



## CITY OF SYRACUSE SYRACUSE INDUSTRIAL DEVELOPMENT AGENCY PROJECT APPLICATION INSTRUCTIONS

1. Fill in all blanks, using "none", "not applicable" or "not available" where the question is not appropriate to the Project, which is the subject of this Application (the "Project"). If you have any questions about the way to respond, please call the City of Syracuse Industrial Development Agency ("SIDA" or the "Agency") at (315)473-3275.
2. If an estimate is given as the answer to a question, put "(est.)" after the figure or answer, which is estimated.
3. If more space is needed to answer any specific question, attach a separate sheet.
4. When completed, return this application by mail or fax to the Agency at the address indicated below. A signed application may also be submitted electronically in PDF format to Honora Spillane, SIDA Executive Director at [hspillane@syrgov.net](mailto:hspillane@syrgov.net). **An application will not be considered by the Agency until the application fee has been received.**
5. The Agency will not give final approval for this Application until the Agency receives a completed NYS Environmental Assessment Form concerning the Project, which is the subject of this Application. The form is available at <http://www.dec.ny.gov/permits/6191.html>
6. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the SIDA (with certain limited exceptions) are open to public inspection and copying. If the Applicant feels that there are elements of the Project which are in the nature of trade secrets which, if disclosed to the public or otherwise widely disseminated, would cause substantial injury to the Applicant's competitive position, this Applicant must identify such elements in writing and request that such elements be kept confidential. In accordance with Article 6 of the Public Officers Law, the SIDA may also redact personal, private, and/or proprietary information from publicly disseminated documents.
7. The Applicant will be required to pay the Agency application fee and legal fee deposit upon submission. If accepted as a project of the agency, the Applicant is responsible for all administrative and legal fees as stated in Appendix D.
8. A complete application consists of the following 10 items:
  - This Application
  - Conflict of Interest Statement - Appendix A
  - Environmental Assessment Form - Appendix B (Short Form)
  - Verification - Appendix C
  - A Project description, including a feasibility statement indicating the need for the requested benefits
    - Provide site plans, sketches, and/or maps as necessary
  - 10 year pro forma operating budget, including funding sources
  - A check payable to the Agency in the amount of \$1,000
  - A check payable to Barclay Damon, LLP in the amount of \$2,500

**It is the policy of the Agency that any Project receiving benefits from the Agency will utilize 100% local contractors and local labor for the construction period of the Project unless a waiver is granted in writing by the Agency.**

**Return to:**

City of Syracuse Industrial Development Agency  
333 W. Washington Street, Suite 130  
Syracuse, NY 13202  
Phone: 315-473-3275  
[hspillane@syrgov.net](mailto:hspillane@syrgov.net)

# City of Syracuse Syracuse Industrial Development Agency Application

## I. APPLICANT DATA

### A. Contact Information

Company Name:	("Applicant")				
Mailing Address:					
City:		State:		Zip:	
Phone:		Fax:			
Contact Person:					
Email Address:					
Industry Sector:					
NAICS Code:		Federal Employer Identification Number:			

### B. Will the Applicant be the Project Beneficiary (i.e. Project tenant or owner/operator)

Yes          No          If No, Who will:

### C. Principal Stakeholders

List principal owners/officers/directors owning 5% or more in equity holdings with percentage ownership. Public companies should list corporate officers.

Name	% Ownership	Business Address	Phone	Email

### D. Corporate Structure: Attach a schematic if Applicant is a subsidiary or otherwise affiliated with another entity.

Corporation

Private

Public

Date and Location of  
Incorporation/Organization

Partnership

General

Limited

If a foreign corporation, is the  
Applicant authorized to do  
business in the State of New  
York?

Other

Sole Proprietorship

Limited Liability Company/Partnership

E. Applicant's Counsel:

Name:					
Firm:					
Mailing Address:					
City:		State:		Zip:	
Phone:		Fax:			
Email Address:					

F. Applicant's Accountant:

Name:					
Firm:					
Mailing Address:					
City:		State:		Zip:	
Phone:		Fax:			
Email Address:					

G. Applicant History: If the answer to any of the following is "Yes", please explain below. If necessary, attach additional information.

1. Is the Applicant, its management, or its principal owners now a plaintiff or defendant in any civil or criminal litigation?  Yes  No
2. Has any person listed in Section 1(c) ever been convicted of a criminal offense (other than a minor traffic violation)?  Yes  No
3. Has any person listed in Section 1 (C) or any concern with whom such person has been connected ever been in receivership or been adjudicated a bankrupt?  Yes  No

H. Has the Applicant, or any entity in which the Applicant or any of its members or officers are members or officers, received assistance from SIDA in the past? If yes, please give year, Project name, description of benefits, and address of Project.

