

Village of North Syracuse
600 South Bay Road
North Syracuse, NY 13212

CONTACT: CODE ENFORCEMENT OFFICER
PHONE No. (315) 458-4763

OFFICE USE
FEE:
DATE PAID: _____
RECEIPT: _____

APPLICATION FOR
SPECIAL USE PERMIT

PREPARATION: Prepare an Original and **15** Copies

FILING: File in Codes Office, together with payment filing fee, as provided by the Board of Trustees Fee Schedule, payable to the Village of North Syracuse (non-refundable).

DISTRIBUTION BY PLANNER:

ORIGINAL: Codes Department
Copies: Planning Commission Board
Copy: Planning Commission Secretary
Copy: Village Clerk
Copy: Village Attorney
Copy: Village Engineer
Copy: SOCPA, if applicable
Copy: Applicant

1. Applicant: 9274 GROUP INC _____ Case No.: _____
2. Address: 295 Main Street, Suite 700 Buffalo, NY 14203 _____ Date: 11/19/2025
_____ Tel. No.: (716) 854-0060
3. Attorney's name, address: _____
_____ Tel. No.: _____
4. Application is hereby made for: SHOPPING CENTER Special Use Permit.
5. Subject premises are located in a C-3 _____ District.
6. The current use of the subject premises is a former Walgreens _____

7. The names and addresses of all adjoining owners and the current zoning classification of each adjoining parcel is as follows:

	<u>Name</u>	<u>Address</u>	<u>Zoning</u>
North	208 Parklane Assoc LLC	5562 Bear Rd N Syracuse, NY	C-3
East	Mem Masonic Temple Corp	648 Centerville Pl N Syracuse, NY	C-3
South	William P Commisso II	6269 Addison Loomis Cicero, NY	C-3
West	NU-93 NYRPT LLC	123 N Main St N Syracuse, NY	C-3

8. The premises affected (are) ~~(are not)~~ located within 500 feet of any boundary line of the Village or any state or county highway or stream or drainage channel owned by the county or for which the county has established channel lines (if within 500 feet, application must be referred to SOCPA).

9. A survey map (current within 6 months) made by a licensed land surveyor showing location and setbacks of all buildings or structures on the parcel in question shall be attached to this application, unless the Code Enforcement Officer certifies by signing below that the application does not involve any issues relative to lot size, dimensions, building locations (for instance, language interpretations).

10. Survey Waived by: _____
Code Enforcement Officer's Signature

11. Provision of Zoning Ordinance: Article III Section 240-13 Paragraph B

12. Use for which Special Permit is sought:
SHOPPING CENTER- DOLLAR GENERAL

13. Note to Applicant:
Applicant must prove his own case. If adequate proof to entitlement is not furnished in this application or at the Hearing, then the application must be denied. WAP (Initial)

14. Applicant hereby consents to any appropriate action by the Village of North Syracuse, either revoking any approval which may be granted hereunder, or permits issued thereon, if it is established by competent evidence that any statements herein are false or that any conditions or restrictions imposed by the ZBA are hereafter violated. WAP (Initial)

Dated November 19, 2025

Individual Signature: [Signature]

Corporate Name: 9274 GROUP INC

By (Officer): William A. Paladino, Manager

Mailing Address of Applicant: _____

295 Main Street, Suite 700 Buffalo, NY 14203

Telephone No: (716) 854-0060

State of New York, County of ERIE

Ss: Individual Verification William A. Paladino

Being duly sworn, deposes and says that He/She is the Manager of 9275 Group, LLC

In the within action; that He/She has read the foregoing application, and that Deponent believes it to be true to the best of His/Her knowledge and belief.

[Signature]
(Individual)

Sworn to before me this 19th day of November, 2025

[Signature]
(Notary Public)

KATHLEEN A LINHARDT
Notary Public - State of New York
No. 02LI5057361
Qualified in Erie County
My Commission Expires March 25, 2027