

INSERT: Amend Zoning Map and/or Zoning Text

(Pursuant to §148-3-4 & §148-3-5)

SUBMISSION REQUIREMENTS

FILING FEE \$500.00

ONE (1) original:

- ___ 1. Common Application Form – completed and signed
- ___ 2. TOWN BOARD ZONING insert - completed
- ___ 3. SEQR Short form – completed (Town Board may require completed Long Form or more information)
- ___ 4. Letter of authorization - if agent of property owner or applicant.
- ___ 5. For zoning map changes **ONLY** - Photocopy of tax map showing affected and surrounding properties, within at least 500 ft of site boundaries, **showing existing and proposed** Zone District boundaries.
- ___ 6. For zoning map changes **ONLY** - Photocopy of tax map showing affected and surrounding properties, within at least 500 ft of site boundaries, **showing existing and proposed** land uses and major structures.
- ___ 7. Zoning text changes **ONLY** - Photocopy of existing text in side-by-side comparison to proposed text.
- ___ 8. If within LWOD - Written statement or photocopy of transmittal letter that a copy of this application has been submitted to the City of Syracuse Water Department or the City of Auburn. (per §148-7-1-E & F).

TEN (10) copies of:

- ___ 9. Current survey(s) (per §148-10-1-D.1), with location map, stamped/signed by licensed land surveyor.
- ___ 10. Site plan showing all existing site conditions and, if any, a proposed land use concept

REFERRALS AND CONTACTS WITH OTHER AGENCIES

The following agencies may be contacted to provide advisory review of applications before the Town. You may be required by the Town to contact these agencies directly.

Please indicate if you have **contacted any of these agencies**, the date of contact and the type of response (informal letter, permit issued, N/A - Not Applicable)

		<u>Contact Date</u>	<u>Response</u>
Highway Access:	Town Highway Dept.	_____	_____
	Onondaga County DOT	_____	_____
	NYS DOT	_____	_____
Water Supply:	Town Water Dept.	_____	_____
Sanitary Waste:	Onondaga Co Health Dept.	_____	_____
	City of Syracuse Water Dept.	_____	_____
Natural Resources:	NYS DEC	_____	_____
	US Army Corp of Engineers	_____	_____

PROCEDURE SUMMARY

1. Pre-application meeting with Office of Planning & Zoning
2. Submittal Deadline (two [2] weeks prior to Town Board meeting date)
3. Preliminary Town Board review of application
 - a. Determine completeness
 - b. Request additional information or submissions
 - c. Schedule site visit and formal review meeting date; set escrow if needed.
 - d. Refer application to Town Planning Board and other agencies
4. Formal Town Board Review
 - a. Public hearing
 - b. Receipt of referral recommendations
 - c. Final action and adoption of resolution

Contact Town Staff if you need assistance

IV. CONTACT INFORMATION

OWNER

Name: MWB FAMILY I, LLC
 Address: 13915 Old Coast Rd 1003
Naples, FL 34110
 Home Phone: (315) 867-7999
 Work Phone: _____
 Other: _____
 Email: abitz@cnyfeeds.com

APPLICANT (if different than owner)

Name: _____
 Address: _____
 Home Phone: _____
 Work Phone: _____
 Other: _____
 Email: _____

V. PROFESSIONAL ADVISOR(S)

Type of advisor: Architect
 Name: William L Murphy Jr
 Firm: Space Architectural Studio
 Address: 3 Fennell Street, Suite 2 Skaneateles, NY
 Office Phone: 315-685-0540
 Other: _____
 Email: Bill@spacearchstudio.com

Type of advisor: _____
 Name: _____
 Firm: _____
 Address: _____
 Office Phone: _____
 Other: _____
 Email: _____

VI. NOTIFICATION – SURROUNDING PROPERTY OWNERS (staff assistance available)

Write owner name & mailing address of adjacent properties and properties directly across street/highway.

