



CENTRAL PERMIT OFFICE

CITY OF SYRACUSE, MAYOR BEN WALSH

Business Certificate of Use Application Instructions

Overview: This Certificate of Use is required for any bar, restaurant, drugstore, food store under 20,000 square feet or with a pharmacy, or smoking establishment in the City of Syracuse (definitions of terms used in this Application are on page 10). The Certificate of Use ensures the business operates in accordance with the law, does not negatively impact surrounding residential neighborhoods, and does not endanger citizens' health, safety, and welfare. For more information, [click here to read the Ordinance](#).

Application Contents (the "Application"):

- Certificate of Use Requirements
- Application Checklist
- Submittal Instructions, page 2
- Application Review Process, page 2
- Business Certificate of Use Application, pages 4 to 9
- Definitions of Terms, page 10

Certificate of Use Requirements:

- Prior to submitting the Application, the Proprietor and the Property Owner must review zoning requirements at syr.gov/zoning to ensure that the proposed business is compliant with the Syracuse Zoning Ordinance.
- Both the Proprietor **and** the Property Owner (collectively, the "**Applicants**") must sign the Application.
- The Certificate of Use must be renewed every two years and the Application submitted 60 days prior to the expiration date. **Failure to apply in a timely manner shall be a basis for denial.**
- The Certificate of Use is not transferable to a new proprietor, owner, address, or type of business.
- A City review process must be conducted to approve the Certificate of Use (see Application Review Process on page 2). **This must be prior to opening for new businesses.**
- Certificate must be posted conspicuously in a window or door.

Application Checklist:

- Completed Business Certificate of Use Application (pages 4 to 9).
- Non-refundable \$500 Application Fee submitted with Application. Check or Money Order payable to Commissioner of Finance.
- Proof of Workers' Compensation Insurance Coverage.
- Copy of Applicants' Photo Identification: Driver's License, Passport, or equivalent.
- Copies of all New York State Licenses/Permits/Certificates required to operate business.
- Copies of all Onondaga County Licenses/Permits/Certificates required to operate business.
- Copies of all City of Syracuse Licenses/Permits/Certificates required to operate business.
- Copies of organizational documents.
- Copy of good standing certificate issued by the NYS Secretary of State.
- Optional: Provide date-stamped pictures of the outside of the business showing signage and building façade. This could speed up the review of your Application. These can be hard copies submitted with the Application, or electronic copies emailed to Licensing@syr.gov.



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Submittal Instructions:

1. Application must be completed in its entirety. Incomplete Applications will not be processed. Application fee will not be returned regardless of final completion.
2. Application, fees, and additional documents must be submitted to:

City of Syracuse, Central Permit Office

One Park Place

300 South State St.

Syracuse, NY 13202

315-448-8474 | Licensing@syr.gov

Application Review Process

1. **Application is Submitted:** Completed Application, fees, and additional documents must all be submitted to the Central Permit Office.
2. **Application is Reviewed:** The following internal reviews are conducted on the Proprietor *and* Property Owner:
 - Criminal Background Checks: For specific types of felony and misdemeanor convictions.
 - Financial Indebtedness to City: To determine if there are unpaid parking tickets, delinquent water bills, delinquent taxes, civil penalties, or other judgments or monies due to the City.
 - Required Business Approvals: To ensure all necessary licenses and permits for the business have been obtained from all State, Federal and local authorities.
3. **Premises Inspected:** When the internal review process is complete, the premises will be inspected by the departments listed below to determine if the Applicants are complying with all applicable Federal, State and local laws and ordinances. Premises will be inspected during normal business hours.
 - Code Enforcement
 - Fire Prevention
 - Zoning
4. **Certificate of Use Issued:** If Applicants have satisfied all requirements and internal reviews and inspection of the premises are satisfactory, a Certificate of Use or Conditional Certificate of Use will be issued.
 - Certificate of Use: All inspections and reviews are satisfactorily completed, and applicable fees paid.
 - Conditional Certificate of Use: A Conditional Certificate of Use may, in the sole and absolute discretion of the Director, be issued. In that event, the Applicants must sign a verified statement to meet requirements identified in the review process. This must be submitted to the Director of Code Enforcement and requirements met by the date listed on the Conditional Certificate of Use for the license to be issued.
5. **Certificate of Use Denied:** If the Application is not complete, or if any statement in the Application is determined to be false, or if internal reviews and inspection of premises are not satisfactory, the Application will be denied, and the Applicants notified of the following:
 - The reason(s) for denial.
 - The right to request a hearing within 15 days of the notice.



