



CITY OF SARATOGA SPRINGS

DESIGN REVIEW COMMISSION

CITY HALL - 474 BROADWAY
SARATOGA SPRINGS, NEW YORK 12866
TEL: 518-587-3550 x.515 FAX: 518-580-9480
WWW.SARATOGA-SPRINGS.ORG

Office use only	
Date Rec'd:	_____
Application #:	_____
Check #:	_____
Amount: \$	_____

APPLICATION FOR:
ARCHITECTURAL / HISTORIC REVIEW

(Rev: 1/4/11)

<u>APPLICANT(S)*</u>	<u>OWNER(S) (If not applicant)</u>	<u>AGENT(S)</u>
Name <u>James and Sons Tobacconists</u>	<u>Southgate Broadway 360LLC</u>	<u>ADIRONDACK SIGN CO</u>
Address <u>360 Broadway</u>	<u>12 Racket Ln</u>	<u>72 BALLSTON AVE</u>
<u>SARATOGA SPRINGS, NY 12866</u>	<u>Essex, CT 06426</u>	<u>SARATOGA SPRINGS, NY 12866</u>
Tel./Fax <u>[REDACTED]</u>	<u>/</u>	<u>[REDACTED]</u>
Email <u>[REDACTED]</u>		<u>[REDACTED]</u>
Identify primary contact person: <input type="checkbox"/> Applicant <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Agent		

* An applicant must be the property owner, lessee, or one with an option to lease or purchase the subject property.
Identify the applicant's interest in premises: Owner Lessee Under option to lease or purchase

Property Address (# & St.): 360 Broadway Tax Parcel #: 165 . 67 - 2 - 1
(for example: 165.52 - 4 - 37)

Current Zoning District: T-6 Property use: Residential Non-residential/mixed-use
Type of Review: Architectural Historic Extension/modification (of current approval)

Summary description of proposed action: _____

Fabricate and Install 1.5" thick HDU lettering. Color will be Black

Mounting will be pin mounted into the building facade over doorway.

Has a previous application been filed with the DRC for this property? No Yes – date(s)? _____

Application fee (payable to "Commissioner of Finance"): **Combined Application for Historic and Architectural Review:**

Residential Structures (principal, accessory)	\$25	Non-residential / mixed-use structures (principal)	\$300
Residential approval – extension	\$25	Non-residential signs, awnings, accessory structures	\$100
Residential - administrative action	\$25	Non-residential approval – extension	\$100
		Non-residential - administrative action	\$100

A “complete” application consists of 1 original and 9 collated sets of application & other materials as required below:

New Construction / Additions

- Color photographs showing site/exterior details of existing structures and adjacent properties
- Site plan, drawn to scale, showing existing & proposed construction, property lines & dimensions, required & proposed setbacks & lot coverage, site features (fences, walks, trees, etc.); on no larger than 2’x3’ sheet – smaller preferred if legible
- Elevation drawings showing design of all sides of existing & proposed construction – label dimensions, colors, materials, lighting (fixture & lamp type, wattage), etc. - include compass bearing & scale; no larger than 2’x3’ sheet – smaller permitted if legible
- Floor plans for proposed structure; on sheet no larger than 2’x3’ – smaller permitted if legible
- Product literature, specifications and samples of proposed materials and colors

Change in exterior building materials (windows, doors, roof, siding, etc.), or color (in non-residential districts only)

- Color photographs showing site/exterior details of existing structures and that illustrate affected features
- Elevation drawings showing all sides of existing & proposed construction – label dimensions, colors, materials, lighting (fixture & lamp type, wattage), etc. - include compass bearing & scale; no larger than 2’x3’ sheet – smaller permitted if legible
- Product literature, specifications and samples of proposed materials and colors

Within front yard setbacks in Historic Districts only (Front setbacks: UR-1 & INST-HTR=30’; UR-4=25’; UR-2, UR-3 & NCUD-1=10’)

- Installation, removal or change in material of drive- and walkways
- Installation or removal of architectural, sculptural or vegetative screening over 3’ in height
- Installation of accessory utility structures or radio/satellite transmission/reception devices (more than 2’ diameter)

For any of above:

- Color photographs showing site/exterior details of existing structures, and of adjacent properties
- Site plan showing existing & proposed construction: include property lines & dimensions, required & proposed setbacks & lot coverage, site features (fences, walks, trees, etc.) street names, compass bearing & scale; no larger than 2’x3’ sheet – smaller preferred if legible
- Product literature, specifications and samples of proposed materials and colors

Signage / Awnings

- Color photographs showing site/exterior details of existing structures, and adjacent properties
- Plan showing location of proposed sign/awning structure on building/premises: no larger than 11”x17”
- Scaled illustration of proposed sign/awning structure and lettering (front view & profile): include all dimensions of structure; type, dimensions and style of lettering or logo; description of colors, materials, mounting method and hardware
- Descriptions, specifications of proposed lighting including fixture & lamp type, wattage, mounting method, and location
- Product literature, specifications and samples of proposed materials and colors

Demolition

- Color photographs showing site/exterior details of existing structures, and of adjacent properties
- Site plan showing existing and any proposed structures - include dimensions, setbacks, street names, compass bearing, and scale
- Written description of reasons for demolition and, in addition:
 - For structures of “architectural/historical significance”, demonstrate “good cause” why structure cannot be preserved
 - For structures in an architectural district that might be eligible for listing on National Register of Historic Places, or for a “contributing” structure in a National Register district (contact City staff), provide plans for site development following demolition - include a timetable and letter of credit for project completion