North Boundary

Name & Mailing address

across street/highway

Circle: **adjacent** or **across street/highway**
Donald Clark
ATTN: Joan Callaway
81 Onondoga Street
Skaneateles, NY 13152

Suzanne & Richard Cyphers
3701 Highland Ave
Skaneateles, NY 13152

South Boundary

Name & Mailing address

Circle: **adjacent** or across street/highway

adjacent

Vincent Schoonmaker Skaneateles Storage, LLC
64 Onondoga Street 1351 Cherry Val Tpke
Skaneateles, NY 13152 Skaneateles NY 13152

East Boundary

Name & Mailing address

Circle: **adjacent** or across street/highway

Casimir Bobowski
1342 New Seneca TPK
Skaneateles, NY 13152

West Boundary

Name & Mailing address

Circle: **adjacent** or across street/highway

Jennifer Bolster
74 Onondoga Street
Skaneateles, NY 13152

VII. AGRICULTURAL DATA STATEMENT

(Pursuant to NYS Agricultural & Markets Law 25AA §305-a) (See also Town Zoning §148-31C)

- 1. Is this property within an Agricultural District and contains farm operations? No Yes
- 2. Is this property within 500 ft of a farm operation located in an agricultural district? No Yes

If Yes to either question - provide the name and address of land-owners containing farm operations located **within an Agricultural District and within 500 ft** of the application property. This is **NOT** required for applications for **Area Variances**.

(use additional sheet if more space is needed)

Name:	_____	Name:	_____
Address:	_____	Address:	_____
	_____		_____
Tax Map#:	_____	Tax Map#:	_____

VIII. DISCLOSURE OF INTEREST *(pursuant to NYS General Municipal Law §809)*

- 1. **Every** application, petition or request submitted for a variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit, pursuant to the provisions of any ordinance, local law, rule or regulation constituting the zoning and planning regulations of a municipality **shall state** the name, address, and the nature and extent of the interest of any state officer and any officer and employee of such municipality or of a municipality of which such municipality is a part, in the person, partnership or association making such application, petition or request (hereinafter called the application) to the extent known to such applicant.
- 2. An officer or employee shall be deemed to have an interest in the applicant when he, his spouse, or their parents, siblings, children, grandchildren or the spouse of any of them:
 - a. Is the applicant, or
 - b. Is an officer, director, partner or employee of the applicant, or
 - c. Legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or
 - d. Is a party to an agreement with such an applicant, express or implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application, petition or request.
- 3. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

The applicant hereby states, pursuant to the provision of Section 809 of the General Municipal Law, the name, residence and the nature and the extent of the interest of any state officer or employee of the Town of Skaneateles and/or the County of Onondaga with this application.

If none, insert "none"

Name	Residence Address	Nature of relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

IX. REFERRAL TO COUNTY PLANNING AGENCY:

Check appropriate box

Does this application propose new text or an amendment to the Town Comprehensive Plan(s) or zoning regulations?

No Yes

Is the property within **500 feet** of:

- 1. Town of Skaneateles boundary line? No Yes
- 2. state or county thruway/highway/roadway? No Yes
- 3. existing or proposed state or county park/recreational area? No Yes
- 4. existing or proposed county-owned stream or drainage channel? No Yes
- 5. existing or proposed state or county-owned parcel on which a public building or institution is situated? No Yes
- 6. a farm operation located in a NYS Agricultural District? No Yes

X. LOCATION AND SITE INFORMATION *(staff assistance available)*

- 1. Is the property fully or partially covered by designated flood hazard area? No Yes
- 2. Is the property fully or partially affected by regulated wetlands? No Yes
- 3. Is the property fully or partially within the Lake Watershed Overlay District of
Skaneateles Lake? No Yes
Owasco Lake? No Yes
- 4. Is the property fully or partially within the Open Pit Mining Overlay District? No Yes
- 5. Is any lake, stream or other watercourse within
(see Watercourse definition Town Zoning §148-12)
 - a) 100' of proposed project? No Yes
 - b) 200' of proposed project? No Yes
- 6. Does any portion of property contain steep slopes
exceeding 12%? No Yes
exceeding 30%? No Yes
- 7. Is any portion of property limited by any easements? No Yes
If yes –specify easement type(s) and holder name(s): _____

8. What is the existing Zone District(s) on the property: **Check all that apply:**
- | | | |
|----------------------------|-------|-------------------------------------|
| Rural and Farming | (RF) | <input type="checkbox"/> |
| Rural Residential | (RR) | <input checked="" type="checkbox"/> |
| Highway Commercial | (HC) | <input type="checkbox"/> |
| Hamlet | (HM) | <input type="checkbox"/> |
| Industrial/Research/Office | (IRO) | <input type="checkbox"/> |