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Failure to Apply or Renew:

Failure to apply for or renew the Certificate of Use will result in business closure and/or civil and criminal penalties. Both the Proprietor and Property Owner are responsible for ensuring the Certificate of Use is obtained and in compliance.

Compliance - Failure to Maintain Good Order:

Applicants are expected to comply with all:

- Federal and State statutes, rules, and regulations.
- City of Syracuse local laws, ordinances, rules, and regulations.
- Notices, orders, decisions, and determinations by City officials.

Failure to do so will result in points assigned, based on the severity of the violation and conviction. Accumulation of excessive points in a 12 or 24-month period can result in the Certificate of Use being suspended or revoked, business closure, and/or civil and criminal penalties.



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Business Certificate of Use Application

Business Name: _____

Business Address: _____

Business Phone: _____

Type of Business (check one):

- Bar Restaurant Drugstore Food Store Smoking Establishment
- Adult-Use Retail Cannabis Dispensary

Proprietor Information:

Proprietor Name: _____

Proprietor Date of Birth: _____

Proprietor Home Address: _____

- Any official notice or mailing from the Division of Code Enforcement will be mailed to this address.

Proprietor Phone: _____ Proprietor Email: _____

Proprietor Business Entity (check one):

- Sole Proprietor Partnership Corporation LLC

If other than Sole Proprietor, list all partners and limited liability company members, including address and dates of birth. Also list any assumed names of the business (DBA). Failure to provide the requested information will result in denial of your application.

- Provide a certificate of good standing from the NYS Secretary of State dated within the past thirty (30) days.



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Property Owner Information:

Owner Name: _____

Owner Address: _____

- Any official notice or mailings from the Division of Code Enforcement will be served at this address.

Owner Phone: _____ Owner Email: _____

Contact Name: _____

Contact Phone: _____ Contact Email: _____

Property Owner Entity (check one):

- Sole Proprietor Partnership Corporation LLC

If other than Sole Proprietor, list all partners and limited liability company members, including address and dates of birth. Also list any assumed names of the business (DBA). Failure to provide the requested information will result in denial of your application.

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Additional Business Information:

Days/Hours of Proposed Operation: Sun: _____ Mon: _____ Tue: _____
Wed: _____ Thu: _____ Fri: _____ Sat: _____
Sun: _____

What zoning district is the proposed business located in: _____

Does the proposed business need a Special Use Permit to lawfully operate in its zoning district? ___ Yes ___ No
• If yes, has a Special Use Permit allowing the proposed business to operate been issued? ___ Yes ___ No

If the property has a Special Use Permit, would the proposed business violate any of the terms or conditions imposed by the Special Use Permit? ___ Yes ___ No

Is there on-site cooking? ___ Yes ___ No
• If yes, do you have a fire suppression hood system? ___ Yes ___ No

Is there on-site food preparation? ___ Yes ___ No
• If yes, please attach a copy of your NYS Food Processor License and Onondaga County Food Service Establishment permit
• If yes, do you have a Special Permit for food prep? ___ Yes ___ No

Do you have a fire alarm / smoke detector system? ___ Yes ___ No
• Fire Department Capacity Number: _____

Do you have a sprinkler system in your space? ___ Yes ___ No

Do you have an elevator or dumb waiter in your space? ___ Yes ___ No

Do you have a State Retail Food Store License? ___ Yes ___ No
• If yes, please attach a copy of your NYS Retail Food Store License
• If no, is one required? ___ Yes ___ No

Do you sell lottery tickets? ___ Yes ___ No
• If yes, please attach a copy of your NYS Lottery Sales Agent License.

Is there any interior seating? ___ Yes ___ No If yes, state number of tables: _____

Is there any outside seating? ___ Yes ___ No If yes, state number of tables: _____

Number of on-site parking spaces: _____



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Do you have music or entertainment? Yes No

- If yes, do you have a Dance/Floor Show/Entertainment License? Yes No
- If yes, do you have a Special Permit for Entertainment? Yes No

Do you have any amusements such as video games or a juke box? Yes No

- If yes, how many: _____
- If yes, is the Amusement Device Location License current and displayed? Yes No

Do you sell any type of alcoholic beverage? Yes No

- If yes, please attach a copy of all NYS Liquor Authority licenses you hold for the proposed business.

Do you sell cannabis products? Yes No

- If yes, please attach a copy your NYS Cannabis License and your Operating Plan.

