

Syracuse Zoning Administration

Application for Resubdivision/Lot Alteration

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

For office use only:

District:

DB

Filing Date:

9/27/21

Case #:

R-21-56

Resubdivision

Lot Alteration

SUBJECT PROPERTY ADDRESS(ES):

1060 East Genesee Street, Syracuse, NY

TAX MAP NUMBERS: (of each property involved)

Section: 048

Block: 12

Lot: 02.1

Section:

Block:

Lot:

Section:

Block:

Lot:

Section:

Block:

Lot:

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

NAME:

Scholar Syracuse, LLC

MAILING ADDRESS:

1060 East Genesee Street, Syracuse, NY

ZIP:

13210

DAYTIME PHONE:

HOME PHONE:

E-MAIL:

REPRESENTATIVE: Attorney or Other contact:

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

NAME:

Dean Newins (Opus AE Group, L.L.C.)

MAILING ADDRESS:

10350 Bren Road West, Minnetonka, MN

ZIP:

55343

TELEPHONE:

E-MAIL:

CURRENT LAND USES ON ALL INVOLVED PROPERTIES:

Hotel

CURRENT DESCRIPTION OF ALL STRUCTURES ON ALL INVOLVED PROPERTIES:

Scholar Hotel located at 1060 E. Genesee Street and parking lot.

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

The proposed project is located on Madison Avenue, in the S parking lot of the Scholar Hotel. A lot split is proposed to create a unique parcel on which the building sits. A 7-story multi-unit residential building, with 3 levels of underground parking is proposed for the site. Additional open lot parking and access is proposed for the site.

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

YES

NO

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

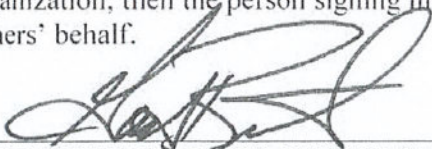
DECLARATION

I understand that false statements made herein are **punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law of the State of New York.** I declare that, subject to the penalties of perjury, any statements made on this application and any attachments are the truth and to the best of my knowledge are correct.

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

CURRENT PROPERTY OWNER SIGNATURE

As listed on the City of Syracuse Tax Assessment Roll. If not listed as the owner on the current rolls, please include a proof of ownership, for example, a copy of the deed. Attorney's signing on behalf of the owner must include a one page letter describing the legal representative arrangement. Architects, engineers, contractors, tenants, etc. cannot sign on behalf of the property owner. If property owner is a Corporation or an Organization, then the person signing must provide verification they are a member of such, and can sign on the owners' behalf.



10/5/21
DATE

CURRENT PROPERTY OWNER SIGNATURE

Scholar Syracuse, LLC - Gary S. Brandeis, President / Founder

Please legibly PRINT SIGNATURE NAME and TITLE

REQUIRED SUBMITTALS

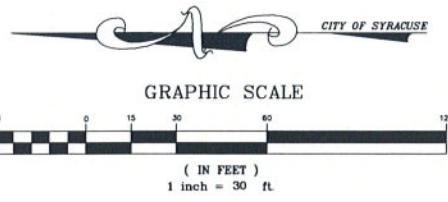
- APPLICATION** – Must be **completely filled out** including tax map numbers, and current and proposed uses of property/properties and must be signed by the property owner(s) or legal representative(s).
- SHORT ENVIRONMENTAL FORM** – Must be completely filled out (side one only) and signed.
- MAPS –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

***Please note that if referrals are necessary for this application, additional copies of all required materials will be requested.**