Yes  No

## II. PROJECT INFORMATION Corcoran High School

### A. Project Location

Address: <input style="width: 90%;" type="text"/>	Legal Address (if different) <input style="width: 90%;" type="text"/>
City: <input style="width: 98%;" type="text"/>	
Zip Code: <input style="width: 98%;" type="text"/>	
Tax Map Parcel ID(s): <input style="width: 98%;" type="text"/>	
Current Assessment: <input style="width: 150px;" type="text"/>	Square Footage /Acerage of Existing Site: <input style="width: 150px;" type="text"/>
Square Footage of Existing Building, if any: <input style="width: 150px;" type="text"/>	Census Tract: (Please See Appendix E for Census Tracts) <input style="width: 150px;" type="text"/>

### B. Type (Check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> New Construction                                 | <input type="checkbox"/> Commercial                       |
| <input type="checkbox"/> Expansion/Addition to Current Facility           | <input type="checkbox"/> Brownfield/Remediated Brownfield |
| <input type="checkbox"/> Manufacturing                                    | <input type="checkbox"/> Residential/Mixed Use            |
| <input type="checkbox"/> Warehouse/Distribution                           |   |
| <input type="checkbox"/> Other <input style="width: 600px;" type="text"/> |   |

C. Description of Project: Please provide a detailed narrative of the proposed Project. This narrative should include, but not be limited to: (i) the size of the Project in square feet and a breakdown of square footage per each intended use; (ii) the size of the lot upon which the Project sits or is to be constructed; (iii) the current use of the site and the intended use of the site upon completion of the Project; (iv) the principal products to be produced and/or the principal activities that will occur on the Project site; and (v) an indication as to why the Applicant is undertaking the Project and the need for the requested benefits (Attach additional sheets if necessary). Attach copies of any site plans, sketches or maps.

D. Is the Applicant the owner of the property?

Yes                      No

If not, who is the owner and by what means will the site be acquired? If leasing, when does the lease end?

E. Infrastructure: Please indicate whether the following are onsite, need to be constructed, or need to be renovated/expanded:

Water <input style="width: 200px;" type="text"/>	Electric <input style="width: 200px;" type="text"/>
Sanitary/ Storm <input style="width: 200px;" type="text"/>	Private Roads <input style="width: 200px;" type="text"/>
Sewer Gas <input style="width: 200px;" type="text"/>	Telecommunication <input style="width: 200px;" type="text"/>

F. Zoning Classification: Please list the current zoning:

Current Zoning

G. Are variances needed to complete the Project?

Yes  No

If yes, please describe nature of variances and if municipal approvals have been granted:

H. Will the Project generate sales tax for the community?

Yes  No

If yes, what is the company's average annual sales or estimated annual sales?

I. In accordance with N.Y. GML Sec. 862(1):

1. Will any other companies or related facilities within the state close or be subjected to reduced activity as a result of this Project? If so please list the town and county of the location(s):

Yes  No

2. Will the completion of the Project result in the removal of a plant or facility of the Applicant from one area of the State New York to another area of the State of New York?

Yes  No

3. Will the completion of the Project result in the abandonment of one or more plants or facilities of the Applicant located in the State of New York?

Yes  No

i. If any answer to questions 1, 2 or 3 above is yes, is the Project reasonably necessary to discourage the Applicant from removing such other plant or facility to a location outside the State of New York?

Yes  No

ii. If any answer to questions 1, 2 or 3 above is yes, is the Project reasonably necessary to preserve the competitive position of the Applicant in its respective industry?

Yes  No

4. Will the Project primarily consist of retail facilities?

Yes  No

i. If yes, will the cost of these facilities exceed one-third of the total Project cost?

Yes  No

J. Is the Project located in a distressed Census Tract?

Yes  No

Please see Appendix E for the map of distressed census tracts in the city of Syracuse.

K. Is the Project site designated as an Empire Zone?

Yes  No

L. Construction

1. Project Timeline (approximate):

Construction  
Commencement

Construction  
Completion

Date of  
Occupancy

2. Please list any other key Project milestones:

3. Has work begun?  Yes  No

If so, indicate the amount of funds expended in the past 3 years?