Do you allow on-site cannabis consumption? Yes No

- If yes, please attach a copy of your NYS On-Site Consumption License, or other written approval issued by NYS allowing for on-site cannabis consumption.

Do you sell any type of tobacco products? Yes No

- If yes, attach a copy of your NYS Cigarette/Tobacco/Vapor Products Registration.
- If yes, attach a copy of your City of Syracuse Tobacco Retail License.

List and attach all other State, County, and additional City Licenses held by the Business: _____

- Please attach a copy of your NYS Certificate of Authority to this application.



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Proprietor Affirmation

I am a person authorized to legally bind the Proprietor and have personally completed and read the foregoing application and know the contents thereof. The ground of my beliefs relative to all matters in the application which are not stated upon my own personal knowledge are investigations which I have made or caused to be made concerning the subject matter of the application as well as, if applicable, information acquired by me in the course of my duties/responsibility to the Proprietor and from the books and records of the Proprietor. I acknowledge and assume responsibility for payment of any and all applicable fees associated with this application.

I affirm this ___ day of _____, _____ **under the penalties of perjury under the laws of New York, which may include a fine or imprisonment**, that the foregoing application is true, accurate, and complete to the best of my knowledge, and I understand that this document may be filed in an action or proceeding in a court of law.

Proprietor Signature: _____



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Owner Affirmation

I am a person authorized to legally bind the Owner and have personally completed and read the foregoing application and know the contents thereof. The ground of my beliefs relative to all matters in the application which are not stated upon my own personal knowledge are investigations which I have made or caused to be made concerning the subject matter of the application as well as, if applicable, information acquired by me in the course of my duties/responsibility to the Owner and from the books and records of the Owner. I acknowledge and assume responsibility for payment of any and all applicable fees associated with this application.

I affirm this ___ day of _____, _____ **under the penalties of perjury under the laws of New York, which may include a fine or imprisonment**, that the foregoing application is true, accurate, and complete to the best of my knowledge, and I understand that this document may be filed in an action or proceeding in a court of law.

Owner Signature: _____



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Definitions of Terms

Definitions:

Definitions of the business types required to obtain the Business Certificate of Use, and other terms used in this Application are listed below. They are found in Chapter 27, Article 12 of the Revised General Ordinances of the Property Conservation Code of the City of Syracuse.

“Bar” shall mean one or more of the following:

- A building or portion thereof where alcoholic beverages are sold for consumption on the premises.
- A building or portion thereof operated for profit or pecuniary gain or as a place of assembly where alcoholic beverages are provided by the operator of the premises, his or her agents, servants, or employees, or are brought onto said premises by persons assembling there.

“Business” and **“Businesses”** shall mean a bar, food store, drugstore, restaurant, or smoking establishment as defined herein.

“Drugstore” shall mean a building or portion thereof where prescription drugs are sold at retail, together with dry goods, food, or beverages.

“Food Store” means a building or portion thereof with a total floor space of less than 20,000 sq. ft. which is devoted, in whole or part, to the sale of dry goods and food and beverages to be consumed off the premises.

“Owner” means and includes the owner or owners of the freehold of the premises or lesser estate therein who appears as the owner of record with the Onondaga County Clerk’s Office, as well as any person, agent, firm, entity, or corporation having any legal or equitable interest in the property at the time a notice, order or other document is issued by the Division of Code Enforcement.

“Proprietor” means an owner and/or operator or future owner and/or operator of the business specified on a particular Certificate of Use for a particular business location.

“Premises” shall mean the building in which the business is located, as well as accessory structures and uses, including parking lots, and the land on which the building is located.

“Restaurant” shall mean a building or portion thereof where food is sold to be consumed on or off the premises. This definition shall not include a building or portion thereof where a non-alcoholic beverage or snack is available but is incidental to the conduct of the business at the premises or a college or university’s dining halls.

“Smoking Establishment” shall mean a building or portion thereof where tobacco products and paraphernalia, which includes but shall not be limited to cigarettes, cigars, pipes, Kreteks (clove cigarettes), hookahs, and Shisha, are used and/or consumed on the premises.



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Use your phone to scan the QR code below or visit syr.gov/zoning to learn more about the City of Syracuse Office of Zoning Administration.



Zoning Administration

Use your phone to scan the QR code below or visit goto.syr.gov/ordinance to learn more about the Business Certificate of Use as outlined in Chapter 27, Article 12 of the Revised General Ordinances of the City of Syracuse.



Ordinance