FOR STAFF USE ONLY

REFERRAL NEEDED

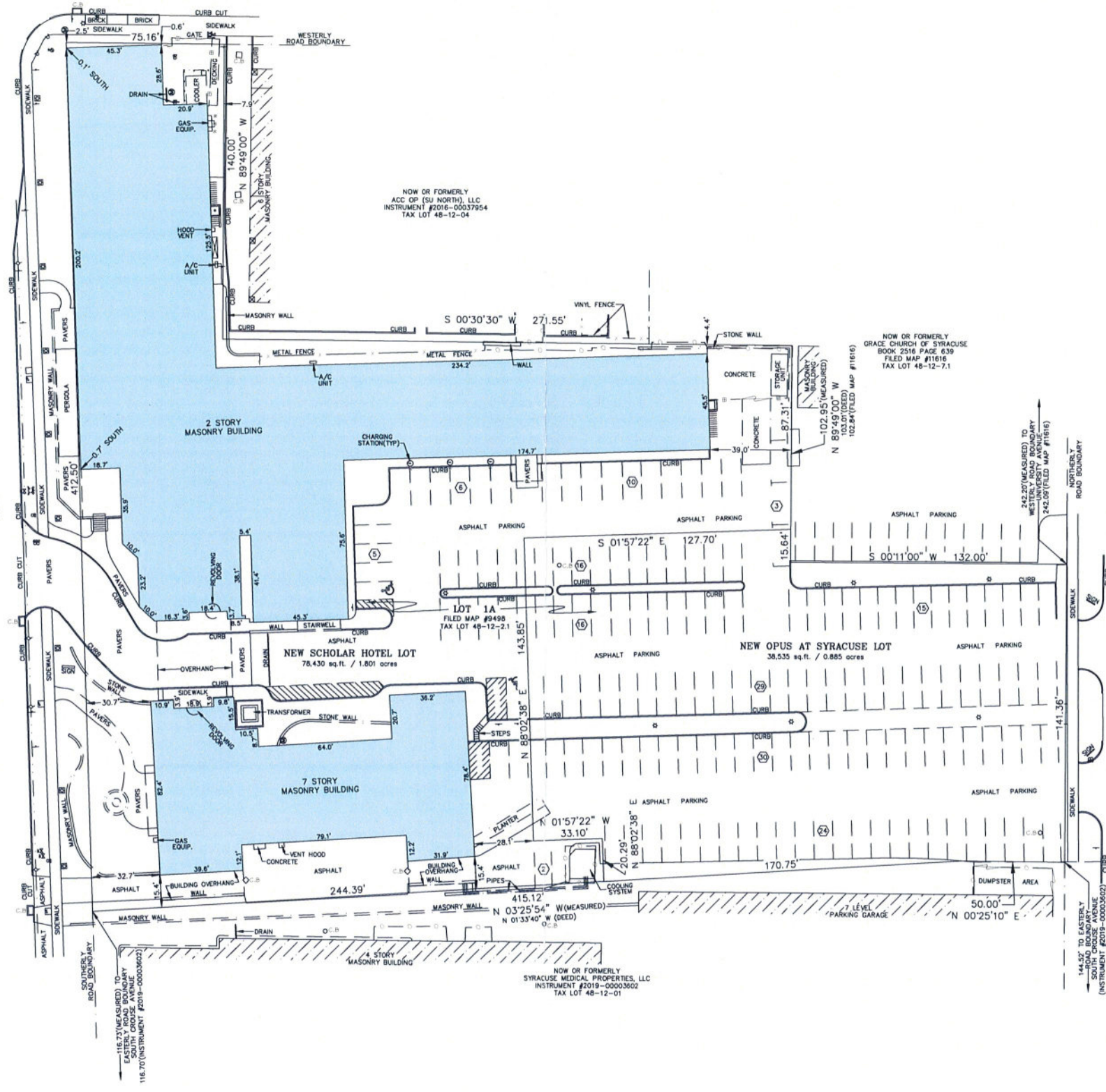
- ONONDAGA COUNTY PLANNING BOARD
- SYRACUSE LANDMARK PRESERVATION BOARD (This project is located within _____ Historic District; is listed individually in the National Register of Historic Places; is Eligible for inclusion in the National Register of Historic Places; or is architecturally significant).
- OTHER CITY/COUNTY/STATE AGENCY OR DEPARTMENT(S) _____



