

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: _____

R-21-12

Case #: _____

☐ Resubdivision☐ Lot Alteration**SUBJECT PROPERTY ADDRESS(ES):**

141 Temple Place Rear, Syracuse, New York 13207

150 Temple Place Rear, Syracuse, New York 13207

TAX MAP NUMBERS: (of each property involved)

Section: 083. Block: 12 Lot: 79.0

Section: _____ Block: _____ Lot: _____

Section: 083. Block: 12 Lot: 30.1

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, New York

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, Syracuse, New York

ZIP: 13203

TELEPHONE: 315-425-1032

E-MAIL: tysha@nehda.org

CURRENT LAND USES ON ALL INVOLVED PROPERTIES:

150 Temple Place Rear - Single Family Residential Property

141 Temple Place Rear - Residential Vacant Property

CURRENT DESCRIPTION OF ALL STRUCTURES ON ALL INVOLVED PROPERTIES:

150 Temple Place Rear - 2 Story, Single Family Residential with 1,842 sq. ft. of living area

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

Applicant would like the opportunity to expand the property and install fencing

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.



Signature of CURRENT PROPERTY OWNER(s) (or owners' LEGAL representative)

12/1/2020

Date

Katelyn E. 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: _____ Block: _____ Lot: _____

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

NAME: Milagros Otero

MAILING ADDRESS: 150 Temple Place Rear, Syracuse, New York

ZIP: 13207

DAYTIME PHONE: 315-876-0976

HOME PHONE: _____

E-MAIL: yadira-1977@hotmail.com

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, Syracuse, New York

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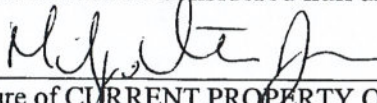
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Signature of CURRENT PROPERTY OWNER(s) (or owners' LEGAL representative)

11/9/20

Date

Milagros Otero

150 Temple Place Rear, Syracuse, New York 13207

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Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

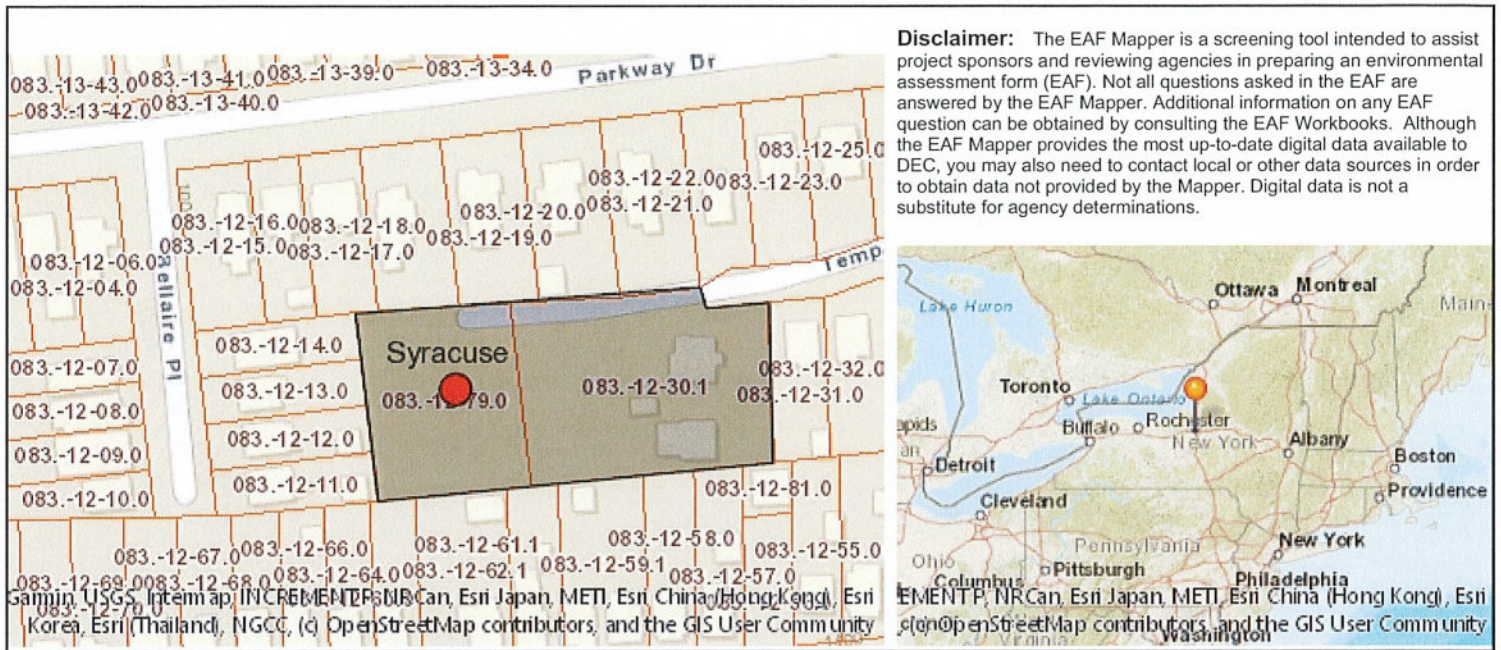
Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available.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

