



**CITY OF SYRACUSE, MAYOR SHARON F. OWENS**  
**300 South State Street, Suite 700 Syracuse, NY 13202**

Department of Neighborhood and Business Development  
 Jake Dishaw, Zoning Administrator  
 Office of Zoning Administration – P: (315)448-8640 E: Zoning@syr.gov

| <b><i>SP-2026-10</i></b>                  | <b><i>Staff Report – August 10, 2026</i></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><i>Application Type:</i></b>           | Special Use Permit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b><i>Project Address:</i></b>            | 745 N Salina St. to Lock Aly (Tax Map ID: 008.-07-04.0);                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b><i>Summary of Proposed Action:</i></b> | <p>The applicant intends to conduct interior renovations in an existing 1,462 sq ft tenant and establish a “Smoking Establishment” land use type within an existing 3-story mixed-use structure, proposing to sell Hookah devices and non-tobacco Shisha products for off-site consumption. No onsite consumption is proposed.</p> <p>“Smoking Establishment” land use types are permitted by Special Use Permit under the regulations of the MX-4 Zone District.</p> <p>No exterior work or site changes are proposed.</p> <p>Proposed hours of operation: 12PM – 10PM M-Sun</p> <p>Total site area: 0.086 Acres / 3,720 sq ft</p>                                                                                                                                                                                                                                                                                                           |
| <b><i>Owner/Applicant</i></b>             | Nhu Nguyen (Owner)<br>Shabeema Smith (Applicant & Representative)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b><i>Existing Zone District:</i></b>     | Urban Core (MX-4) Zone District                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b><i>Surrounding Zone Districts:</i></b> | The neighboring properties to the north, south, and east are within the Urban Core MX-4 Zone District; the neighboring properties to the south are within the Mixed-Use Transition, MX-3 Zone District.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b><i>Companion Application(s)</i></b>    | No companion applications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b><i>Scope of Work:</i></b>              | <p>Exterior work:</p> <p>(1) None proposed</p> <p>Interior work:</p> <p>(1) Building out 1<sup>st</sup> floor for retail sales of tobaccoless hookah products for off-site consumption 1,462 sqft.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b><i>Facts on Project:</i></b>           | <p><b><u>Existing Conditions</u></b></p> <ul style="list-style-type: none"> <li>- The existing site is a 3 story mixed use structure with the a storage area in the basement, the subject commercial space on the first floor, a vacant commercial space on the second floor, and a dwelling unit on the third floor. The rear of the property is covered by crushed gravel aggregate and is utilized as parking, though none is required for the site.</li> </ul> <p><b><u>Nonconformities</u></b></p> <ul style="list-style-type: none"> <li>- No nonconformities exist or are proposed.</li> </ul> <p><b><u>Dimensional Standards</u></b></p> <ul style="list-style-type: none"> <li>- The existing lot meets all Dimensional standards of the MX-4 Zone District.</li> <li>- The existing coverage of three current individual lots is 100%, which exceed the maximum allowable coverage of 95% is below 95%, thus conforming.</li> </ul> |

|                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                               | <p><b><u>Use Specific Standards</u></b></p> <ul style="list-style-type: none"> <li>- A Certificate of Use must be obtained prior to operating the new business.</li> </ul> <p><b><u>Local Land Use and Residential Compatibility</u></b></p> <ul style="list-style-type: none"> <li>- The site is Urban Core Zone District (MX-4), where the commercial use type “Smoking Establishment” is permitted by Special Use Permit. This use would continue to diversify the land uses along this section of N Salina St. Nearby land uses include “Office”, “Dwelling, Multi-Units”, “Beverage Café”, “Assembly”, “Personal Services”, and “Retail, General” land use types and another “Smoking Establishment” land use type for a cannabis dispensary further north along N Salina St.</li> </ul> <p><b><u>Off-Street Parking and Loading</u></b></p> <ul style="list-style-type: none"> <li>- The lot is exempt from minimum parking requirements due to the small size of the lot, 3,720 sq ft whereas 5,000 and below are exempt from parking requirements.</li> </ul> <p><b><u>Landscaping, Buffering, and Screening</u></b></p> <ul style="list-style-type: none"> <li>- No buffering, landscaping, or screening is required or proposed as all neighboring properties are also within the MX-4 Zone District.</li> </ul> <p><b><u>Site, Building Design, and Exterior Lighting</u></b></p> <ul style="list-style-type: none"> <li>- The current front setback and façade of the structure is well maintained, the sidewalk is in good repair. In the rear of the structure is an unpaved gravel parking lot that connects to Lock Alley, no changes are proposed.</li> </ul> <p><b><u>Signage</u></b></p> <ul style="list-style-type: none"> <li>- No signage has been proposed at this time.</li> <li>- Any proposed signage requires separate building permits subject to review by the Zoning Administration, Central Permit Office, and Preservation Planner if applicable.</li> </ul> <p><b><u>Historic Preservation</u></b></p> <ul style="list-style-type: none"> <li>- This property is on the City’s Historic Properties list and has been reviewed by the Historic Preservation Planner.</li> </ul> <p><b><u>Additional Standards, Building Placement, and Transparency</u></b></p> <ul style="list-style-type: none"> <li>- The existing building has adequate window transparency, any signage within windows must maintain at least 40% transparency on the 1<sup>st</sup> floor.</li> </ul> |
| <p><i>Staff Analysis:</i></p> | <p><b><u>Special Use Permit Approval Criteria</u></b></p> <p><b>Consistency with the Intent of the Zoning Ordinance &amp; Comprehensive Plan and Other City Policies</b></p> <p>The proposed use is permitted by Special Use Permit in the MX-4 zone district and will reoccupy a vacant commercial tenant space on the first floor along N Salina St.</p> <p><b>Compliance with applicable Standards of the Zoning Ordinance and other municipal departments’ standards</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

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|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                     | <p>All interior work shall obtain applicable permits prior to construction from the Central Permit Office.</p> <p><b>Compatibility with the Surrounding Area</b><br/>The surrounding street character is largely commercial in nature with small restaurants, assembly uses, retail sales smoking establishments, and general retail land use types up and down this section of N Salina St.</p> <p><b>Compatible with the development of the general neighborhood and existing land uses</b><br/>Neighboring and nearby land use types are largely consistent with the proposed “Smoking Establishment” land use type, all operations are proposed within the existing structure and a CPTED review is recommended as a Condition of Approval.</p> <p><b>Impacts on pedestrian and vehicular traffic</b><br/>No parking is required due to the small size of the lot which is under the minimum 5,000 sq ft to necessitate onsite parking. On-street parking is available up and down N Salina St.</p> <p><b>Minimization of Adverse Impact on Health, Safety, and Welfare</b><br/>The project proposes no exterior alterations that would create hazardous conditions or encourage them, and no consumption of products sold on site shall be permitted without the prior establishment of a lounge.</p> <p><b>Impacts on development of the subject property and the use of adjacent land and buildings</b><br/>The project proposes no exterior alterations as there will be no physical impact to the nearby properties.</p> <p><b>Adequate Supporting Service</b><br/>Any fire or life safety alterations will require review and inspection by the City of Syracuse Code Enforcement prior to the issuance of the Certificate of Occupancy or Use.</p> |
| <b><i>Staff Recommendation:</i></b> | <b>Staff recommend approving this project.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

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|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><i>Recommend conditions if approved:</i></b> | <ol style="list-style-type: none"> <li>1. The applicant shall comply with the general conditions for approval of a Special Use Permit. (See the attached sheet General Conditions for Special Use Permit)</li> <li>2. A Certificate of Use must be maintained and renewed every two years while the business is in operation.</li> <li>3. A Crime Prevention Through Environmental Design shall be conducted and the recommendations implemented during the permitting process.</li> </ol>                                                                                                                                       |
| <b><i>Zoning Procedural History:</i></b>        | SP-02-13   Restaurant known as <i>White Dove Tea Room</i>   Approved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b><i>Summary of Zoning History:</i></b>        | In 2002 the subject tenant space was approved for a “Restaurant” land use type for <i>White Dove Tea Room</i> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b><i>Code Enforcement History:</i></b>         | See attached code enforcement history.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b><i>Zoning Violations:</i></b>                | The proposed lot has no zoning violations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b><i>Summary of Changes:</i></b>               | This is not a continued application.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b><i>Property Characteristics:</i></b>         | <p><b><u>Existing property characteristics</u></b></p> <p>The subject property at 745 N Salina St. to Lock Alley is a rectangular shaped parcel with a lot size of 3,720 sq ft (0.085Acres). The property has two street frontages with 27.9 FT of eastern frontage along N Salina St., and 28 FT of western frontage along Lock Alley. To the north the property line borders 753 N Salina St. to Lock Alley for 132 FT to the north. To the south, the property line borders 741 N Salina St. for 132 FT. To the west, the parcel contains a gravel parking lot and to the east is the subject 3 story mixed-use building.</p> |
| <b><i>SEQR Determination:</i></b>               | Pursuant to the 6 NYCRR §617.5(c), the proposal is a Type II Action.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b><i>Onondaga County</i></b>                   | Pursuant to GML §239-l, m and n, the proposal qualifies for referral by the Onondaga                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

**Planning Board  
Referral:**

County Planning Board, however is exempted by an intermunicipal agreement between the City of Syracuse and OCPB.