UNIVERSITY AVENUE
S 00°30'30" W
66' RIGHT OF WAY

EAST GENESEE STREET
N 88°11'00" E
98' RIGHT OF WAY

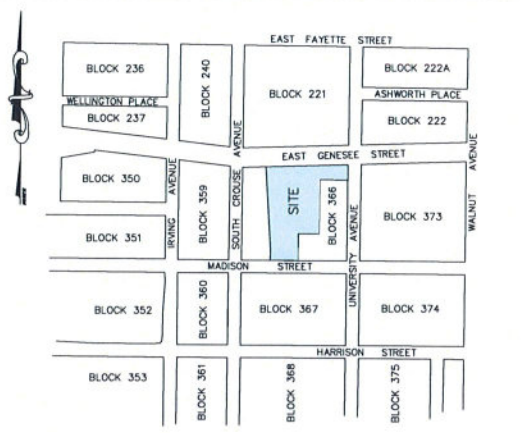
MADISON STREET
N 89°49'00" W
66' RIGHT OF WAY



ZONING INFORMATION

Zoned - OB - Office District, Class B
 Permitted Uses:
 Apartment Houses, Hotels and Motels
 Minimum Yard Requirements:
 Front Yard - 20 feet
 Side Yard - 4 feet
 Rear Yard - 5 feet
 Maximum Lot Coverage - 40 percent
 Maximum Parking Surface Coverage - 80 percent
 Residential Density Requirement - 425 square feet per dwelling unit
 Floor Area Ratio - 1.5
 Minimum Open Space Requirement - 15 percent
 Off-Street Parking Requirement:
 Motels and Hotels: 1 space for each guest room
 Apartment House: 1 space for each dwelling unit

Zoning information from syrgov.net/Zoning_Ordinances.aspx and is subject to interpretation and all zoning information should be verified by the City of Syracuse before use.



VICINITY MAP
NO SCALE

LEGEND

- LIGHT POLE - ○
- UTILITY POLE - ◊
- HYDRANT - H
- MANHOLE - ⊙
- HANDICAP PARKING - ♿
- DIRECTIONAL ARROW - →
- CATCH BASIN - □
- BOLLARD - *
- WATER VALVE - W
- CLEAN OUT - C
- LIGHT CAN - L
- EXISTING PARKING COUNT - ⊕
- SIGN - S
- CROSSWALK POLE - ⊕
- CHAIN LINK FENCE - []
- WOOD STOCKADE FENCE - []
- FENCE AS LABELED - []
- OVERHEAD UTILITY LINES - []
- GUARD RAIL - []

Only survey maps with the Land Surveyor's embossed seal are genuine true and correct copies of the surveyor's original work and opinion.
 Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-division 2, of the New York State Education Law.
 Certifications indicated herein shall apply only to the persons for whom this survey was performed and on their behalf to the title insurance company governing agency and lending institution and to the assignees of the lending institution and/or subsequent owners.
 This map may not be used in connection with a "Survey Affidavit" or similar document, statement or mechanism to obtain insurance for any subsequent or future grantees.
 Survey prepared without the benefit of an abstract.
 Location surveys do not include the staking of the property corners except as shown.
 No building construction and/or improvements can be performed until the correct applications have been submitted for approval.

APPROVALS

No.	DATE	DESCRIPTION	BY

LEHR
LAND SURVEYORS D.P.C.
116 SALINA STREET - SUITE 6
LIVERPOOL, NEW YORK 13088
315-451-3333
info@lehrlandsurveyors.com

I HEREBY CERTIFY THAT THIS IS AN ACCURATE MAP MADE FROM AN ACTUAL SURVEY.
 LICENSED LAND SURVEYOR
 DOUGLAS R. LEHR NYSLS 49223

OPUS AT SYRACUSE SUBDIVISION
PRELIMINARY PLAN

RE-SUBDIVISION ON NEW LOT 1A OF A RESUBDIVISION ON PART OF BLOCK No.366, CITY OF SYRACUSE, FILED MAP No.9498
 KNOWN AS No.1030-1060 EAST GENESEE STREET, CITY OF SYRACUSE, COUNTY OF ONONDAGA, NEW YORK
 FIELD DATE: 27 OCT 2021 MAP DATE: 28 OCT 2021 SCALE: 1"=30' DRAWN BY: KRH
 REVISIONS: DRAWING No. 21-1-28