### III. PROJECT COSTS & FINANCING

#### A. Estimated Project Costs

i. State the costs reasonably necessary for the acquisition, construction, and/or renovation of the Project:

Description of Cost Type	Total Budget Amount
Land Acquisition	
Site Work/Demo	
Building Construction & Renovation	
Furniture & Fixtures	
Equipment	
Equipment Subject to NYS Production Sales Tax Exemption (Manufacturing)	
Engineering/Architects Fees	
Financial Charges	
Legal Fees	
Other	
Management /Developer Fee	
Total Investment	

ii. State the amounts reasonably anticipated for the acquisition, construction, and/or renovation of the Project:

Amount of capital the Applicant has invested to date:	
Amount of capital Applicant intends to invest in the Project through completion:	
Total amount of public sector source funds allocated to the Project:	
Identify each public sector source of funding:	
Percentage of the Project to be financed from private sector sources:	
Percentage of the Project to be financed from public sector sources:	

#### B. Financial Assistance sought (estimated values):

Applicants requesting exemptions and/or abatements from SIDA must provide the estimated value of the savings they anticipate receiving. **New York State regulations require SIDA to recapture any benefit that exceeds the amount listed in this application.**

i. Is the Applicant expecting that the financing of the Project will be secured by one or mortgages?  Yes  No

If yes, amount requested and name of lender:

ii. Is the Applicant expecting to be appointed agent of the Agency for purposes of abating payments of NYS Sales and Use Tax?  Yes  No

If yes, what is the TOTAL amount of purchases subject to exemption based on taxable Project costs?

iii. Is the Applicant requesting a payment in lieu of tax agreement (PILOT) for the purpose of a real property tax abatement?  Yes  No

If yes, Category of PILOT requested:

iv. Is the Applicant requesting any real property tax abatement that is **inconsistent** with the Agency's UTEP?

Yes  No

*If yes, please contact the Executive Director prior to submission of this Application.*

v. Upon acceptance of this Application, the Agency staff will create a PILOT schedule and indicate the estimated amount of PILOT Benefit based on anticipated tax rates and assessed valuation and attach such information as Exhibit A hereto. At such time, the Applicant will certify that it accepts the proposed PILOT schedule and requests such benefit be granted by the Agency.

**\*\* This Application will not be deemed complete and final until Exhibit A hereto has been completed and executed\*\***

C. Type of Exemption/Abatement Requested:

Amount of Exemption/Abatement Requested:

<input type="checkbox"/>	Real Property Tax Abatement (PILOT)	
<input type="checkbox"/>	Mortgage Recording Tax Exemption (1% of amount mortgaged)	
<input type="checkbox"/>	Sales and Use Tax Exemption (\$4% Local, 4% State)	
<input type="checkbox"/>	Tax Exempt Bond Financing (Amount Requested)	
<input type="checkbox"/>	Taxable Bond Financing (Amount Requested)	

D. Company's average yearly purchases or anticipated yearly purchases from vendors within Onondaga County, subject to sales tax:

E. Estimated capital investment over the next 5 years, beyond this Project, if available:

#### IV. EMPLOYMENT AND PAYROLL INFORMATION

**\* Full Time Equivalent (FTE) is defined as one employee working no less than 40 hours per week or two or more employees together working a total of 40 hours per week.**

A. Are there people currently employed at the Project site?

Yes

No

If yes, provide number of full time equivalent (FTE) jobs at the facility:

B. Complete the following:

Estimate the number of full time equivalent (FTE) jobs to be retained as a result of this Project:	<input type="text"/>
Estimate the number of construction jobs to be created by this Project:	<input type="text"/>
Estimate the average length of construction jobs to be created (months):	<input type="text"/>
Current annual payroll at facility:	<input type="text"/>
Average annual growth rate of wages:	<input type="text"/>
Please list, if any, benefits that will be available to either full and/or part time employees:	<input type="text"/>
Average annual benefit paid by the company (\$ or % salary) per FTE job:	<input type="text"/>
Average growth rate of benefit cost:	<input type="text"/>
Amount or percent of wage employees pay for benefits:	<input type="text"/>
Provide an estimate of the number of residents in the Economic Development Region (Onondaga, Madison, Cayuga, Oneida, Oswego, and Cortland Counties) to fill new FTE jobs:	<input type="text"/>



## VI. REPRESENTATIONS & AFFIRMATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

**A. Jobs Listings:** Except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the Project will be listed with the New York State Department of Labor Community Services Division (the "DOL") and with the administrative entity of the service delivery area created by the Workforce Investment Act ("WIA") in which the Project is located.