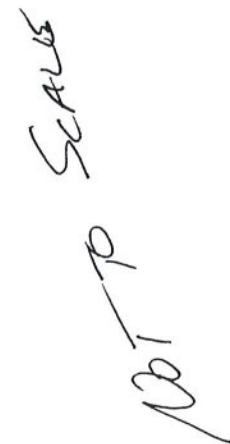
Part 1 – Project and Sponsor Information				
Name of Action or Project: Resubdivision of a Vacant Lot and a Single Family Residential Property				
Project Location (describe, and attach a location map): 141 and 150 Temple Place Rear between Belair Place and South Avenue				
Brief Description of Proposed Action: The applicant intends to resubdivide the vacant parcel at 141 Temple Place Rear with their property at 150 Temple Place Rear. The applicant wishes to utilize the vacant lot for additional greenspace. This fulfills part of the mission of the Land Bank by putting the property back into productive use. The property will return to the tax rolls, increase surrounding property values 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 <input checked="" type="checkbox"/>	YES <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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ 1.12 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? _____ 1.12 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:			
N/A - 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 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, <div style="margin-left: 40px;"> 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: <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div> </div>	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: <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div>	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: <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div>	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: <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-top: 5px;"></div>	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>Katelyn E. Wright, GSPDC</u> Date: <u>12/1/2020</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]	Yes



Notes/References:
 *Survey prepared without the benefit of an on-located abstract of title.
 †Jointer information obtained using Imaginast Online.
 ‡Buildings/Structures shown for informational purposes only.
 §Subject parcel(s) has access to public utilities.
 ¶View lot 67 B Area = 1.12 Acres.
 ¶Parcel(s) Owner = Greater Syracuse Property Development Corporation and Niagara Otter.

Proposed Only

Proposed Resubdivision on Lot 57A
of Van Schoot, Amended -
Map# 12277 and Part of Farm Lot
30. To be New Lot 57B.

Known as No. 160 Temple Place,
City of Syracuse, County of
Onondaga, State of New York.

Known as No. 150 Temple Place,
City of Syracuse, County of
Onondaga, State of New York.

Onondaga, State of New York.

Drawn by: MJM	Scale: 1" = 20'
---------------	-----------------

Date (yy): 11-27-20

is a violation of Section 7209, Subsection 2, Chapter 720, Statutes of the State of North Carolina, with an original of the land surveyor's map.

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NEHDA
101 Gertrude Street
Syracuse, NY 13203
www.nehda.org
315-425-1032

December 9, 2020

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

Re: 141 and 150 Temple Place Rear Resubdivision

Dear Jeff,

Enclosed please find the Greater Syracuse Land Bank's application for the resubdivision of 141 and 150 Temple Place Rear in the City of Syracuse.

To support our application, please find the attached information:

- Application for Resubdivision/Lot Alteration
- Short EAF
- Resubdivision Map (Delivered via Standard Mail w/ copies)
- Aerial Map

Following is the additional context relative to the subdivision of 141 and 150 Temple Place Rear.

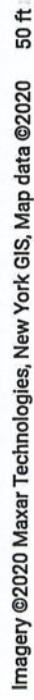
The Land Bank acquired 141 Temple Place Rear in March of 2017. The property is a large, landlocked, primarily wooded parcel measuring 126' x 147'. The applicant is the owner occupant of the adjacent property at 150 Temple Place Rear. Rather than leave the property vacant, the Land Bank would like to sell the lot to the owner occupant of the single family residential at 150 Temple Place Rear. The resubdivision will provide more defensible space and increase the property values. The homeowner will pay taxes on the land and will 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 141 Temple Pl



Map data ©2020, Map data ©2020 20 ft