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

Name of Action or Project: Opus at Syracuse		
Project Location (describe, and attach a general location map): South end of property at 1060 East Genesee Street		
Brief Description of Proposed Action (include purpose or need): The proposed project is located on Madison Avenue, in the south parking lot of the Scholar Hotel, which is located at 1060 E. Genesee Street. A lot split is proposed to create a unique parcel on which the building sits. A 7-story multi-unit residential building, with 3 levels of underground parking, is proposed for the site. The proposed building will have 104 residential units. The unit types will range from Studio/Alcove units to 4-Bedroom units, totaling 284 bedrooms. Additional open lot parking, parking access, and open green space is also proposed for the site.		
Name of Applicant/Sponsor: Opus Development Company, L.L.C. (Ben Angelo)		Telephone: E-Mail: ben.angelo@opus-group.com
Address: 9700 Higgins Road Suite 900		
City/PO: Rosemont	State: IL	Zip Code: 60018
Project Contact (if not same as sponsor; give name and title/role):		Telephone: E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):		Telephone: E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Counsel, Town Board, <input type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village Planning Board or Commission <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Planning Commission	September 23, 2021
c. City, Town or Village Zoning Board of Appeals <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Board Zoning Appeals	September 23, 2021
d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
i. Coastal Resources. i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No iii. Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? Yes No

- If Yes, complete sections C, F and G.
- If No, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? Yes No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? Yes No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) Yes No

If Yes, identify the plan(s):

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? Yes No

If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No

If Yes, what is the zoning classification(s) including any applicable overlay district?
Office District, Class B _____

b. Is the use permitted or allowed by a special or conditional use permit? Yes No

c. Is a zoning change requested as part of the proposed action? Yes No

If Yes,
i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

a. In what school district is the project site located? City of Syracuse

b. What police or other public protection forces serve the project site?
City of Syracuse Police Department; Onondaga County Sheriff; NYS Police

c. Which fire protection and emergency medical services serve the project site?
City of Syracuse Fire Department; various emergency medical service response units

d. What parks serve the project site?
City of Syracuse Parks; closest park is Forman Park

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Multi-Family Residential

b. a. Total acreage of the site of the proposed action? _____ 0.88 acres
b. Total acreage to be physically disturbed? _____ 0.88 acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 2.69 acres

c. Is the proposed action an expansion of an existing project or use? Yes No
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? Yes No

If Yes,
i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)
Residential, Commercial

ii. Is a cluster/conservation layout proposed? Yes No

iii. Number of lots proposed? _____

iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will the proposed action be constructed in multiple phases? Yes No

i. If No, anticipated period of construction: _____ 16 months

ii. If Yes:

- Total number of phases anticipated _____
- Anticipated commencement date of phase 1 (including demolition) _____ month _____ year
- Anticipated completion date of final phase _____ month _____ year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? Yes No
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	104
At completion of all phases	_____	_____	_____	104

g. Does the proposed action include new non-residential construction (including expansions)? Yes No
 If Yes,

- i. Total number of structures _____
- ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length
- iii. Approximate extent of building space to be heated or cooled: _____ square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? Yes No
 If Yes,

- i. Purpose of the impoundment: Underground stormwater detention
- ii. If a water impoundment, the principal source of the water: Ground water Surface water streams Other specify: _____
- iii. If other than water, identify the type of impounded/contained liquids and their source. _____
- iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres
- v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length
- vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? Yes No
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)

- If Yes:
- i. What is the purpose of the excavation or dredging? Below grade parking structure, below grade water retention and treatment
 - ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?
 - Volume (specify tons or cubic yards): 30,000 cubic yards
 - Over what duration of time? 16 months
 - iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.
Earthen materials comprised of primarily urban cut/fill lands will be excavated and spoils will be hauled to an off-site disposal location TBD.
 - iv. Will there be onsite dewatering or processing of excavated materials? Yes No
 If yes, describe. Dewatering of the excavation area by standard methods will be necessary. No processing of excavated materials will occur on site. Spoils from excavation will be disposed off site.
 - v. What is the total area to be dredged or excavated? _____ 0.66 acres
 - vi. What is the maximum area to be worked at any one time? _____ 0.66 acres
 - vii. What would be the maximum depth of excavation or dredging? _____ 30 feet
 - viii. Will the excavation require blasting? Yes No
 - ix. Summarize site reclamation goals and plan: _____
Not applicable

