

GML 239 Referral Notice

To: Onondaga County Planning Board **From:** Municipal Board: Planning Commission
 1100 Civic Center Referring Officer: Greg Lancette, Chairman
 421 Montgomery Street Mail original resolution to: Codes Department
 Syracuse, New York 13202 Address: 600 S. Bay Road
 Phone: 435-2611 City, Zip Code: North Syracuse, NY 13212

Re: General Municipal Law §239 Referral Informal Review 3-Mile Limit Review

1. Applicant: Chick-Fil-A, Inc **2. Site Address:** E Taft Rd., 110 E Taft Rd

3. Tax Map Number(s): 008.-06-01.1, 008.-06-02.1 **4. Acres:** 0.502+/-

5. Is the site within the county sanitary district? Yes No

6. Is the site currently serviced by public water? Yes No

7. On-site waste water treatment is currently provided by: Public Sewer or Septic System

8. Current Zoning: C-2 & C-2 **9. Current Land Use:** Parking lot, Residential House

10. Project Description: Demo house, clean up site, redevelop +/-1.311 acre for Chick-Fil-A, Inc. quick serve drive thru only restaurant at intersections: Rt.11, E. Taft Rd., S. Bay Rd.

11. OCPB Jurisdiction:

Check All That Apply	}	<input type="checkbox"/> Text Adoption or Amendment <input checked="" type="checkbox"/> Site is located within 500' of: <u>Rt. 11</u> <input checked="" type="checkbox"/> a municipal boundary <input checked="" type="checkbox"/> a state or county thruway/highway/roadway <input type="checkbox"/> an existing or proposed state or county park/recreation area <input type="checkbox"/> an existing or proposed county-owned stream or drainage channel <input type="checkbox"/> a state or county-owned parcel on which a public building or institution is situated <input type="checkbox"/> a farm operation located in an agricultural district (Incl Ag Data Statement pursuant to AML § 305-a)	(Specify by Name)
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Referred Action(s)

If referring multiple actions related to the same Tax Map #, please identify the referring municipal board if different from above.

12. Text Adoption or Amendment **Referring Board:**

<input type="checkbox"/> Comprehensive Plan <input type="checkbox"/> Local Law <input type="checkbox"/> Zoning Ordinance <input type="checkbox"/> Other _____

13. Zone Change **Referring Board:**

Proposed Zone District: _____	Number of Acres: _____
Purpose of the Zone Change: _____	

14. Site Plan Project Site Review **Referring Board:** Planning Commission

Proposed Improvements: <u>Demo house, clean up site, redevelop intersections: Rt.11, E. Taft Rd., S.Bay Rd</u>	
Proposed Use: <u>Chick-Fil-A quick serve drivethru restaurant only</u>	
Will the proposed project require a variance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Type: <input type="checkbox"/> Area <input type="checkbox"/> Use
Specify: _____	
Is a state or county DOT work permit needed? If Yes: <input checked="" type="checkbox"/> State or <input checked="" type="checkbox"/> County <input type="checkbox"/> No	
Specify: <u>Sidewalks, crosswalks-Rt.11 & E Taft Rd Intersection, driveway exit E. Taft Rd</u>	

15. **Special Permit**

Referring Board:

Section of local zoning code that requires a special permit for this use: _____

Will the proposed project require a variance? Yes No Type: Area Use

16. **Subdivision**

Referring Board:

Name of Subdivision: _____ Preliminary Final

Number of Lots: _____ Type: Commercial / Industrial Residential → Single / Multi / Both
(Circle One) (Circle One)

Is this a cluster subdivision pursuant to Section 278 of the New York State Town Law? Yes No

Will the proposed subdivision require a variance? Yes No Type: Area Use

Is a state or county DOT work permit needed? If Yes: State or County No

Specify: _____

17. **Variance**

Referring Board:

Area Use

Section(s) of local zoning code to which the variance is being sought: _____

Describe how the proposed project varies from the above code section: _____

SEQR Determination

Action:

Finding:

- Check One {
- Type I
 - Type II
 - Unlisted Action
 - Exempt

- Positive Declaration – Draft EIS
- Conditional Negative Declaration
- Negative Declaration
- No Finding (Type II Only)

SEQR determination made by (Lead Agency): Clay Planning Board Date: T.B.D.

Attachments

- Survey Subdivision Plat (map) Environmental Assessment Form Proposed Text
- Site Plan Local Application Form Ag Data Statement Other SUPPORTING DOCUMENTS

This referral, as required by GML §239 l, m & n, includes complete information, and supporting materials to assist the Onondaga County Planning Board (OCPB) in its review. If no formal action is taken by the OCPB within 30 days, the referring board may proceed without the OCPB's recommendation, unless an extension of time is agreed upon, or unless the OCPB's recommendation is received 2 days prior to municipal review.

Pearl Fuller, Sec.
Name, Title & Phone Number of Person Completing this Form

10/02/23
Transmittal Date