuse Department of Tax Assessment property tax records):					
Lot numbers:	Block number:	Lot size (sq. ft.)			
Current use of property:		Proposed:			
Current number of dwelling units (if app	blicable):	Proposed:			
Current hours of operation (if applicable	e):	Proposed:			
Current onsite parking (if applicable):		Proposed:			
Zoning (base and any overlay) of property:					
Companion zoning applications (if applicable, list any related zoning applications):					
Has the owner obtained a certificate of use: $\Box$ Yes $\Box$ No					
All existing and proposed signs (sign plan may be required. Attach additional pages if necessary):					
Size: Typ	e:	Location:			
Size: Typ	e:	Location:			
Nature and extent of Special Use requested (attach additional pages if necessary):					



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# **Owner/Owner's Agent Certification**

By signing this application below, I, as the owner of the property under review give my endorsement of this				
application.				
Print owner's name:				
Signature:	Date:			
Mailing address:				
Print authorized agent's name:	Date:			
Signature:				
Mailing address:				
The names, addresses, and signatures of all owners of the property are required. Please attach additional				
sheets as needed. If a property owner designates an authorized agent as a legal representative to				
apply on their behalf or to present the project at the City Planning Commission, please attach an				
executed power of attorney. Faxed or photocopied signatures will not be accepted.				

# **Required Submittal Sheet**

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Please submit one copy of each of the following:

□ **APPLICATION** – filled out completely, dated, and signed by property owner as instructed

STATE ENVIRONMENTAL QUALITY REVIEW ACT (SEQR) – Short Environmental Assessment Form (SEAF) Part One filled out to the best of your ability, dated, and signed
 PHOTOGRAPHS (COLOR) of the PROJECT SITE – keyed to a property survey or site plan

□ **PHOTOGRAPHS (COLOR) of the STREETSCAPE** – including properties adjacent to and across the street from the project site, labeled with addresses and keyed to a property survey or site plan

# $\Box$ APPLICATION FEE – \$0

*Please submit three full sized and one no larger than 11x17" of all of the plans listed below (all plans must include a title block with author, date, scale, and the Property Tax Assessment address, and must be an accurate graphic representation of all pertinent information that can be correctly interpreted by any person without additional explanation. Plans do not need to be stamped by a licensed professional unless noted below):* 

□ **AS BUILT PROPERTY SURVEY(S)** of all involved properties illustrating boundaries and current conditions including structures, fencing, parking surface, and retaining walls (signed and stamped by a licensed surveyor)

□ **SITE PLAN(S)** illustrating site alterations and post project conditions that are/will be different from the as built property survey including:

#### **Special Use Permit Application**



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- Zoning (density, setbacks, bldg. and parking surface coverage, screening) and onsite parking requirements
- Demolitions and post demolition conditions
- Structures
- Parking areas including surface type, dimensioned spaces, number of spaces, traffic patterns, and coverage
- Loading dock and delivery areas
- Dumpsters and/or trash receptacles
- Landscaping including type, height, and number of plantings
- Screening including parking, dumpsters, and site
- Fencing including type and height
- Lighting including structure heights and luminaries wattage
- Ground signs
- Street rights-of-way conditions, existing and proposed, including curb cuts, driveways, sidewalks, and plantings
- Encroachments, existing or proposed, into the City rights-of-way including stairs, signs, and awning

□ **FLOOR PLANS** for new construction, additions, and change of zoning use/building occupancies with square footages and all applicable layouts (e.g., customer areas, kitchens, bathrooms, bedrooms, etc.) clearly labeled for land uses

□ **EXTERIOR BUILDING ELEVATIONS AND SPECIFICATIONS** with all dimensions, materials, and colors clearly illustrated and noted (Schematics or color renderings can be submitted in addition to elevation drawings, if available)

□ **PLANS REVIEW FORM** see below

**EXTERIOR SIGNAGE DRAWINGS** showing all of the following:

- Size
- Type
- Location (photos may be used to show location. Exact placement must be included for ground signs measurements from structure to sign location and distance from sign to property line (not sidewalk).
  For wall signs, the distance from the top of the sign to roofline, from ground to bottom of the sign, and measurement from the side of the building to the side of the sign must be shown)

□ **JUSTIFICATION FOR WAIVERS** in a short summary, note why waivers are requested in this special use application. For example: Additional signage (more than allowed), parking requirements (less than needed) etc.



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### **Plans Review Form**

This form is to be signed by the person who reviews the submitted plans at the Division of Code Enforcement, One Park Place, 300 S State St, Suite 700, Syracuse, NY 13202. 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, One Park Place, 300 S State St, Suite 700, Syracuse, NY 13202.

We, the Division of Code Enforcement, have received two sets of plans from

Applicant Name

\_ on \_\_\_\_\_

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.