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? Yes No
 If Yes:

- i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes No
If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No
If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No
If Yes:

i. Total anticipated water usage/demand per day: _____ 31,240 gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No
If Yes:

- Name of district or service area: City of Syracuse Water Department
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No
If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No
If, Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No
If Yes:

i. Total anticipated liquid waste generation per day: _____ 31,240 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____
Sanitary Wastewater

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No
If Yes:

- Name of wastewater treatment plant to be used: OCDWEP Metro
- Name of district: City of Syracuse
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

The project will coordinate with City and OCWEP officials to determine "offset" volumes needed to be removed from the City's combined sewer to accept projected sanitary flows

• Do existing sewer lines serve the project site? Yes No
 • Will a line extension within an existing district be necessary to serve the project? Yes No
 If Yes:
 • Describe extensions or capacity expansions proposed to serve this project: _____

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No
 If Yes:
 • Applicant/sponsor for new district: _____
 • Date application submitted or anticipated: _____
 • What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):
 Not applicable _____

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____
 Not applicable _____

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No
 If Yes:
 i. How much impervious surface will the project create in relation to total size of project parcel?
 _____ Square feet or _____ acres (impervious surface)
 _____ Square feet or _____ acres (parcel size)
 ii. Describe types of new point sources. _____

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

 • If to surface waters, identify receiving water bodies or wetlands: _____

 • Will stormwater runoff flow to adjacent properties? Yes No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No
 If Yes, identify:
 i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)

 ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)

 iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No
 If Yes:
 i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No
 ii. In addition to emissions as calculated in the application, the project will generate:
 • _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
 • _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
 • _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
 • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
 • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
 • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? Yes No

If Yes:

i. Estimate methane generation in tons/year (metric): _____

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? Yes No

If Yes:

i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend
 Randomly between hours of _____ to _____

ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____

iii. Parking spaces: Existing 160 Proposed 253 Net increase/decrease +93

iv. Does the proposed action include any shared use parking? Yes No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe:
 Removal of one curb cut on Madison Street

vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site? Yes No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? Yes No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No

If Yes:

i. Estimate annual electricity demand during operation of the proposed action: _____

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____

iii. Will the proposed action require a new, or an upgrade, to an existing substation? Yes No

l. Hours of operation. Answer all items which apply.

i. During Construction:

- Monday - Friday: _____
- Saturday: _____
- Sunday: _____
- Holidays: _____

ii. During Operations:

- Monday - Friday: _____
- Saturday: _____
- Sunday: _____
- Holidays: _____

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? Yes No

If yes:

i. Provide details including sources, time of day and duration:
 During construction a temporary increase in noise levels will be experienced during work hours, generally 7am to 5pm

ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Yes No
 Describe: _____

n. Will the proposed action have outdoor lighting? Yes No

If yes:

i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:
 Signage lighting, exterior amenities lighting. Locations and fixture specifications TBD

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? Yes No
 Describe: _____

o. Does the proposed action have the potential to produce odors for more than one hour per day? Yes No
 If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? Yes No

If Yes:

i. Product(s) to be stored _____

ii. Volume(s) _____ per unit time _____ (e.g., month, year)

iii. Generally, describe the proposed storage facilities: _____

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? Yes No

If Yes:

i. Describe proposed treatment(s):

ii. Will the proposed action use Integrated Pest Management Practices? Yes No

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? Yes No

If Yes:

i. Describe any solid waste(s) to be generated during construction or operation of the facility:

- Construction: _____ tons per _____ (unit of time)
- Operation : _____ tons per _____ (unit of time)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:

- Construction: _____
- Operation: _____

iii. Proposed disposal methods/facilities for solid waste generated on-site:

- Construction: _____
- Operation: _____

s. Does the proposed action include construction or modification of a solid waste management facility? Yes No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____

ii. Anticipated rate of disposal/processing:

- _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
- _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

Urban Industrial Commercial Residential (suburban) Rural (non-farm)

Forest Agriculture Aquatic Other (specify): _____

ii. If mix of uses, generally describe:

Existing parking lot adjacent to Hotel

b. Land uses and covertypes on the project site.