**Application Submittals:** The application submitted the following in support of the proposed project:

- Special Use Permit Application
- Short Environmental Assessment Form Part 1 OR Full Environmental Assessment Form
- Site Plan Package ( Sheet C101, C-003, C-001, C-003,C-004, C-401,C-501 ) Proposed Commercial Development, 1201-1207 W Genesee ST, Specialty Properties, LLC 1200 State Fair Blvd. Onondaga County, City of Syracuse, New York; Drawn by CHA Consulting LLC ,Dated 10/30/2025, ; Scale: As shown
- Property Survey Known as No. 745 North Salina Street, City of Syracuse, County of Onondaga, State of New York; Drawn by Michael J. McCully of Michael J. McCully Land Surveying PLLC; Dated 08/22/2025; Scale: 1" = 20'

**Attachments:**

Special Use Permit Application  
Code Enforcement History

Comments from City Departments

**Context Maps:**

**Figure 1: Zone District of Subject Property**



Description: Figure 1 shows the current Zone District of the subject property.

Image Source: City of Syracuse Neighborhood and Business Development, Syracuse Zoning Map

**Figure 2: Aerial Imagery of Subject Property**



Description: Figure 2 shows satellite imagery of the subject property.

Image Source: Onondaga County GIS on the Web, <https://spatial.vhb.com/onondaga/>



PUBLIC NOTICE

ON THIS SITE, SP-2026-10 IS A SPECIAL USE PERMIT.  
APPLICATION TO ESTABLISH A "SMOKING ESTABLISHMENT"  
LAND USE TYPE AT 745 N SALINA ST.

THE PROPERTY IS OWNED BY NHU NGUYEN AND IS IN THE  
URBAN CORE (MX-4) ZONE DISTRICT.

THIS MATTER WILL BE DISCUSSED AT A PLANNING COMMISSION  
MEETING ON MONDAY, AUGUST 10TH, 2026, AT 6:00 P.M. IN THE  
COMMON COUNCIL CHAMBERS, CITY HALL, SYRACUSE, NEW  
YORK.

FOR MORE INFORMATION VISIT [SYR.GOV/PC](http://SYR.GOV/PC).

ADT  
SECURITY



# Office of Zoning Administration

CITY OF SYRACUSE, MAYOR SHARON F. OWENS

**Jacob R. Dishaw**  
Zoning Administrator

**Noah Garcia**  
Director of Zoning

**Haohui Pan**  
Assistant Director of  
Zoning

**Conor Rourke**  
Land Use & Zoning  
Attorney

**Masihullah Omary**  
Zoning Planner II

**Rebeca Baker**  
Zoning Planner I

**Samuel Prescott**  
Zoning Planner I

**Hillary Suzuki**  
Zoning Administrative  
Specialist

Nhu Nguyen  
745 N salina St.  
Syracuse, NY 13208  
7/15/2026

Re: Application Completeness for City Planning Commission for 745 N Salina St.

Dear Nhu,

On 7/14/2026, Noah Garcia determined the proposed project SP-2026-41 at 745 N Salina St. to be **complete**.

The proposed project will be sent to all involved agencies for review. Once all reviewers from City Departments complete their review and all concerns have been addressed, the proposed project will be scheduled for the next available City Planning Commission (CPC) meeting for a public hearing. No evidence, except items specifically required by the Board or offered for a reconsideration or modification, shall be accepted after a hearing is closed for public comment or testimony.

All landowners and applicants shall appear in person at the hearing, or by a properly authorized representative or agent. An authorized agent who is thoroughly familiar with all aspects of the appeal and who is able to testify as to all issues may appear if he or she holds a properly signed and executed document showing that they have authority to proceed on behalf of the landowner or applicant. Proof of signed and executed document must be submitted to Noah Garcia at least six (6) business days before the public hearing and must be notarized. Failure to have representation appear before the City Planning Commission two consecutive meetings will result in your project proposal to be denied. Any updates to deliverables (such as site plan, changes in proposed work etc.) must be submitted to Noah Garcia at least six (6) business days before the date of the hearing.

If the proposed project is held open for another public hearing and/or meeting to resolve any outstanding concerns, updated plans or any other requested documents shall be submitted to Zoning Administration staff NO FEWER than six (6) days prior to the hearing. Failure to submit by this deadline shall cause the item to be removed from the next meeting agenda.

**GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.**

Office of Zoning Administration 300 South State Street, Suite 700 Syracuse, NY 13202

Office 315 448 8640 [zoning@syr.gov](mailto:zoning@syr.gov) [www.syr.gov](http://www.syr.gov)

## Your Submission Details

**Submission Number:**

SP-2026-10

**Status:****Staff Review****Message:****Applicant Name:**  
Shabeema Smith**Applicant Email:****Primary Location:**

745 Salina St N To Lock Aly, syracuse, New York 13208

**Primary APN:**

N/A

**Submission Type:**

Zoning Applications &gt; Special Use Permit

**Last Updated:**

August 4, 2026

**Submission URL:**<https://app.oncamino.com/syracuseny/dashboard/submissions/671783/guide>**Contact the agency for more help**

(315) 448-8600

zoning@syr.gov zwu@syr.gov hpan@syr.gov ngarcia@syr.gov  
adillon@syr.gov300 South State St.,  
Syracuse

### ① Getting Started

#### ○ Welcome to the City of Syracuse's Online Application Portal

Step is Completed By: Applicant



Welcome to the City of Syracuse's Online Application Portal.

As part of the application portal, we will inform you of your application and submittal requirements, fees, and renewal cadences.

If you'd like to visit us in person to drop off your application and fees, you can submit it to:

**City of Syracuse, Central Permit Office**

One Park Place

300 South State St.

Syracuse, NY 13202

### ② Apply for a Permit

#### ✓ Pre-Application Conference is Required for Variance

**Group:** Zoning**Step is Completed By:** Applicant

A Pre-Application Conference is required for Variance applications. This meeting is an 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. Please contact 315-448-8640 to schedule.

Please click Mark as Complete above to acknowledge understanding of this requirement and next step.

## ✓ Special Use Permit Application and Review Process

Group: Zoning

Step is Completed By: Applicant

|   |                                          |                                                                                                                                |
|---|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| 1 | Pre-Application Conference               | Option for minor; required for major site plan                                                                                 |
| 2 | Application Submittal and Processing     | Submit to Office of Zoning Administration                                                                                      |
| 3 | Staff Review and Action                  | Review by Office of Zoning Administration for minor and major; decision by Office of Zoning Administration for minor site plan |
| 4 | Scheduling and Notice of Public Hearings | Optional for minor; required for major site plan                                                                               |
| 5 | Review and Decision                      | Does not apply for minor; review and decision by City Planning Commission for major                                            |
| 6 | Post-Decision Actions and Limitations    | Site plan expires after one year (unless extended)                                                                             |

Submit  
Internal

Hearing  
Decis  
Mak

### 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)
- Staff renders a decision for minor site plan review

### 4. Scheduling and Notice of Public Hearings

- Not applicable for minor site plan
- The major site plan application shall be scheduled for a public hearing before the City Planning Commission

### 5. Review and Decision

- For major site plans, the City Planning Commission shall hold a public hearing within 62 days of the determination that the application is complete

### 6. Post-Decision Actions and Limitations

- The Office of Zoning Administration shall mail a copy of the decision to the applicant
- Site plan approval shall expire if the authorized use or construction has not obtained all necessary permits within one year of approval, or an extension is granted

## ✓ Special Use Permit Details

Group: Zoning

Step is Completed By: Applicant

## ✓ Proposed Signs Details

Group: Zoning

Step is Completed By: Applicant

Please upload additional pages if more than 2 signs are being proposed.

## ③ Required Information

### ✓ Complete Environmental Assessment Form Part 1

Group: Zoning

Step is Completed By: Applicant

Please download and use one of the two attachments. Either a **completed and signed** Short Environmental Assessment Form Part 1 or Full Environmental Assessment Form Part 1 shall be uploaded.

#### 4 Required Supplemental Documentation

##### ☒ Upload Photographs of the Project Site

**Group:** Zoning

**Step is Completed By:** Applicant

Please upload photographs of the project site. These should be keyed to a property survey or site plan.

##### ☒ Upload Photographs of the Streetscape

**Group:** Zoning

**Step is Completed By:** Applicant

Please upload photographs 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.

##### ☒ Upload As Built Property Surveys

**Group:** Zoning

**Step is Completed By:** Applicant

Please upload as built property surveys of all involved properties illustrating boundaries and current conditions including structures, fencing, parking surface, and retaining walls (signed and stamped by a licensed surveyor).

##### ☐ Upload Site Plans

**Group:** Zoning

**Step is Completed By:** Applicant

Please upload site plans illustrating site alterations and post project conditions that are/will be different from the as built property survey including:

- 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

##### ☒ Upload Exterior Signage Drawings

**Group:** Zoning

**Step is Completed By:** Applicant

Please upload 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)

#### 5 Application Attestation & Signature

##### ☒ Application Attestation & Signature

**Group:** Central Permit Office

**Timeline:** 1 days

**Step is Completed By:** Applicant

#### 6 Acknowledgement

##### ☒ Download, Complete, and Upload Power of Attorney

**Group:** Zoning

**Step is Completed By:** Applicant

You indicated that you are an authorized agent applying on behalf of the property owner. Please download the attached Durable Power of Attorney, complete it, notarize, and upload back to this step as part of the application.

## 7 Reviews and Approvals

### ☐ Zoning Review

Group: Zoning

Step is Completed By: Agency

### ☐ DPW Traffic Control Review

Group: DPW

Step is Completed By: Agency

Syracuse Staff will comment on this step if there are any questions or concerns related to your application.

### ☐ DPW Transportation Review

Group: DPW

Step is Completed By: Agency

Syracuse Staff will comment on this step if there are any questions or concerns related to your application.