Initial

**B. First Consideration for Employment:** In accordance with §858-b (2) of the New York General Municipal Law, the Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, where practicable, the Applicant will first consider persons eligible to participate in WIA programs who shall be referred by the WIA for new employment opportunities created as a result of the Project.

Initial

**C. Other NYS Facilities:** In accordance with §862 (1) of the New York General Municipal Law, the Applicant understands and agrees that projects which will result in the removal of an industrial or manufacturing plant of the Project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the Project occupant within the state is ineligible for Agency Financial Assistance, unless otherwise approved by the Agency as reasonably necessary to preserve the competitive position of the Project in its respective industry.

Initial

**D. City Human Right Law:** The Applicant agrees to endeavor to comply with the provisions of Article XI, Division 2 of the City Code, entitled "The Omnibus Human Rights Law," which prohibits discrimination in employment based upon age, race, sex, creed, color, religion, national origin, sexual orientation, disability or marital status. The Applicant hereby agrees to adhere to this policy or equal opportunity employment in the requirement, hiring, training, promotion, and termination of employees.

Initial

**E. City of Syracuse and MWBE Preference:** The applicant understands and agrees that it is the preference of the Agency that the applicant provide, and use its best efforts to provide, opportunities for the purchase of equipment, goods and services from: (i) business enterprises located in the city of Syracuse; (ii) certified minority and/or women-owned business enterprises; and (iii) business enterprises that employ residents in the city of Syracuse. Consideration will be given by the Agency to the Project Applicant's efforts to comply, and compliance, with this objective at any time an extension of benefits awarded, or involvement by the Agency with the Project, is requested by the Project Applicant.

Initial

**F. Local Labor Policy:** The applicant understands and agrees that local labor and contractors will be used for the construction, renovation, reconstruction, equipping of the Project unless a written waiver is received from the Agency. Failure to comply may result in the revocation or recapture of benefits awarded to the Project by the Agency. For the purposes of the policy, "Local" is defined as Onondaga, Cayuga, Cortland, Madison, Oneida, and Oswego Counties.

Initial

**G. Annual Sales Tax Filings:** In accordance with §874(8) of the New York General Municipal Law, the Applicant understands and agrees that if the Project receives any sales tax exemptions as part of the Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the Applicant and all consultants or subcontractors

Initial

**H. Annual Employment Reports and Outstanding Bonds:** The Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the Agency on an annual basis, reports regarding the number of FTE at this Project site. The Applicant also understands and agrees to provide on an annual basis any information regarding bonds, if any, issued by the Agency for the Project that is requested by the Comptroller of the State of New York.

Initial

**I. Absence of Conflicts of Interest:** The Applicant has received from the Agency a list of the members, officers and employees of the Agency. No member, officer or employee of the Agency has an interest, whether direct or indirect in any transaction contemplated by this Application, except as hereinafter described in Appendix B.

Initial

**J. Compliance:** The Applicant understands and agrees that it is in substantial compliance with applicable local, state, and federal tax, worker protection, and environmental laws, rules, and regulations.

Initial

**K. False or Misleading Information:** The Applicant understands and agrees that the submission of knowingly false or knowingly misleading information in this Application may lead to the immediate termination of any financial assistance and the reimbursement of an amount equal to all or part of any tax exemptions claimed by reason of Agency involvement in the Project.

Initial

**L. GML Compliance:** The Applicant certifies that, as of the date of the Application, the proposed project is in substantial compliance with all provisions of NYS General Municipal Law Article 18-A, including but not limited to Sections 859-a and 862(1).

Initial

**M. SIDA's Policies:** The Applicant is familiar with all of SIDA's policies posted on its website ([http://www.syr.gov.net/Syracuse\\_Industrial\\_Development\\_Agency.aspx](http://www.syr.gov.net/Syracuse_Industrial_Development_Agency.aspx)) and agrees to comply with all applicable policies.

Initial

**N. Disclosure:** The Applicant has read paragraph 6 of the instructions contained on the cover of this Application and understands that the Applicant must identify in writing to SIDA any information it deems proprietary and seeks to have redacted.

Initial

**O. Reliance:** THE APPLICANT ACKNOWLEDGES THAT ALL ESTIMATES OF PROJECTED FINANCIAL IMPACTS, VALUE OF FINANCIAL ASSISTANCE REQUESTED, AND OTHER INFORMATION CONTAINED IN THIS APPLICATION WILL BE RELIED UPON BY SIDA AND ANY CHANGES IN SUCH INFORMATION MUST BE MADE IN WRITING AND MAY IMPACT THE GRANT OF FINANCIAL ASSISTANCE TO THE PROJECT.