Land use or Covertypes	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0.81	0.73	-0.08
• Forested	0	0	0
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	0	0	0
• Agricultural (includes active orchards, field, greenhouse etc.)	0	0	0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	0	0	0
• Non-vegetated (bare rock, earth or fill)	0	0	0
• Other Describe: Landscape islands/plantings/lawn	0.07	0.15	+0.08

c. Is the project site presently used by members of the community for public recreation? Yes No
i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? Yes No
If Yes,
i. Identify Facilities:
Internal Medicine Office, University Gastroenterology, Medical Offices, University buildings, Grace Episcopal Church

e. Does the project site contain an existing dam? Yes No
If Yes:
i. Dimensions of the dam and impoundment:
• Dam height: _____ feet
• Dam length: _____ feet
• Surface area: _____ acres
• Volume impounded: _____ gallons OR acre-feet
ii. Dam's existing hazard classification: _____
iii. Provide date and summarize results of last inspection:

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
If Yes:
i. Has the facility been formally closed? Yes No
• If yes, cite sources/documentation: _____
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:

iii. Describe any development constraints due to the prior solid waste activities: _____

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes No
 Yes – Spills Incidents database Provide DEC ID number(s): _____
 Yes – Environmental Site Remediation database Provide DEC ID number(s): _____
 Neither database
ii. If site has been subject of RCRA corrective activities, describe control measures: _____
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
If yes, provide DEC ID number(s): _____
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ >6.67 feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site:

Cazenovia silt loam	_____	92.0 %
Palmyra gravelly loam	_____	2.7 %
Urban land	_____	5.3 %

d. What is the average depth to the water table on the project site? Average: _____ 3 feet

e. Drainage status of project site soils:

- Well Drained: _____ 2.7 % of site
- Moderately Well Drained: _____ 92.0 % of site
- Poorly Drained _____ 5.3 % of site

f. Approximate proportion of proposed action site with slopes:

- 0-10%: _____ 100 % of site
- 10-15%: _____ % of site
- 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes No

ii. Do any wetlands or other waterbodies adjoin the project site? Yes No

If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? Yes No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? Yes No
 If yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? Yes No

j. Is the project site in the 100-year Floodplain? Yes No

k. Is the project site in the 500-year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:
 i. Name of aquifer: _____

m. Identify the predominant wildlife species that occupy or use the project site: squirrels, song birds, etc. _____ _____ _____	_____ _____ _____
n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:	
i. Describe the habitat/community (composition, function, and basis for designation): _____ _____	
ii. Source(s) of description or evaluation: _____	
iii. Extent of community/habitat:	
<ul style="list-style-type: none"> • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres 	
o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:	
i. Species and listing (endangered or threatened): _____ _____ _____	
p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:	
i. Species and listing: _____ _____	
q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give a brief description of how the proposed action may affect that use: _____ _____	
E.3. Designated Public Resources On or Near Project Site	
a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide county plus district name/number: _____	
b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No i. If Yes: acreage(s) on project site? _____ ii. Source(s) of soil rating(s): _____	
c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:	
i. Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____ _____ _____	
d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes:	
i. CEA name: _____ ii. Basis for designation: _____ iii. Designating agency and date: _____	

e. 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? Yes No

If Yes:

i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District

ii. Name: Grace Episcopal Church - USN # 06740.000972

iii. Brief description of attributes on which listing is based:
Church

f. 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? Yes No

g. Have additional archaeological or historic site(s) or resources been identified on the project site? Yes No

If Yes:

i. Describe possible resource(s): _____

ii. Basis for identification: _____

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? Yes No

If Yes:

i. Identify resource: _____

ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____

iii. Distance between project and resource: _____ miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? Yes No

If Yes:

i. Identify the name of the river and its designation: _____

ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? Yes No

F. Additional Information


Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Ben Angelo Date 9/23/2021

Signature  Title Vice President