9. List prior zoning or subdivision actions from the Town of Skaneateles *(staff assistance available)*
Special permit - professional office

10. The property is _____ [sq. ft. – acres] and what is its general character of existing use?

Check all that apply

Vacant	_____	Non-residential	<input checked="" type="checkbox"/>
Agriculture	_____	Commercial	<input checked="" type="checkbox"/>
Residential	_____	Industrial	<input type="checkbox"/>

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: L.A.B. Building			
Project Location (describe, and attach a location map): 1326 New Seneca Turnpike			
Brief Description of Proposed Action: 			
Name of Applicant or Sponsor: MWB FAMILY I, LLC		Telephone: (315) 867-7999	
		E-Mail: abitz@cnyfeeds.com	
Address: 13915 Old Coast Road 1003			
City/PO: Naples		State: FL	Zip Code: 34110
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			NO <input checked="" type="checkbox"/>
			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		+/- <u>3.67</u> acres	
b. Total acreage to be physically disturbed?		+/- <u>3.67</u> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		+/- <u>3.67</u> acres	
4. Check all land uses that occur on, <u>are</u> adjoining [and] or near the proposed action.			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<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? 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service[is] 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? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? no change If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? no change If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archeological site, or district that [a structure that] is listed on [either] the National Register of Historic Places or the 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the [proposed action] project site, or any portion of it, located in or adjacent to an area designated as [archaeologically] sensitive [area] 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?	<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: _____ _____ _____			

<p>14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:</p> <p><input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional</p> <p><input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban</p>		
<p>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?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>16. Is the project site located in the 100-year flood plan?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>17. Will the proposed action create storm water discharge, either from point or non-point sources?</p> <p>If Yes,</p> <p style="padding-left: 40px;">a. Will storm water discharges flow to adjacent properties?</p> <p style="padding-left: 40px;">b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?</p> <p>If Yes, briefly describe:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>18. Does the proposed action include construction or other activities that <u>would</u> result in the impoundment of water or other liquids (<i>e.g.</i>, retention pond, waste lagoon, dam)?</p> <p>If Yes, explain the purpose and size of the impoundment:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>20. Has the site of the proposed action or an adjoining property been <u>the</u> subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>I [AFFIRM] CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____ Title: _____</p>		

Project:

Date:

***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 small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input 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 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 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 type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input 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 type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

PRINT FORM

**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.

<input type="checkbox"/> 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.	
<input type="checkbox"/> 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.	
_____ Name of Lead Agency	_____ Date
_____ 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)

PRINT FORM

Project Narrative

MWB Family I, LLC

Project Location: 1326 New Seneca Turnpike, Skaneateles, NY 13152

Tax Map No.: 043.-04-09.0

Town Zoning District: Rural Residential

SPACE Architectural Studio project #: 2022-27

Date: 20 May 2022

MWB Family I, LLC has recently acquired the building formally known as the LAB Building located at 1326 New Seneca Turnpike. Since 2010, this building has been occupied by Chase Design which has been an integral part of the community. Chase Design is leaving this space in June and once their lease is complete, MWB would like to fill the void they are leaving in the community by continuing to operate a professional office building at this location.

MWB Family I, LLC are proposing to create a multi-tenant facility at the location within the existing structure. In addition to finding major tenants for portions of the space, they are also looking to open a we work-like facility. This would provide business amenities such as conference rooms and offices for residents to meet and for smaller businesses in the area. The primary use of the property today is office space, which requires a special permit to operate within the Rural Residential district.

While searching for new tenants to occupy the building, it has become clear that clarification is needed as to what is allowed on the premises to allow for a successful future of the building. We are hoping to gain some insight into what potential uses could be future tenants of this space. The aim to establish the allowable uses for this property while planning for construction and prior to filling building with tenants.