### ☐ Engineering- SWPPP Review

Step is Completed By: Agency

### ☒ Parks and Forestry Review

Group: Parks

Step is Completed By: Agency

Syracuse Staff will comment on this step if there are any questions or concerns related to your application.

### ☐ Engineering- Mapping Review

Step is Completed By: Agency

### ☐ Engineering Design and Construction Review

Group: Engineering

Step is Completed By: Agency

Syracuse Staff will comment on this step if there are any questions or concerns related to your application.

### ☒ DPW Sanitation and Sewers Review

Step is Completed By: Agency

### ☒ Historical Preservation Review

Group: Preservation Planner

Step is Completed By: Agency

Please complete the property review for any additional required documentation or approvals applicable given protected site or National Register of Historic Places status.

## 8 Reviews

### ☐ Zoning Review

Group: Zoning

Step is Completed By: Agency

Questions and Answers

1

Have you already had a pre-conference meeting with the City regarding this application?

Yes

No

2

Are you the property owner?

Yes

No

3

Is signage being proposed with this application?

Yes

No

4

Does this application include proposals for new construction, additions, or change of use?

Yes

No

Data Fields

General Project Information

1

Sign 2 Location

2

Sign 2 Type

3

Sign 2 Size

4

Sign 1 Location

Window sign

5

Sign 1 Type

Window sign

6

Sign 1 Size

20x20

7

Nature and Extent of Special Use Requested

Special use for the sale of tobacco vape products

8

Has the owner obtained a certificate of use?

No

9

Proposed Number of Dwelling Units (if applicable)

1.0

10

Current Number of Dwelling Units (if applicable)

1.0

11

Companion Zoning Applications (if applicable, list any related zoning applications)

Hookah retail store

12

Proposed Onsite Parking

Back parking

13

Current Onsite Parking

On street and back parking

14

Proposed Hours of Operation

12pm-10 pm

15

Current Hours of Operation

16 Block Number

745

17 Lot Number

745

18 Zone District

Syracuse

19 Proposed Use of the Property

Hookah retail store

20 Current Use of the Property

Occupancy change

21 Lot Size (sq ft)

4725

22 Business/Project Name

New adventures hookah supply store

**Disclaimer**

This PDF was generated on August 4, 2026 and may be out of date.

As the below signature, I attest that all required pieces of information have been provided and that all information contained within said application is correct.

Applicant Signature

Shabeena Smith

Date

02/05/2026

## DRAWING INDEX

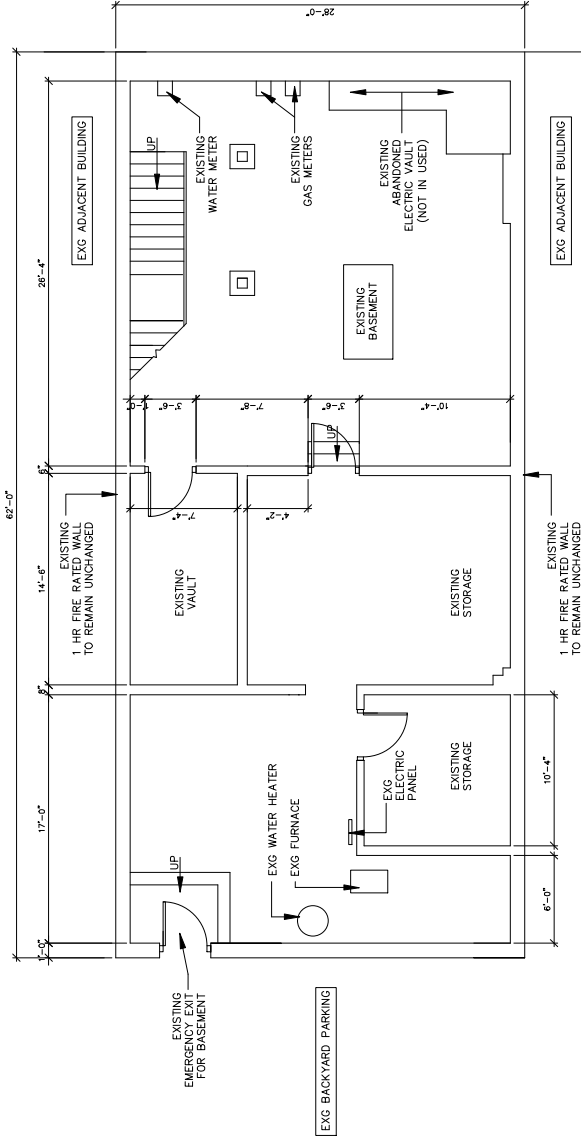
COVER SHEET



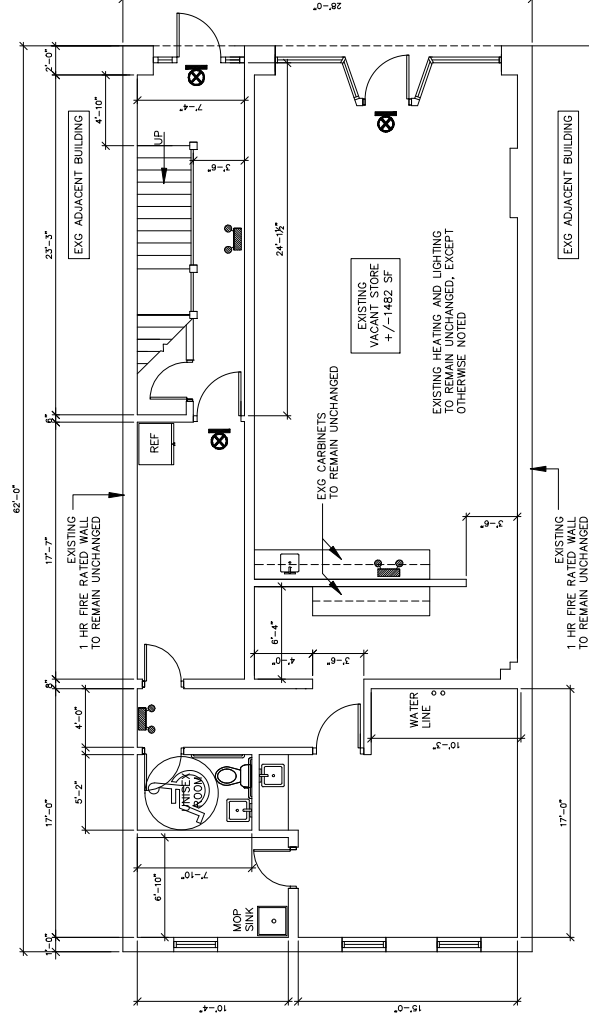
ANTHONY PHAN - 315-622-8186 - ANTHONYPHAN712@YAHOO.COM  
JANUARY 25, 2026

| DRAWING INDEX |                                                                    | DESIGN CRITERIA                                                                                                                    |                                                                                                        |
|---------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| A0            | COVER SHEET                                                        | TENANT/APPLICANT:                                                                                                                  | NHU NGUYEN                                                                                             |
| A1            | EXISTING SITE SURVEY – FOR REFERENCE ONLY                          | PROPERTY LOCATION:                                                                                                                 | 745 N. SLAUS STREET<br>STROUSE, NY 12086                                                               |
| A2            | EXISTING BUILDING FLOORS PLANS – FOR REFERENCE ONLY                | THE FOLLOWING INFORMATION IS<br>BASED ON THE 2020 BUILDING CODE, NYS<br>2020 FIRE CODE NYS<br>2020 PLUMBING CODE<br>2020 HVAC CODE |                                                                                                        |
| A4            | EXISTING BUILDING FLOORS PLANS AND ELEVATIONS – FOR REFERENCE ONLY | -BUILDING GROSS AREA:                                                                                                              | 4,725 SF                                                                                               |
| A5            | THIRD FLOOR RENOVATION PLAN & REFLECTED CEILING PLAN               | RENOVATION AREAS SOFT-:                                                                                                            | 1,208 SF (3RD FLOOR)                                                                                   |
| M1            | THIRD FLOOR HVAC SCHEDULES AND DETAILS                             | OCCUPANCY / USE GROUP:                                                                                                             | 3579 SF (B, I1 & A) FL                                                                                 |
| M2            | THIRD FLOOR HVAC NOTES AND DETAILS                                 | -OCCUPANCY / USE GROUP                                                                                                             |                                                                                                        |
| E1            | THIRD FLOOR LIGHTING LAYOUT AND POWER PLAN                         | CLASSIFICATION:                                                                                                                    | MIXED OCCUPANCY – SEPARATED<br>APARTMENT BLDG – R2                                                     |
| E2            | THIRD FLOOR ELECTRICAL SWITCH / PANEL SCHEDULES                    | -ZONING CLASSIFICATION                                                                                                             | BA – LOCAL BUSINESS DISTRICT<br>CLASS A – 1,2,3 AND MULTIFAMILY<br>DWELINGS AND APARTMENT BLDG ALLOWED |
| P1            | THIRD FLOOR PLUMBING NOTES AND DETAILS                             | -ALLOWABLE FIRE AREA:                                                                                                              | EXISTING BUILDING, 3 STORY / 7000 SF                                                                   |
|               |                                                                    | -BUILDING FIRE AREA:                                                                                                               | EXISTING BUILDING, 3 STORY / 4,725 SF                                                                  |
|               |                                                                    | -CONSTRUCTION TYPE:                                                                                                                | VB                                                                                                     |
|               |                                                                    | (NON-COMBUSTIBLE, UNPROTECTED)                                                                                                     |                                                                                                        |
|               |                                                                    | -BUILDING HEIGHT & AREA LIMITATIONS:                                                                                               | 12,000 S/F FLOOR for 3-STORY                                                                           |
|               |                                                                    | -MEANS OF EGRESS:                                                                                                                  | TABLE 1077.2                                                                                           |
|               |                                                                    | NUMBER OF EXITS REQUIRED:                                                                                                          | 2                                                                                                      |
|               |                                                                    | LENGTH OF EXIT ACCESS TRAVEL:                                                                                                      | MAXIMUM PERMITTED 15 FT MAX                                                                            |
|               |                                                                    | CAPACITY OF EGRESS:                                                                                                                | 750-PERSON                                                                                             |
|               |                                                                    | -FIRE RESISTANCE RATINGS OF BUILDING:                                                                                              | TABLE 508.4                                                                                            |
|               |                                                                    | STAIR ENCLOSURE:                                                                                                                   | 1-HR (UL 465)                                                                                          |
|               |                                                                    | FLOOR TO FLOOR:                                                                                                                    | 1-HR (UL 465)                                                                                          |
|               |                                                                    | APARTMENT TO HALL / STAIR:                                                                                                         | 1-HR (UL 465)                                                                                          |
|               |                                                                    | FIRE RATED WALL:                                                                                                                   |                                                                                                        |
|               |                                                                    | -FIRE PROTECTION SYSTEMS:                                                                                                          |                                                                                                        |
|               |                                                                    | ALARM/SIGNALING SYSTEM:                                                                                                            | NOT REQUIRED, EXISTING                                                                                 |
|               |                                                                    | PORTABLE FIRE EXTINGUISHERS:                                                                                                       | REQUIRED, SEE DRAWINGS                                                                                 |