Initial

**I have read the foregoing and agree to comply with all the terms and conditions contained therein as well as the policies of the City of Syracuse Industrial Development Agency.**

Name of Applicant Company	<input type="text"/>
Signature of Officer or Authorized Representative	<input type="text"/>
Name & Title of Officer or Authorized Representative	<input type="text"/>
Date	<input type="text"/>

**VI. HOLD HARMLESS AGREEMENT**

Applicant hereby releases the City of Syracuse Industrial Development Agency and the members, officers, servants, agents and employees thereof (collectively the "Agency" from, agrees that the Agency shall not be liable for, and agrees to indemnify, defend, and hold the Agency harmless from and against any and all liability arising from or expense incurred by: (A) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the Application or the Project described therein or the tax-exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction, and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project, including without limiting the generality of the foregoing, all cause of action and attorney's fees and any other expenses incurred in defending any suits or action which may arise as a result of any of the foregoing. If, for any reason, the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable or specified period of time, to take reasonable, proper or requested action, or withdraws, abandons, cancels or neglects the Application, or if the Agency or the Applicant are unable to reach final agreement with respect to the Project, or the inability of the Applicant, for any reason, to proceed with the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in the processing of or in connection with the Application, including attorney's fees, if any.

Name of Applicant Company	<input type="text"/>
Signature of Officer or Authorized Representative	<input type="text"/>
Name & Title of Officer or Authorized Representative	<input type="text"/>
Date	<input type="text"/>

CITY OF SYRACUSE INDUSTRIAL DEVELOPMENT AGENCY APPLICATION  
**APPENDIX A**  
**CONFLICT OF INTEREST STATEMENT**

Agency Board Members

1. Michael Frame
2. Kathleen Murphy
3. Steven P. Thompson
4. Rickey T. Brown
5. Kenneth J. Kinsey

Agency Officers/Staff

1. Honora Spillane
2. Judith DeLaney
3. Debra Ramsey-Burns

Agency Legal Counsel & Auditor

1. Susan Katzoff, Esq., Bousquet Holstein, PLLC
2. Grossman St. Amour, PLLC.

The Applicant has received from the Agency a list of members, officers and staff of the Agency. To the best of my knowledge, no member, officer or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described:

Signature:

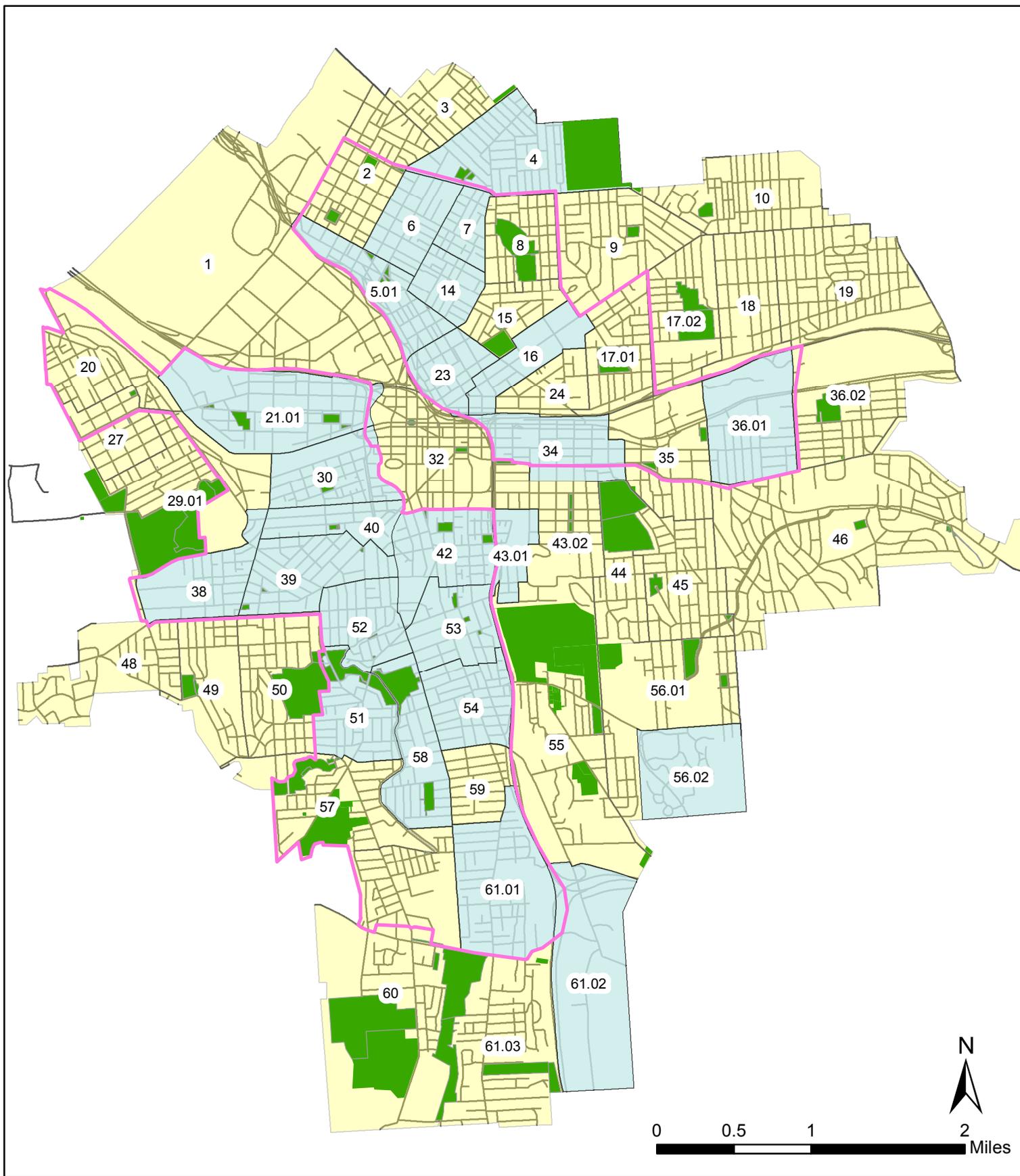
Authorized Representative:

Title:

Date:



# Highly Distressed Census Tracts



**Legend**

- Highly Distressed Census Tracts (2016)
- 2010 Census Tracts
- Parks & Cemeteries
- NRSA Boundaries

Map created 7/12/2016.  
This map is for planning purposes only.  
The City of Syracuse cannot guarantee its accuracy.



SIDA Application 18





# Property Description Report For: 919 Glenwood Ave, Municipality of City of Syracuse

*No Photo Available*

<b>Status:</b>	Active
<b>Roll Section:</b>	Wholly Exem
<b>Swis:</b>	311500
<b>Tax Map ID #:</b>	080.-11-07.0
<b>Property #:</b>	1332211600
<b>Property Class:</b>	612 - School
<b>Site:</b>	COM 1
<b>In Ag. District:</b>	No
<b>Site Property Class:</b>	612 - School
<b>Zoning Code:</b>	001
<b>Neighborhood Code:</b>	15780
<b>School District:</b>	Syracuse
<b>Total Assessment:</b>	2018 - Tentative \$10,733,800 2017 - \$10,733,800
<b>Total Acreage/Size:</b>	60 x 126.75
<b>Land Assessment:</b>	2018 - Tentative \$579,800 2017 - \$579,800
<b>Full Market Value:</b>	2018 - Tentative \$13,417,250 2017 - \$13,417,250
<b>Equalization Rate:</b>	----
<b>Property Desc:</b>	Lot P Fl Lot A Tr Coldbrook Farms Se 60x126.75.11427.18x942.25
<b>Deed Book:</b>	
<b>Deed Page:</b>	
<b>Grid East:</b>	609555
<b>Grid North:</b>	1099741

## Owners

City Of Syracuse-Corcoran  
Accounting Dept  
725 Harrison St  
Syracuse NY 13210

## Sales

*No Sales Information Available*

## Utilities

<b>Sewer Type:</b>	Comm/public	<b>Water Supply:</b>	Comm/public
<b>Utilities:</b>	Gas & elec		

## Inventory

<b>Overall Eff Year Built:</b>	0	<b>Overall Condition:</b>	Normal
<b>Overall Grade:</b>	Average	<b>Overall Desirability:</b>	3

## Buildings

AC%	Sprinkler%	Alarm%	Elevators	Basement Type	Year Built	Condition	Quality	Gross Floor Area (sqft)	Stories
100	50	0	3	Unfinished	1962	Normal	Average	248704	3

## Site Uses

Use	Rentable Area (sqft)	Total Units
School	278,720	0

## Improvements

Structure	Size	Grade	Condition	Year
Pavng-asphlt	76800 × 4	Average	Normal	1975
Tennis-clay	57,400.00 sq ft	Average	Normal	1962
Porch-coverd	2,912.00 sq ft	Average	Normal	1962
Patio-flg/cn	5,368.00 sq ft	Average	Normal	1962
Fence-chn lk	700 x 7	Average	Normal	1975