The owners have been approached by several different types of uses as defined by town ordinance. These uses include healthcare facility,¹ medical office,² office,³ retail/retail business,⁴ and service business.⁵ The last time the town did an overhaul of the zoning map, this property was changed from highway commercial to rural residential. This proposal for this application is to change the zoning back from rural residential to highway commercial. This change would allow for both the occupancies that have been considered at present but foster a future of commercial tenants in this area. Unlock viability for other uses to be allowed on the premises vs need a special permit to allow for their uses

¹Healthcare facility: a hospital, nursing home, medical clinic, or office building for doctors and other medical personnel, including any residential facility in which the resident's receive medical, nursing, or other care meeting the needs of daily living because of the resident's state of health, including but not limited to assistant living congregate care and rehabilitation facilities.

²Medical office: structure occupied principle by offices of physicians, dentists, or other medical service providers

³Office: space in a building used to provide professional services or to conduct activities of a business or not for profit organization excluding retail light industry or craft workshop uses

⁴Retail/retail business: an establishment selling goods directly to customers for personal and household consumption, including but not limited to an appliance store, bakery, convenience store, delicatessen, drug store, florist, grocer, hardware store, liquor store, newsstand, shoe store, stationary store, and variety store

⁵Service business: a business or non-profit organization that provides service directly to the customers, either on or off the premises including but not limited to building, electrical, plumbing, landscape contractor, arts instruction of studio, business or educational services, catering, health club, house cleaning services, locksmith, office support services, furniture repair and restoration services, and tailoring (service business does not include retail business, restaurants, warehouses, or other uses separately listed on the use table in article 4. A service business may include the sale of accessories, supplies, and incidental items, provided if more than 20% of the floor space is used for used for such sales, it will also be considered as a retail business)

We believe there is a precedent for this request based on the special use permit acquired by Chase Design and the current use of the surrounding area. Immediately to the east is first professional office building in the Town of Skaneateles. While they are also located in the Rural Residential district, they have a special permit to operate as a professional office and a medical office.

MWB has been approached by a catering business that specializes in wedding services, a business that largely benefits the community. In addition to providing these wedding service to the community, this tenant would also like to be able to provide services to the former LAB Building as an accessory use⁶ to the structure. The Skaneateles Town code does not allow for customers to walk in off the street and utilize facility without it being classified as a retail business, a use that is not allowed in the Rural Residential district.

We believe the accessory use would be considered an accessory use to the office space. The proposed tenant space is approximately 1,500 SF of the total 24,389 SF building or 5.98% of the floorspace. It is not uncommon for larger office and public spaces to have an accessory use like what we are proposing here. There are several within the Town of Skaneateles that come to mind, Community Center, and Baxter for example. We because this catering company would provide both to the immediate office space and the larger Skaneateles wedding community, that we have a strong argument for this argument.

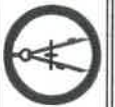
In meeting with the Karen Barkdull, P&Z Clerk and Bob Herman, Codes Enforcement Officer, we were made aware of a potential planned update to the zoning law and provided with a draft for our review. The proposed Section 148-7-4 PDD language would be another way for us to proceed forward to achieve a similar benefit for our client. It is our understanding that this law has yet to be adopted, however our applicant would be amenable to pursuing this improvement under those guidelines should they be adopted.

Our proposal is solely for a change of use and not to make any changes to the exterior of this existing facility, which we view as a vital, economic resource to the village and town business community. By allowing the zoning district to change from rural residential to highway commercial, it would allow for the potential future tenants of this building to have a greater variety of uses while having little or no impact to the surrounding community as there will be not change to the traffic utilization of the property.

⁶Accessory use: a use which is customarily incidental to and subordinate to the principal use of a lot or structure, located on the same lot as the principal use or structure.

Definitions from the New York State Building Code 508.3.1 Accessory Occupancies: accessory occupancies are those occupancies subsidiary to the main occupancy of the building or portion thereof. Aggregate accessory occupancies shall not occupy more than 10% of the area of the story in which they are located and shall not exceed the tabular values in Table 503, without height and area increases in accordance with Sections 504 and 506 for such accessory occupancies