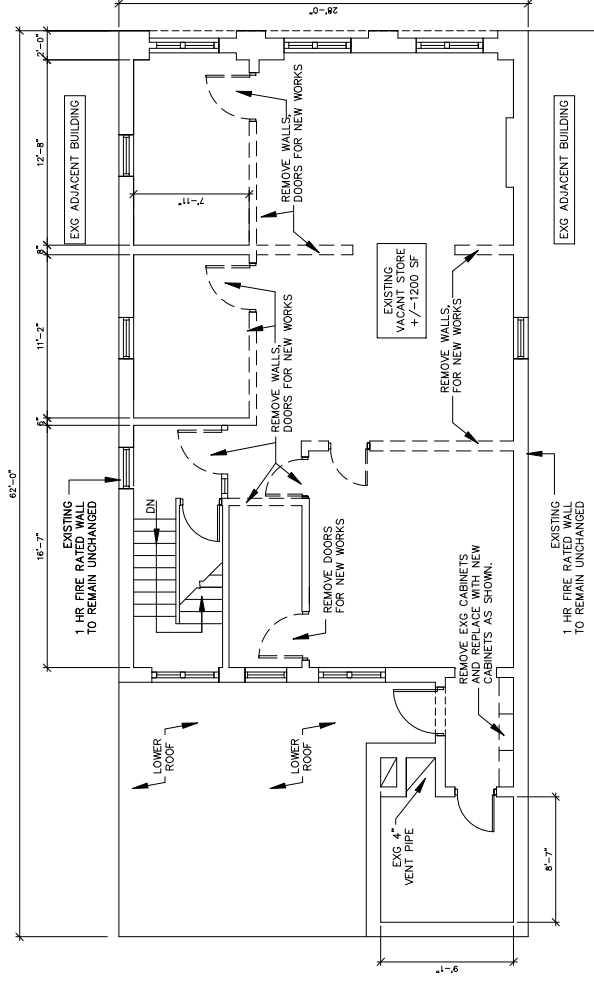
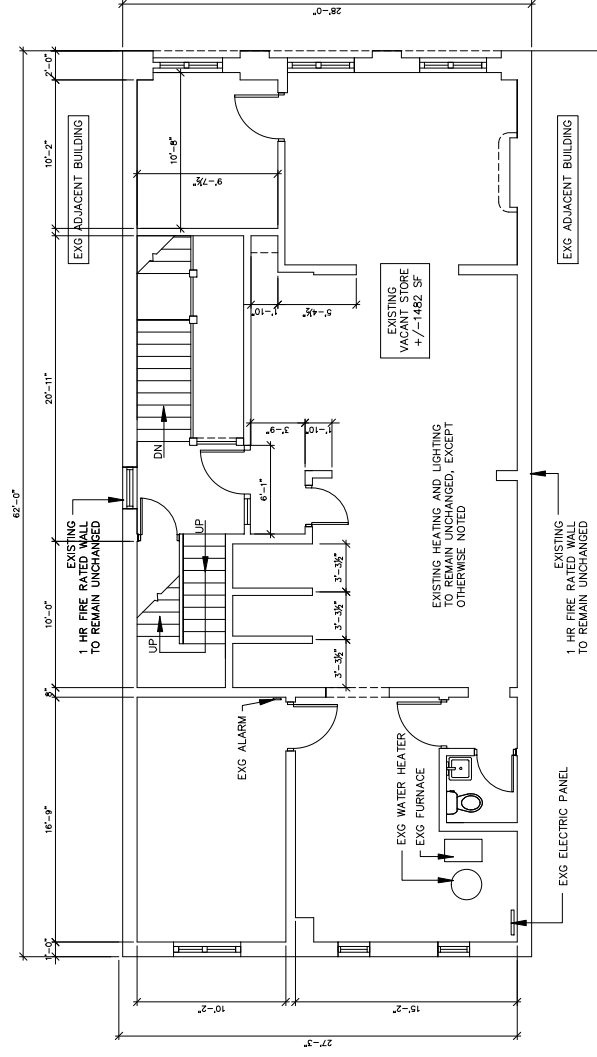