Telecommunication facilities

- Color photographs showing site/existing structures, and of adjacent properties
- Site plan showing existing and proposed structures: include dimensions, setbacks, street names, compass bearing, and scale
- Scaled illustration of proposed structures: include all dimensions; colors, materials, lighting, mounting details
- Consult Article 240-12.22 of the City’s Zoning Ordinance and City staff to ensure compliance with requirements for visual impact assessment and existing and proposed vegetative screening

Request for extension of current approval

- Identify date of original DRC approval: _____ Current expiration date: _____
- Describe why this extension is necessary and whether any significant changes have occurred either on the site or in the neighborhood.

SEQR Environmental Assessment Form (attached)

Applicants proposing the following must complete "Part I" of the attached SEQR Short Environmental Assessment Form:

- Construction or expansion of a multi-family residential structure (4 units +)
- Construction or expansion (exceeding 4,000 sq. ft. gross floor area) of a principal or accessory non-residential structure
- Telecommunications facility, radio antennae, satellite dishes
- Demolition

Applicant / Owner Disclosure and Signature

Does any City officer, employee or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? No Yes - If yes, a statement disclosing the name, residence, nature, and extent of this interest must be filed with this application.

I, the undersigned, the owner, purchaser under contract, or lessee of the property, hereby request approval by the Design Review Commission for review approval relating to the above-identified property. I agree to meet all requirements under Article VII for Historic Review or Article VIII for Architectural Review of the Zoning Code of the City of Saratoga Springs.

Signature: _____

Date: _____

If applicant is lessee, owner must also sign.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

This application has been reviewed by the Zoning Enforcement Officer and is being forwarded to the Commission.

Signature: _____

Date: _____

Additional Comments: _____

PROJECT I.D. NUMBER

Appendix C

State Environmental Quality Review

SHORT ENVIRONMENTAL ASSESSMENT FORM

For UNLISTED ACTIONS Only

PART I – PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION Municipality: _____ County: _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc. or provide map)	
5. IS PROPOSED ACTION: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency name and permit/approval	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor name: _____	Date: _____
Signature: _____	

CONTINUED

PART II – ENVIRONMENTAL ASSESSMENT (To be completed by Agency)

<p>A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR 617.6? If No, a negative declaration may be superseded by another involved agency. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten if legible)</p> <p>C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic patterns, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:</p> <p>C2. Aesthetic, agricultural, archaeological, historic or other natural or cultural resources, or community or neighborhood character? Explain briefly.</p> <p>C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly.</p> <p>C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly.</p> <p>C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly.</p> <p>C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly.</p> <p>C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly.</p>
<p>D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CEA? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly.</p>

PART III – DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring;; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination and significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

<p><input type="checkbox"/> Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.</p>	
<p><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 AND provide on attachments as necessary, the reasons supporting this determination:</p>	
<p>_____</p> <p style="text-align: center;">Name of Lead Agency</p>	
<p>_____</p> <p>Print or Type Name of Responsible Officer in Lead Agency</p>	<p>_____</p> <p>Title of Responsible Officer</p>
<p>_____</p> <p>Signature of Responsible Officer in Lead Agency</p>	<p>_____</p> <p>Signature of Preparer (If different from responsible officer)</p>
<p>_____</p> <p style="text-align: center;">Date</p>	

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★ Signature:  Date: _____

If applicant is lessee, owner must also sign.

★ Signature: James J. Sommer Date: _____

FOR OFFICE USE ONLY

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Signature: _____ Date: _____

Additional Comments: _____

↑↓ JAMES & ↑↓ SONS TOBACCONISTS

9.5" 7.75"

- Lettering to be pin mounted to facade
- 1.5" thick HDU painted black
- Overall size is 9.5" x 175.5"

This proof is not submitted for color approval or print quality. Please proof read carefully upon receipt. Colors viewed on monitors may vary slightly from actual colors in final production. If color critical, please provide accurate color samples (ie: pantone, paint swatches, etc.) Signed proofs indicate review and acceptance of the proof. Once proof is signed and returned with approval, we are not responsible for any discrepancies regarding color, spelling or materials used in production.

PROOFS MUST BE SIGNED AND RETURNED VIA EMAIL OR FAX BEFORE PROCEEDING



72 Ballston Ave., Saratoga Springs, NY 12866

www.AdkSignCo.com

Customer: James & Sons Tobacconists
Project Name: Building Lettering
Designer: RD
Date: 7/22/16
Rev Date:

Approved As Is: _____
Signature/Date

Approved with Corrections;
no further proof needed: _____

Revisions Required; New proof needed: _____



- Lettering to be pin mounted to facade
- 1.5" thick HDU painted black
- Overall size is 9.5" x 175.5"

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ADIRONDACK
SIGN COMPANY

72 Ballston Ave., Saratoga Springs, NY 12866

www.AdkSignCo.com

Customer: James & Sons Tobacconists

Project Name: Building Lettering

Designer: RD

Date: 7/22/16

Rev Date:

Approved As Is: _____

Signature/Date

Approved with Corrections;
no further proof needed: _____

Revisions Required; New proof needed: _____