NO.	DATE	REVISIONS



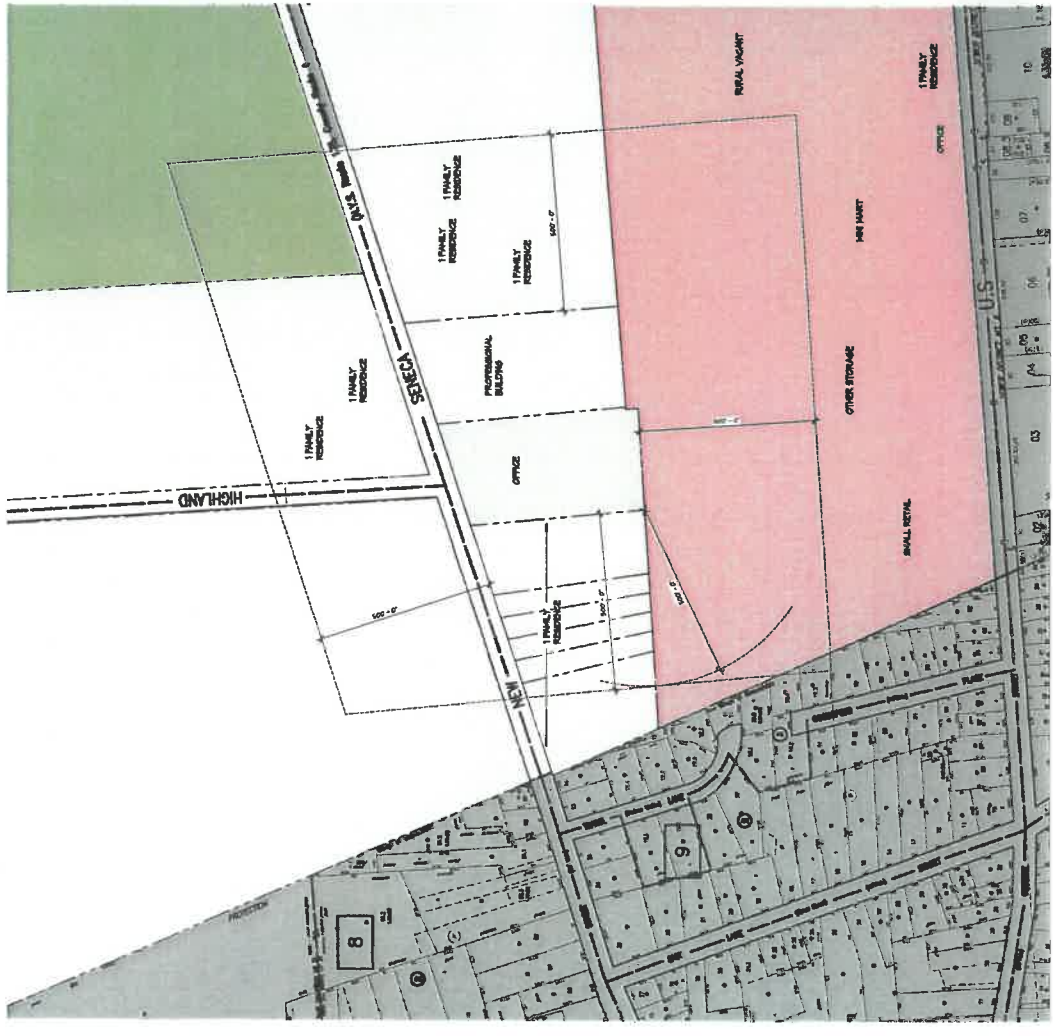
5-20-2022

A-1

PROPOSED ZONE CHANGE

Project Name:	2022-27	Date:	05/14
Client:	CVI/13152	Location:	PLM
Scale:	As Indicated		

DISCLAIMER: THE CONSULTANT SHALL VERIFY ALL DIMENSIONS AND BE RESPONSIBLE TO THE CLIENT FOR THE ACCURACY OF THE INFORMATION AND DATA PROVIDED TO THE CONSULTANT. THE CONSULTANT SHALL NOT BE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION AND DATA PROVIDED TO THE CONSULTANT BY ANY OTHER PARTY. THE CONSULTANT SHALL NOT BE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION AND DATA PROVIDED TO THE CONSULTANT BY ANY OTHER PARTY. THE CONSULTANT SHALL NOT BE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION AND DATA PROVIDED TO THE CONSULTANT BY ANY OTHER PARTY.



1 Site Plan
 SCALE: 1" = 80'-0"