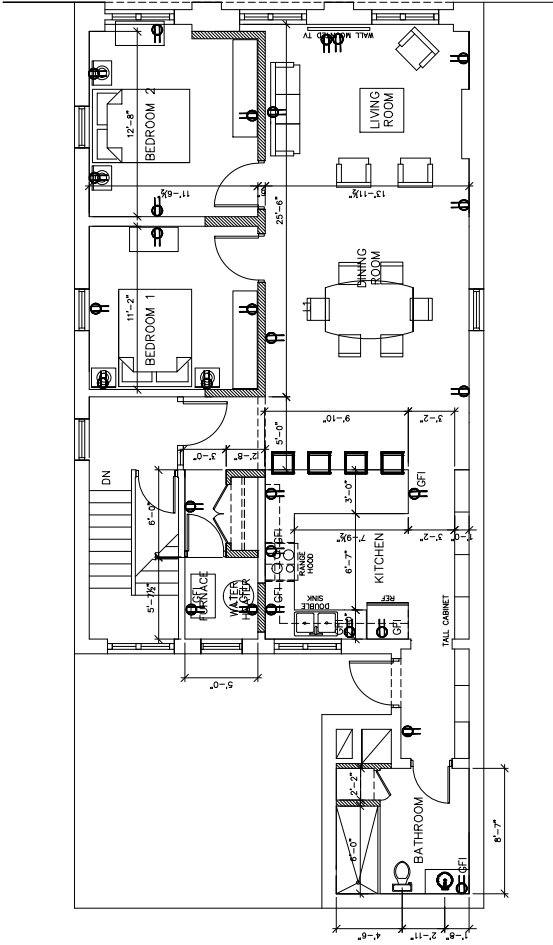
1. EXISTING BASEMENT FLOOR PLAN - NO PROPOSED WORK - FOR REFERENCE ONLY



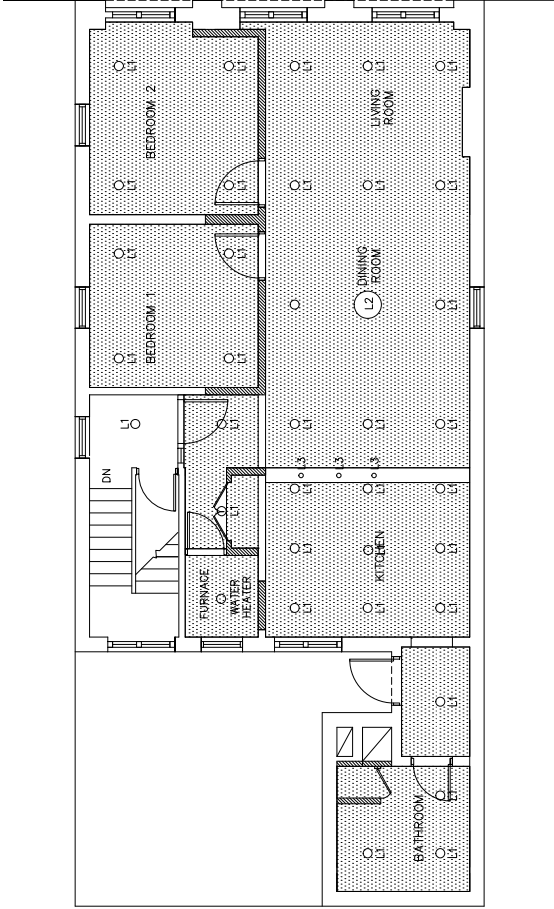
2. EXISTING FIRST FLOOR PLAN - NO PROPOSED WORK - FOR REFERENCE ONLY



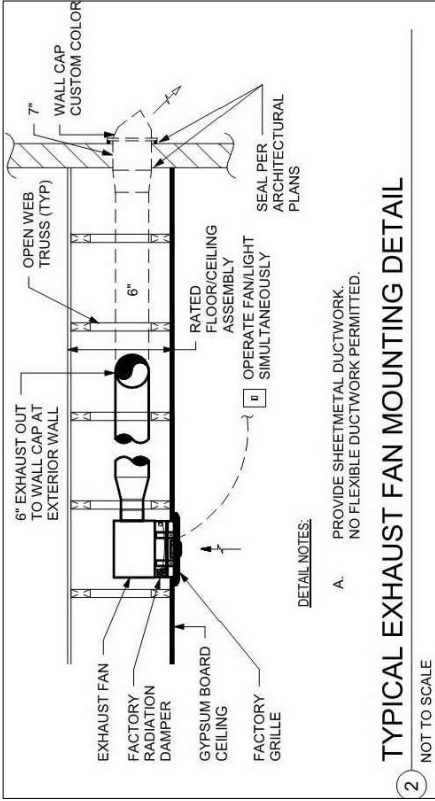
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|  | <div data-bbox="196 373 745 1274"> </div>                                                                                                                | <div data-bbox="1133 31 1157 149" data-label="Text"> <p>Drawn By: AP</p> </div> <div data-bbox="1157 31 1185 149" data-label="Text"> <p>Scale: 1/4" = 1'-0"</p> </div> <div data-bbox="1185 31 1213 149" data-label="Text"> <p>Date: 01-25-2026</p> </div> <div data-bbox="1213 31 1240 149" data-label="Text"> <p>Rev.</p> </div> <div data-bbox="1240 31 1349 149" data-label="Text"> <p>EXG<br/>BUILDING<br/>FLOOR<br/>PLANS</p> </div> | <div data-bbox="1365 31 1481 149" data-label="Text"> <p>A4</p> </div>                                                                                            |
|  | <div data-bbox="462 31 1019 149" data-label="Text"> <p>745 NORTH SALINA STREET - SYRACUSE, NY 13208</p> <p>THIRD FLOOR RENOVATION PROJECT</p> </div>     |                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                  |
|  | <div data-bbox="776 258 803 1358" data-label="Section-Header"> <p>5. EXISTING ROOF / ATTIC FLOOR PLAN - NO PROPOSED WORK - FOR REFERENCE ONLY</p> </div> | <div data-bbox="831 913 1435 1362" data-label="Image"> </div>                                                                                                                                                                                                                                                                                                                                                                              | <div data-bbox="1446 186 1474 1446" data-label="Section-Header"> <p>6. EXISTING BUILDING ELEVATIONS - NO PROPOSED RENOVATION WORK -FOR REFERENCE ONLY</p> </div> |
|  |                                                                                                                                                          | <div data-bbox="831 384 1422 768" data-label="Image"> </div>                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                  |



7. THIRD FLOOR PLAN - PROPOSED RENOVATION



8. THIRD FLOOR REFLECTED CEILING PLAN - PROPOSED RENOVATION



2 NOT TO SCALE

**TYPICAL EXHAUST FAN MOUNTING DETAIL**

### HVAC SPECIFIC NOTES

- ALL ROOF TOP UNITS AND EXISTING HVAC SYSTEM (HEATING, VENTILATING, AND AIR CONDITIONING) TO BE REMAIN UNCHANGED. CONTRACTOR TO VERIFY ALL EXISTING SYSTEMS ARE IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL REQUIREMENTS. ALL NEW WORK SHALL BE IN COMPLIANCE WITH NEW YORK STATE EXISTING BUILDING ENERGY AND FIRE CODE. HVAC SYSTEM SHALL BE TESTED AND BALANCED BY HVAC CONTRACTOR TO INSURE PROPER AIR FLOW TO ALL AREAS.
- HVAC CONTRACTOR TO PROVIDE RECESSED DRYER VENT BOX (MODEL # DBX1000, CONSTRUCTION SOLUTIONS) AT DOUBLE STACKED DRYERS/WASHERS AREA THRU ROOF OR WALL. WATER TIGHT ALL PENETRATIONS.
- HVAC CONTRACTOR TO PROVIDE VENTILATION SYSTEM PER 403.3.1, b, h (2020 IMC).
  - PROVIDE ONE (1) VENTILATORS MANUFACTURE MODEL: BROAN-671 BATHROOM.
- PROVIDE CONDENSATE DRAIN WITH TRAP AT UNITS WHICH DRAIN TO CLOSET FLOOR SINK. PROVIDE CONDENSATE OVERFLOW. SWITCH DEVICE SHALL BE INSTALLED INSIDE THE PRIMARY DRAIN PAN.
- MOUNT THERMOSTAT AT 48" ABOVE FINISHED FLOOR
- INSTALL DUCT ACCESSORIES ACCORDING TO APPLICABLE DETAILS IN "SMACNA'S "HVAC DUCT CONSTRUCTION STANDARDS METAL AND FLEXIBLE.
- ALL WORK SHALL BE EXECUTED AND INSPECTED IN STRICT ACCORDANCE WITH ALL LOCAL CODES AND/OR STATE CODES, RULES AND REGULATIONS APPLICABLE TO THIS CLASS OF WORK.

### SPLIT SYSTEM AIR CONDITIONING UNIT

DESIGN EQUIPMENT: INDOOR UNIT MODEL: SAMSUNG AC030KNZDCH/AA  
OUTDOOR UNIT MODEL: SAMSUNG AC030BVSCH/AA

| SERVICE | CFM          | (H/M/L) | COOLING (95 DA0DB) | HEATING (5 DA0DB) | INDOOR ELECTRICAL | OUTDOOR ELECTRICAL    |
|---------|--------------|---------|--------------------|-------------------|-------------------|-----------------------|
| 3RD FL  | 1006/918/818 | 30000   | 20.3               | 32000             | 10.6              | 208 1 24.6 208 1 32.1 |

- PROVIDE UNIT WITH LOW AMBENT OPTIONS WIND Baffles AND BASE HEATER UNIT TO PROVIDE 100% HEATING CAPACITY @ 4 DEGREE F.
- PROVIDE UNIT WITH WALL MOUNTED WIRE REMOTE CONTROLLER WIRING-WOODEN
- PROVIDE UNIT WITH 1/2" WIDE DUCT COLLAR. SAME SIZE AS RETURN/EXHAUST GRILLE FACE
- PROVIDE UNIT WITH EXTERIOR WALL BRACKET AND HALL GUARD MID (ON-250, HSK-5)
- PROVIDE UNIT WITH SAW SUPPLEMENT HEAT KIT VHK-205A
- PROVIDE TWO SHIELD TIES FOR EACH UNIT TO BE LEFT IN THE MECHANICAL ROOM.

### DUCTWORK MATERIALS

| SERVICE                                  | MATERIAL                                                   | JOINT CONSTRUCTION                              | INSULATION                                                                          |
|------------------------------------------|------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------|
| SUPPLY                                   | LOOK FORMING QUALITY, GALVANIZED GAL STEEL ASTM 525 or 527 | FLANGED W/ BUTYL GASKET, BRUSH ON, SEAL CLASS C | EXPOSED: 1 1/2" RIGID FIBERGLASS R-6<br>CONCEALED FLEX FIBERGLASS 2" AT 1.0 PCF R-6 |
| RETURN, VENT, RELIEF, EXHAUST            | LOOK FORMING QUALITY, GALVANIZED GAL STEEL ASTM 525 or 527 | FLANGED W/ BUTYL GASKET, BRUSH ON, SEAL CLASS C | NONE                                                                                |
| AIR PLENUMS @ ROOF/WALL, INTAKE, EXHAUST | TYPE 304 STAINLESS STEEL, or GALVANIZED STEEL              | BRAZE or WELD WATERTIGHT                        | 2" FLEXIBLE FIBERGLASS @ 1.0 PCF R-6                                                |
| ACCESSORIES, DAMPERS, AIR RETURNS        | SAME or BETTER AS PARENT DUCT                              | SAME or BETTER AS PARENT DUCT                   | BRAZE or WELD WATERTIGHT                                                            |

### PIPING MATERIALS

| SERVICE            | PIPE MATERIAL | FITTINGS       | CONNECTIONS            |
|--------------------|---------------|----------------|------------------------|
| REFRIGERANT PIPING | TYPE ACR      | WROUGHT COPPER | NO LEAD SOLDER, BRAZED |

### VENTILATOR SCHEDULE & NOTES

| No   | RFM | CFM | SPEED | SONES | VOLTS | WATT  | DUCT SIZE  | TYPE          | MODEL                 |
|------|-----|-----|-------|-------|-------|-------|------------|---------------|-----------------------|
| EF-1 |     | 110 |       | 2.0   | 6.0   | 1,500 | 3"ROUND    | CEILING       | BROAN-NUTONE          |
| EF-2 |     | 350 | 2     | 1.5   | 120   | 200   | 3 1/2"x10" | UNDER CABINET | BROAN-NUTONE AMG03RSS |

- PROVIDE ROOF CURBS AND BACKUP DAMPERS THAT DESIGNED FOR SPECIFIED VENTILATOR MODELS SPECIFIED ABOVE.
- PROVIDE UNIT WITH MET LOCATION 8" TO KIT.
- PROVIDE UNIT WITH 1/2" WIDE DUCT COLLAR. SAME SIZE AS RETURN/EXHAUST GRILLE FACE
- PROVIDE UNIT WITH EXTERIOR WALL BRACKET AND HALL GUARD MID (ON-250, HSK-5)
- PROVIDE UNIT WITH SAW SUPPLEMENT HEAT KIT VHK-205A
- PROVIDE AIR BALANCE TEST REPORT FOR ABOVE SYSTEM AFTER INSTALLED AND BEFORE CPO.