## Land Types

Type	Size
Primary	60 × 126

## Special Districts for 2018 (Tentative)

Description	Units	Percent	Type	Value
OL001-Oiling Dist(no \$)	60	0%		0
CWR50-County water E	0	0%		0
CSW15-Onon Co San Unit	13.2	0%		0

## Special Districts for 2017

Description	Units	Percent	Type	Value
OL001-Oiling Dist(no \$)	60	0%		0
OL005-Oiling for 2017	60	0%		0

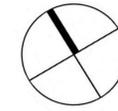
## Exemptions

Year	Description	Amount	Exempt %	Start Yr	End Yr	V Flag	H Code	Own %
2018	CITY OWNED	(Tentative)\$10,733,800	0	1993				0
2017	CITY OWNED	\$10,733,800	0	1993				0

## Taxes

Year	Description	Amount
------	-------------	--------

**\* Taxes reflect exemptions, but may not include recent changes in assessment.**

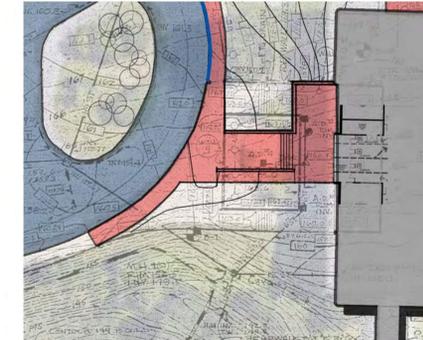


**REPLACE DAMAGED SECTIONS OF CONCRETE WALK AND ADA RAMP [4A]**

**SUPPLEMENT LANDSCAPING AND PLANTING AT MAIN ENTRANCE [6A]**

**REPLACE ASPHALT PAVING WITH HEAVY DUTY ASPHALT [1B]**

**RESET SOUND GRANITE CURB AND REPLACE BROKEN SECTIONS OF CURB - CONSOLIDATE RESET CURB IN LESS VISIBLE LOCATIONS [1B]**



**SINGLE / CENTER ENTRANCE [45E]**

**REPLACE ELEC. VAULT TOP WITH H2O LOAD RATED TOP [1A]**

**GENERAL:**

**- REPAIR, REPLACE, OR CLEAN SEWER PIPES OR STRUCTURES AS NEEDED. ADJUST RIMS AS NEEDED. ASSUMES REPLACEMENT OF 2 CATCH BASINS AND CLEANING OF ALL STORM PIPING [3A & B]**

**- TOPSOIL AND RESEED BARE SPOTS IN LAWN; PROVIDE NORMAL RESTORATION REQUIRED BY CURB REPLACEMENT. REMOVE VEGETATION IN CRACKS IN PAVEMENTS AND ALONG EDGES OF PAVEMENTS [6A]**

**REPLACE EXISTING CONCRETE STEPS AND HANDRAILS [12A]**

**RESET SOUND GRANITE CURB AND REPLACE BROKEN SECTIONS OF CURB - CONSOLIDATE RESET CURB IN LESS VISIBLE LOCATIONS [1C]**

**REPLACE ASPHALT PAVING WITH HEAVY DUTY ASPHALT [1C]**

**REPLACE CONCRETE WALK [4A]**

WARNING:  
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## Short Environmental Assessment Form