### REGISTER GRILLE AND DIFFUSER SCHEDULE

| TYPE | APPLICATION    | MATERIAL | FINISH | COMMENTS | DESIGN EQUIPMENT       |
|------|----------------|----------|--------|----------|------------------------|
| 1    | SUPPLY         | STEEL    | WHITE  | -        | CONTINENTAL SERIES 30  |
| 2    | SUPPLY         | STEEL    | WHITE  | -        | CONTINENTAL SERIES T32 |
| 3    | RETURN/EXHAUST | STEEL    | WHITE  | -        | CONTINENTAL SERIES F25 |

- PROVIDE OPPOSED BLADE DAMPERS ON ALL PROVIDE RADIATION DAMPERS WHERE INDICATED.

M1

745 NORTH SALINA STREET - SYRACUSE, NY 13208

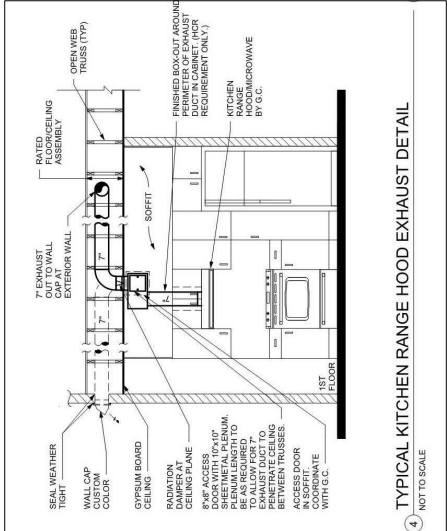
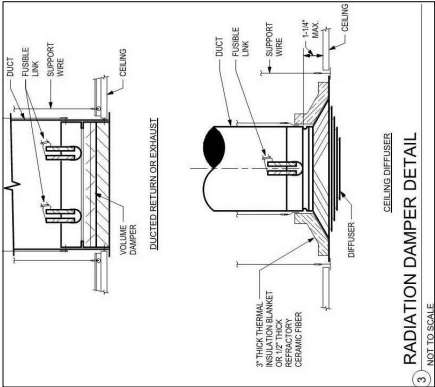
THIRD FLOOR RENOVATION PROJECT

Drawn By: AP

Scale: 3/8" = 1'-0"

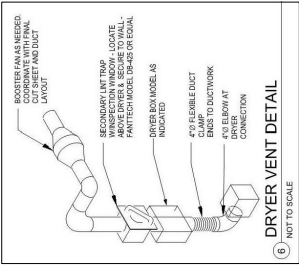
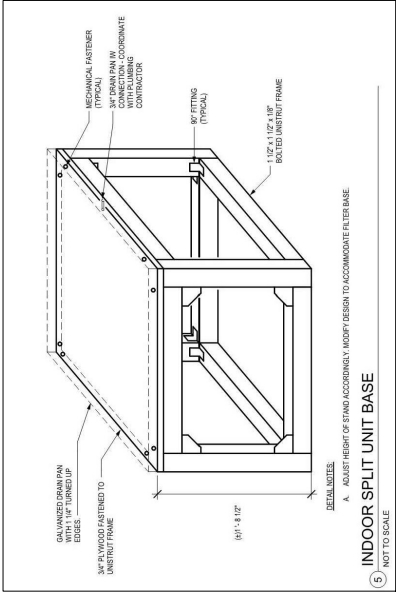
Date: 01-25-2026

Rev.



HVAC SPECIFIC NOTES

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4 TYPICAL KITCHEN RANGE HOOD EXHAUST DETAIL

5 INDOOR SPLIT UNIT BASE

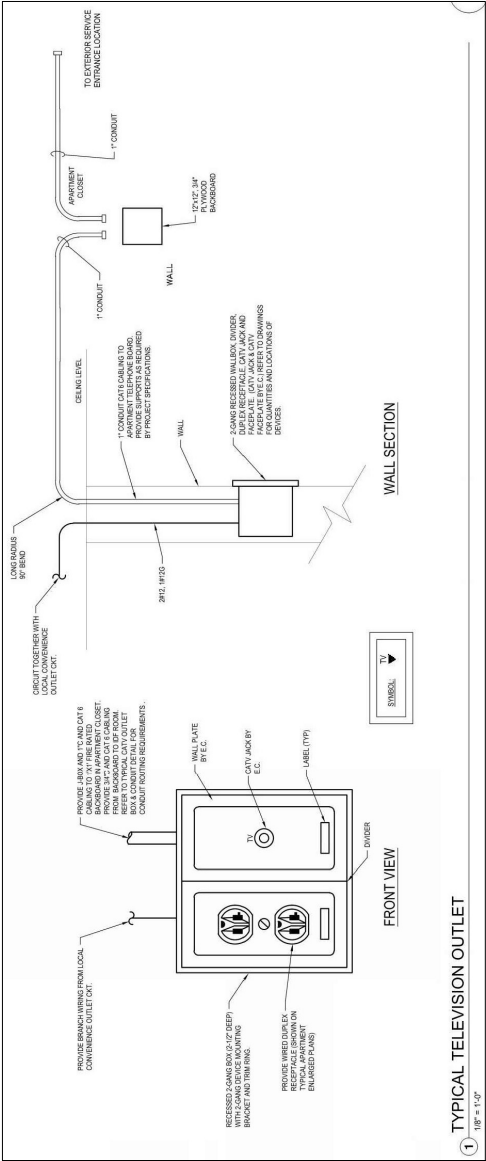
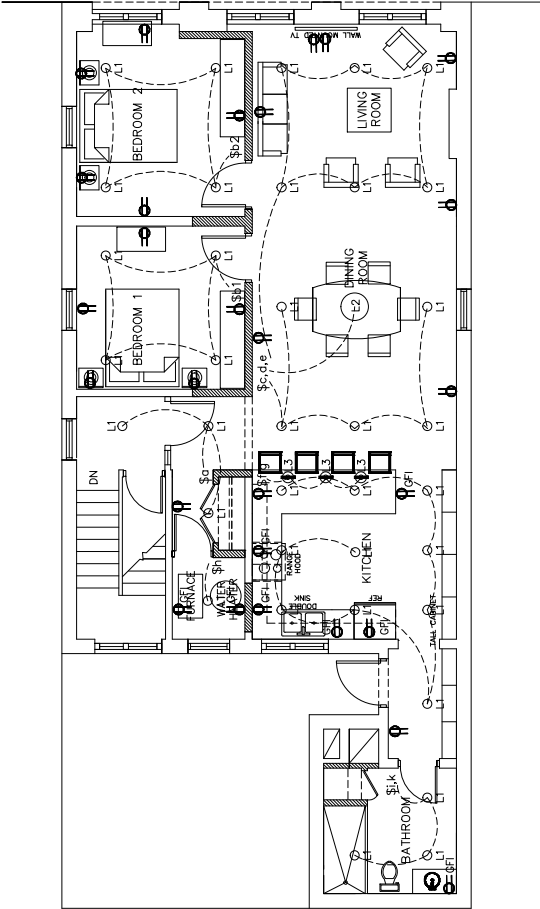
6 DRYER VENT DETAIL

ELECTRICAL & ALARM SYMBOLS

|                                                                                     |                                                       |                                                                                     |                                               |
|-------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------|
|  | 2'-0"x2'-0" ACOUSTICAL CEILING PANEL                  |  | RECESSED LIGHTING SYSTEM                      |
|  | 2'-0"x4'-0" LIGHTING FIXTURE                          |  | EMERGENCY LIGHTING FIXTURE (INTEGRAL BATTERY) |
|  | PENDANT LIGHTING SYSTEM                               |  | WALL WASH LIGHTING SYSTEM                     |
|  | DUCT SECTION (2X2 OR ROUND) SUPPLY / RETURN / EXHAUST |  | EXIT LIGHT FIXTURE                            |
|  | LINEAR DUCT SECTION (4'-0") SUPPLY / RETURN / EXHAUST |  | CARBON MONOXIDE ALARM                         |
|  | PORTABLE FIRE EXTINGUISHER                            |  | DUPLEX RECEPTACLE                             |
|  | SMOKE DETECTOR                                        |  | GWB CEILING                                   |
|  | MANUAL PULL STATION                                   |  | HORN & STROBE LIGHT                           |

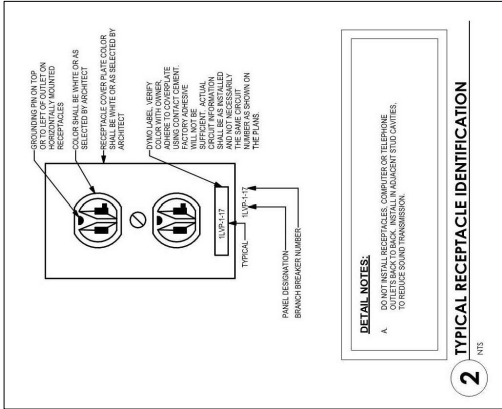
GENERAL REQUIREMENTS FOR ELECTRICAL WORKS:

- ALL ELECTRICAL WORK SHALL CONFORM WITH THE LATEST EDITION OF THE NATIONAL ELECTRICAL CODE AND APPLICABLE LAWS, CODE AND REGULATIONS OF MUNICIPAL, COUNTY, STATE AND FEDERAL AUTHORITIES, UTILITY COMPANIES, INSURANCE AGENCIES AND OTHER AUTHORITY HAVING JURISDICTION OVER THE WORK.
- DRAWINGS ARE DIAGRAMMATIC, SMALL SCALE AND INDICATE THE GENERAL ARRANGEMENT OF SYSTEMS AND WORK INCLUDED. HOWEVER, CERTAIN RACEWAYS, BENDS, FITTINGS, BOXES, SYSTEM COMPONENTS, APPURTENANCES AND RELATED SPECIALTIES ARE NOT SHOWN, BUT SHALL BE PROVIDED TO INSURE A COMPLETE INSTALLATION.
- CONSULT THE DRAWINGS FOR EXACT LOCATION OF FIXTURES AND EQUIPMENT, WHERE SAME ARE NOT DEFINITELY LOCATED, OBTAIN THIS INFORMATION THE OWNER OR ARCHITECT / ENGINEER.
- WHERE CABLE PASSES THROUGH FIRE RATED STRUCTURES, PROVIDE FIREPROOF FITTINGS.
- WHERE CONDUIT TERMINATES IN A CABINET, BOX OR AUXILIARY GUTTER, THE CONDUCTORS SHALL BE PROTECTED BY AN INSULATING BUSHING. LOCKNUTS SHALL BE PROVIDED BOTH INSIDE AND OUTSIDE THE ENCLOSURE.
- MATERIAL AND EQUIPMENT IN THE WORK SHALL BE NEW, FIRST GRADE, THE BEST OF THEIR RESPECTIVE KINDS, AND APPROPRIATE FOR THE APPLICATION AN ENVIRONMENT.



ELECTRICAL & ALARM SYMBOLS

|  |                                                       |  |                                               |
|--|-------------------------------------------------------|--|-----------------------------------------------|
|  | 2'-0"x2'-0" ACOUSTICAL CEILING PANEL                  |  | RECESSED LIGHTING SYSTEM                      |
|  | 2'-0"x4'-0" LIGHTING FIXTURE                          |  | EMERGENCY LIGHTING FIXTURE (INTEGRAL BATTERY) |
|  | PENDANT LIGHTING SYSTEM                               |  | WALL WASH LIGHTING SYSTEM                     |
|  | DUCT SECTION (2X2 OR ROUND) SUPPLY / RETURN / EXHAUST |  | EXIT LIGHT FIXTURE                            |
|  | LINEAR DUST SECTION (4'-0") SUPPLY / RETURN / EXHAUST |  | CARBON MONOXIDE ALARM                         |
|  | PORTABLE FIRE EXTINGUISHER                            |  | DUPLEX RECEPTACLE                             |
|  | SMOKE DETECTOR                                        |  | OMB CEILING                                   |
|  | MANUAL PULL STATION                                   |  | HORN & STROBE LIGHT                           |



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LIGHT FIXTURE SCHEDULE

| SYMBOL | DESCRIPTION/PART                                       | QTY | MFG        | REMARKS                                                        |
|--------|--------------------------------------------------------|-----|------------|----------------------------------------------------------------|
|        | HH4-LED-3000L-DM10-120-MD-30K-HH4-4501-CL-WH           | 35  | ELITE      | GENERAL PURPOSE DOWN LIGHTING (FOR ALL ROOMS, OTHERWISE NOTED) |
|        | ET2 PLANETARY 33 1/2" WIDE GOLD 8-LIGHT LED CHANDELLER | 1   | LAMPS PLUS | ADJUSTABLE CABLES IN HEIGHT - DINING TABLE                     |
|        | ET2 PLANETARY 9 3/4" WIDE GOLD 1-LIGHT LED PENDANT     | 3   | LAMPS PLUS | ADJUSTABLE CABLES IN HEIGHT - KITCHEN COUNTER                  |
|        | LED95-WH-G2                                            | 1   | BARR       | EMERGENCY LIGHT                                                |
|        | VEX-U-BP-WB-WH-G2                                      | 1   | BARR       | EXIT LIGHT                                                     |

ELECTRICAL SWITCH/PANEL SCHEDULE

| LOCATION: BACK WALL (NEW)<br>150 AMP, 208/120V, 3-PHASE, 3W+G |                        |                                                    | PANEL ID:<br>APARTMENT                                                                                   |      | TYPICAL LOAD CENTER SCHEDULE "LC"<br>150 AMP, 240/120V, 1 PHASE, 3W, 10KAIC |                                                                                                                                               |       |     |                       | LOCATION<br>SEE DWG |       |
|---------------------------------------------------------------|------------------------|----------------------------------------------------|----------------------------------------------------------------------------------------------------------|------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|-----------------------|---------------------|-------|
| No                                                            | SWITCH<br>PANEL<br>RUN | DESIGNATION/FIXTURE                                | NOTES                                                                                                    | CKT# | CIRCUIT DESCRIPTION                                                         | BRK                                                                                                                                           | PHASE | BRK | CIRCUIT DESCRIPTION   | CKT#                | NOTES |
|                                                               |                        |                                                    |                                                                                                          |      |                                                                             |                                                                                                                                               |       |     |                       |                     |       |
| 1                                                             |                        | THRD FLOOR STAIR LANDING – LIGHTING FIXTURES L1(1) | 1                                                                                                        | 1    | LIGHTING                                                                    | 20A                                                                                                                                           | A     | 50A | ELECTRIC RANGE        | 2                   | 3     |
| 2                                                             |                        | APARTMENT ENTRY AREA – LIGHTING FIXTURES L1(2)     | 1                                                                                                        | 3    | RANGE HOOD                                                                  | 20A                                                                                                                                           | B     |     |                       | 4                   |       |
| 3                                                             |                        | BEDROOM 1– LIGHTING FIXTURES L1(4)                 | 1                                                                                                        | 5    | FRIDGE                                                                      | 20A                                                                                                                                           | A     | 30A | DRYER                 | 6                   | 1     |
| 4                                                             |                        | BEDROOM 2– LIGHTING FIXTURES L1(4)                 | 2                                                                                                        | 7    | WASHER                                                                      | 20A                                                                                                                                           | B     |     |                       | 8                   |       |
| 5                                                             |                        | DINING ROOM – LIGHTING FIXTURES L1(5)              | 1                                                                                                        | 9    | BATHROOM                                                                    | 20A                                                                                                                                           | A     | 20A | KITCHEN RECEPTACLE    | 10                  | 3     |
| 6                                                             |                        | DINING ROOM – PENDANT LIGHTING FIXTURES L2(1)      | 1                                                                                                        | 11   | BEDROOM 1                                                                   | 20A                                                                                                                                           | B     | 20A | KITCHEN RECEPTACLE    | 12                  | 3     |
| 7                                                             |                        | LIVING ROOM – LIGHTING FIXTURES L1(6)              | 1                                                                                                        | 13   | BEDROOM 2                                                                   | 20A                                                                                                                                           | A     | 20A | LIVING/DINNING RM REC | 14                  | 1     |
| 8                                                             |                        | KITCHEN COUNTER – PENDANT LIGHTING FIXTURES L3(3)  |                                                                                                          | 15   | SPACE                                                                       |                                                                                                                                               | B     |     | SPACE                 | 16                  |       |
| 9                                                             |                        | KITCHEN – LIGHTING FIXTURES L1(10)                 |                                                                                                          | 17   | SPACE                                                                       |                                                                                                                                               | A     |     | SPACE                 | 18                  |       |
| 10                                                            |                        | MECHANICAL ROOM – LIGHTING FIXTURES L1(1)          |                                                                                                          | 19   |                                                                             |                                                                                                                                               | B     |     |                       | 20                  |       |
| 11                                                            |                        | BATHROOM EXHAUST FAN                               |                                                                                                          | 21   |                                                                             |                                                                                                                                               | A     |     |                       | 22                  |       |
| 12                                                            |                        | BATHROOM – LIGHTING FIXTURES L1(3)                 |                                                                                                          | 23   |                                                                             |                                                                                                                                               | B     |     |                       | 24                  |       |
|                                                               |                        |                                                    | GENERAL NOTES:<br>A. LC BUS RATING 150 AMPS<br>B. SINGLE PHASE 120/240<br>C. FLUSH MOUNTED<br>D. 24 POLE |      |                                                                             | SPECIFIC NOTES:<br>1. PROVIDE ARC FAULT TYPE BREAKER<br>2. PROVIDE GFCI TYPE BREAKER<br>3. PROVIDE COMBO ARC/GFCI TYPE BREAKER<br>4. NOT USED |       |     |                       |                     |       |

|                                                                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------|--|
| NOTE:<br>1. ALL ELECTRICAL WIRES ENCASED WITH FLEXIBLE METAL CABLE<br>2. USE HACR TYPE BREAKERS FOR HVAC EQUIPMENTS |  |
|---------------------------------------------------------------------------------------------------------------------|--|

745 NORTH SALINA STREET - SYRACUSE, NY 13208

THIRD FLOOR RENOVATION PROJECT

Drawn By: AP

Scale: 3/8" = 1'-0"

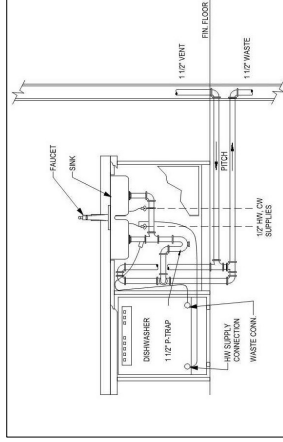
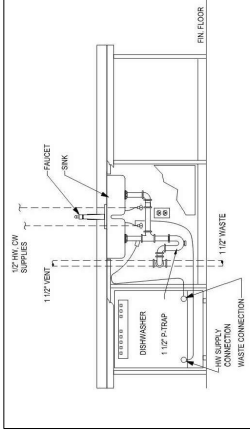
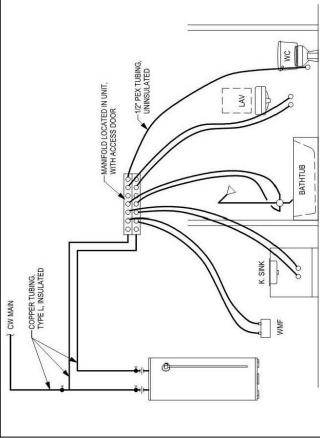
Date: 01-25-2026

Rev.