### Part 1 - Project Information

#### Instructions for Completing

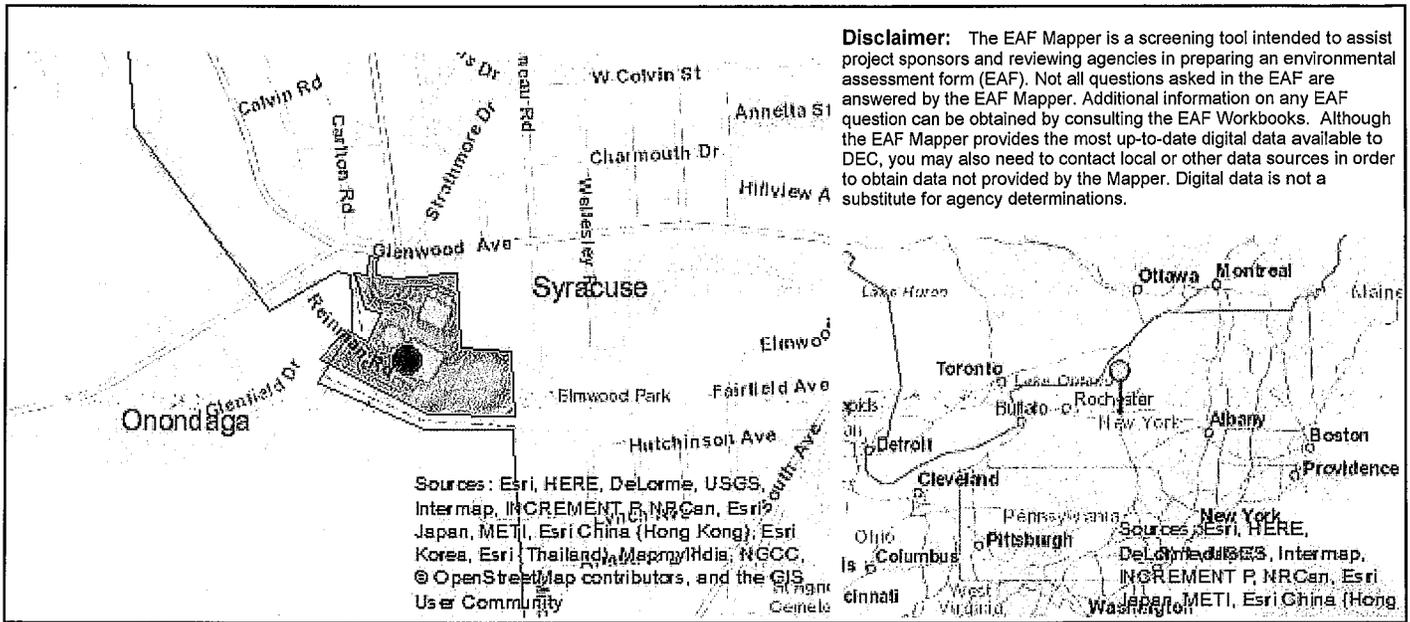
**Part 1 - Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available.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

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

<b>Part 1 - Project and Sponsor Information</b>			
Name of Action or Project: Corcoran High School			
Project Location (describe, and attach a location map): 919 Glenwood Ave, Syracuse, NY 13207			
Brief Description of Proposed Action: Project consists of interior and exterior renovations to an existing high school building and grounds. Scope of work is as follows: Site improvements including: replacement of asphalt and conc pvmt and granite curbs, repair of elec vault, replacement of ext lights, repair/clean storm sewer, new ext stairs, and new plantings at main entrance. Existing building shell modifications including: foundation repair/parging, clean/coat exposed rebar, repair precast conc panels, recaulk joints, masonry cleaning/repair, repaint steel lintels, new windows and curtain walls, replace soffiting and wall board, install new ext doors, roof renovations, and reflashing of skylights. Interior renovations including: wall repairs, new wall partitions, ceramic tile repair/coating, painting, new gym wall pads/panels, new flooring, refinish gym floor, new ceiling tiles, repair/replace lockers, update toilet rooms, new int signage, refinish/replace int doors, new glazing, renovate stairs, update auditorium, elevator upgrades, update sprinkler system, update lights, utility pipes, elec sys, communications, plumbing fixtures, and HVAC.			
Name of Applicant or Sponsor: Mary Robison, PE - JSCB Designee		Telephone: 315.448.8200	
		E-Mail: mrobison@syrgov.net	
Address: 233 East Washington Street, Room 401			
City/PO: Syracuse		State: NY	Zip Code: 13202
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: NY State Education Department (NYSED) NYSDEC Gen Permit for Stormwater Discharges		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		17.90 acres	
b. Total acreage to be physically disturbed?		3.33 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		64.42 acres	
4. Check all land uses that occur on, adjoining and near the proposed action. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input 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			



<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<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> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p><b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor name: <u>May E. Robison</u> Date: <u>6/11/18</u></p> <p>Signature: <u>May E. Robison</u></p>		



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National Register of Historic Places]	Yes It has been confirmed with SHPO that the Corcoran site in not eligible. The adjacent Elmwood Park is on the National Register.
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No

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 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:		
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: Date: 

### *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.

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 Name of Lead Agency

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 Date

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 Print or Type Name of Responsible Officer in Lead Agency

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 Title of Responsible Officer

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 Signature of Responsible Officer in Lead Agency

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 Signature of Preparer (if different from Responsible Officer)

**PRINT FORM**