3RD FLOOR  
SWITCH /  
PANEL  
SCHEDULES

E2

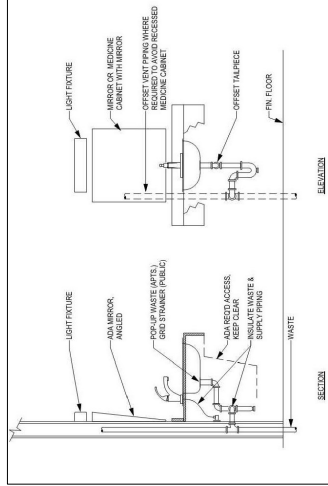
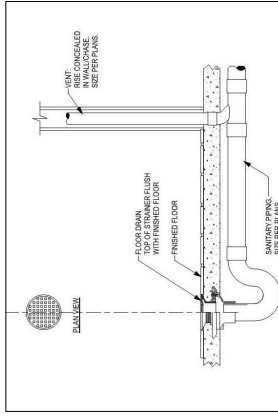
#### 4 KITCHEN ISLAND SINK INSTALLATION DETAIL



F. SYSTEM SHALL BE PRESSURE TESTED TO 100 PSI FOR A MINIMUM OF 4 HOURS

D. NOT PROVIDE CENTER DRAIN OR BAFFLED WASTE PIPING.

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26



C. COUNTER MOUNTED LAVATORY SHOWN. PIPING IS SIMILAR FOR WALL MOUNTED LAVATORY.



# 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>                                                                                                                                                                                                       |  |                                     |                          |
| Shabeena Smith                                                                                                                                                                                                                                        |  |                                     |                          |
| Name of Action or Project:                                                                                                                                                                                                                            |  |                                     |                          |
| Project Location (describe, and attach a location map):                                                                                                                                                                                               |  |                                     |                          |
| 745 N. Salina St Syracuse NY 13208                                                                                                                                                                                                                    |  |                                     |                          |
| Brief Description of Proposed Action:                                                                                                                                                                                                                 |  |                                     |                          |
| Interior Renovation and occupancy of an existing 1530 square foot vacant commercial space for operation of a Hookah retail shop. No exterior alterations on site disturbance, no pumping, no change in parking and no increase in building footprint. |  |                                     |                          |
| Name of Applicant or Sponsor:                                                                                                                                                                                                                         |  | Telephone:                          |                          |
| Shabeena Smith                                                                                                                                                                                                                                        |  |                                     |                          |
| Address:                                                                                                                                                                                                                                              |  | E-Mail:                             |                          |
| 200 Elm St Syracuse                                                                                                                                                                                                                                   |  |                                     |                          |
| City/PO:                                                                                                                                                                                                                                              |  | State:                              | Zip Code:                |
| Syracuse                                                                                                                                                                                                                                              |  | NY                                  | 13212                    |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?                                                                                                                |  | NO                                  | YES                      |
| 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.                                            |  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other government Agency?                                                                                                                                                   |  | NO                                  | YES                      |
| If Yes, list agency(s) name and permit or approval:                                                                                                                                                                                                   |  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. a. Total acreage of the site of the proposed action?                                                                                                                                                                                               |  | _____ 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?                                                                                                                                |  | _____ acres                         |                          |
| 4. Check all land uses that occur on, are adjoining or near the proposed action:                                                                                                                                                                      |  |                                     |                          |
| <input 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 checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| b. Consistent with the adopted comprehensive plan?                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> |
| 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"/> |
| 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:<br>_____<br>_____                                                                                                                                                                                                                                                                        | <input type="checkbox"/>            | <input checked="" 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: _____<br>_____                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                          |
| 11. Will the proposed action connect to existing wastewater utilities?                                                                                                                                                                                                                                                                                                               |                                     | NO                                  | YES                      |
| If No, describe method for providing wastewater treatment: _____<br>_____                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> |
| If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____<br>_____<br>_____                                                                                                                                                                                                                                                                 |                                     |                                     |                          |

|                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:<br><input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional<br><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?<br>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:<br>_____<br>_____                                                                                                                                                                                                                                                                                                                                                            |                                     |                          |
| 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)?<br>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?<br>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?<br>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><br>Applicant/sponsor/name: <u>Shabeema Smith</u> Date: <u>2/18/24</u><br>Signature: <u>[Signature]</u> Title: <u>Co-Owner</u>                                                                                                                                                                    |                                     |                          |

Project: SP-2026-10

Date: 8/10/2026

## *Short Environmental Assessment Form*

### *Part 2 - Impact Assessment*

**Part 2 is to be completed by the Lead Agency.**

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

|                                                                                                                                                                            | No, or<br>small<br>impact<br>may<br>occur | Moderate<br>to large<br>impact<br>may<br>occur |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?                                                                | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 2. Will the proposed action result in a change in the use or intensity of use of land?                                                                                     | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 3. Will the proposed action impair the character or quality of the existing community?                                                                                     | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?                      | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?            | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 7. Will the proposed action impact existing:<br>a. public / private water supplies?                                                                                        | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| b. public / private wastewater treatment utilities?                                                                                                                        | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?                                   | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?                     | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?                                                            | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |
| 11. Will the proposed action create a hazard to environmental resources or human health?                                                                                   | <input checked="" type="checkbox"/>       | <input type="checkbox"/>                       |

Project: SP-2026-10

Date: 8/10/2026

### ***Short Environmental Assessment Form***

#### ***Part 3 Determination of Significance***

For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- ☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- ☒ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

City of Syracuse City Planning Commission

8/10/2026

Name of Lead Agency

Date

Steven Kulick

Chairperson

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

|                   |
|-------------------|
| <b>PRINT FORM</b> |
|-------------------|

City of Syracuse

Parcel History

01/01/1900 - 08/03/2026  
Tax Map #: 008.-07-04.0  
Owners: Nhu Nguyen, Tuyen Nguyen  
Zoning: MX-4

| Address                     | Date     | Transaction         | Transaction Type          | Status             | Description                                                                                                                                                                                                                                           |
|-----------------------------|----------|---------------------|---------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 745 Salina St N To Lock Aly | 05/28/02 | Project             | SP - Restaurant           | Approved           | SP-02-13   RESTAURANT (WHITE DOVE TEA ROOM)_                                                                                                                                                                                                          |
| 745 Salina St N To Lock Aly | 01/22/15 | Completed Complaint | CleanUp Rqst: Public Prop | Completed          | 2015-01022   Gene Fahey of Turning Point business (471-8440) reported that about ten tires have been thrown into her parking lot on Lock Alley. She asks if there is any possible way DPW could pick up these illegally placed tires on her property. |
| 745 Salina St N To Lock Aly | 03/01/16 | Completed Complaint | CleanUp Rqst: Public Prop | Completed          | 2016-04353   dumped tires 8-10 of them in lock alley..                                                                                                                                                                                                |
| 745 Salina St N To Lock Aly | 07/02/26 | Complaint           | Cert of Use - Smoking Est | Certificate: Needs | CU2026-0089   New Adventures Hookah Lounge                                                                                                                                                                                                            |
| 745 Salina St N To Lock Aly | 07/06/26 | Inspection          | Tickle Date (Follow Up)   | <None>             |                                                                                                                                                                                                                                                       |

OFFICE OF ZONING ADMINISTRATION

Sharon F. Owens, Mayor

SP-2026-10

| Approval            | Status                 | Reviewer            | Comments                                                                                                                                                                                                                                                                                                                      |
|---------------------|------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Zoning Planner      | Waiting on Board       | Noah Garcia         | No concerns, see Staff Report                                                                                                                                                                                                                                                                                                 |
| Planning Commission | In Review              |                     |                                                                                                                                                                                                                                                                                                                               |
| DPW Traffic Control | Conditionally Approved | Charles Gafrancesco | Conditionally Approved<br>No on street parking is available on Lock Ally.<br>Window sign shall not portray any type of parking or traffic related language that may be considered official by the public.<br>Parking lot on Lock Ally in rear of building will need Transportation Planner review for compliance if required. |
| DPW Transportation  | In Review              | Kevan Busa          |                                                                                                                                                                                                                                                                                                                               |

|                                     |                        |                |                                                                                                                                                                                                                                                                                                     |
|-------------------------------------|------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Eng. Mapping-Zoning                 | Conditionally Approved | Ray Wills      | As long as you aren't doing anything out front, installing anything or excavating. As for signage as long as it doesn't stick out into the ROW like a hanging sign, I have no concerns. Thanks for the fast response.                                                                               |
| Engineering Design and Construction | In Review              | Mirza Malkoc   |                                                                                                                                                                                                                                                                                                     |
| Engineering-SWPPP                   | In Review              | Mirza Malkoc   |                                                                                                                                                                                                                                                                                                     |
| DPW Sanitation and Sewers           | Conditionally Approved | Vinny Esposito | Any plumbing changes will require permits through WEP, Plumbing Control Div.<br>Any grading or paving work will require a separate permit.                                                                                                                                                          |
| Landmark Preservation               | Approved               | Kate Auwaerter | No preservation concerns on the proposed interior remodeling of the building, which is located in the North Salina Street Historic District.<br>Any exterior alterations including signage, shopfront modifications, new doors, exterior lighting, etc., must be submitted for preservation review. |

|                    |          |             |  |
|--------------------|----------|-------------|--|
| Parks and Forestry | Approved | Jeff Romano |  |
|--------------------|----------|-------------|--|