



CITY OF WATERTOWN, NEW YORK
Special Use Permit Application

I. Applicant Information

Name: JAMES PETERSEN

Mailing Address: 1272 GOTHAM Street
WATERTOWN, NEW YORK



II. Property Information

Address: 500 MAIN ST. W

Tax Parcel #: 1-01-122

Property Owner (if not applicant):

If applicant is not owner, does applicant have a signed purchase agreement [] Yes [] No

Zoning District: Neighborhood Business

Attachments Required:

- 8 1/2" x 11" parcel map with tax parcel involved in request outlined with a thick black line
A sketch of the site drawn to an engineering scale (e.g. 1"=20', 1"= 30').
Completed Part I of an Environmental Assessment Form (SEQR)

III. Request Information

Proposed Use: Adding Automobile sales lot

Explain Proposal:

Would like to Add Automobile sales lot to the oil change business at the above location

Would like to use (5) five parking spaces in the corner of the parking lot for Automobile sales

Use additional 8 1/2" x 11" sheets as needed.

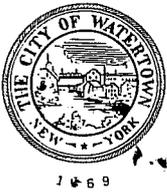
I certify that the information provided above is true to the best of my knowledge.

Signature:

[Handwritten signature]

Date:

6/7/2010



CITY OF WATERTOWN, NEW YORK
BUREAU OF CODE ENFORCEMENT

Room 105, City Hall
245 Washington Street
Watertown, New York 13601

Tel. (315) 785-7735
Fax (315) 785-7854

June 4, 2010

James Peterson
1272 Gotham St.
Watertown, NY 13601

Petersen

Re: Land Use
500 Main St. W.
Parcel No.: 1-01-122

Dear Property Owner:

This office received a complaint regarding the operation of an automobile sales lot at the referenced address. You are aware that the property is located in a Neighborhood Business Zoning District and requires special approval of the City Council to operate an automobile sales business.

Therefore, as Code Enforcement Supervisor for the City of Watertown, I am obligated by law to direct the following:

- Cease the operation of automobile sales at the referenced address and remove all signs that indicate the same.

If you wish to operate this type of business at this address, please contact the City Engineering Department and Justin Wood can provide guidance to apply for the proper approval through the City Council.

Failure to comply will result in legal action.

If you have any questions, please feel free to contact me.

Sincerely,

Shawn R. McWayne

Shawn R. McWayne
Code Enforcement Supervisor

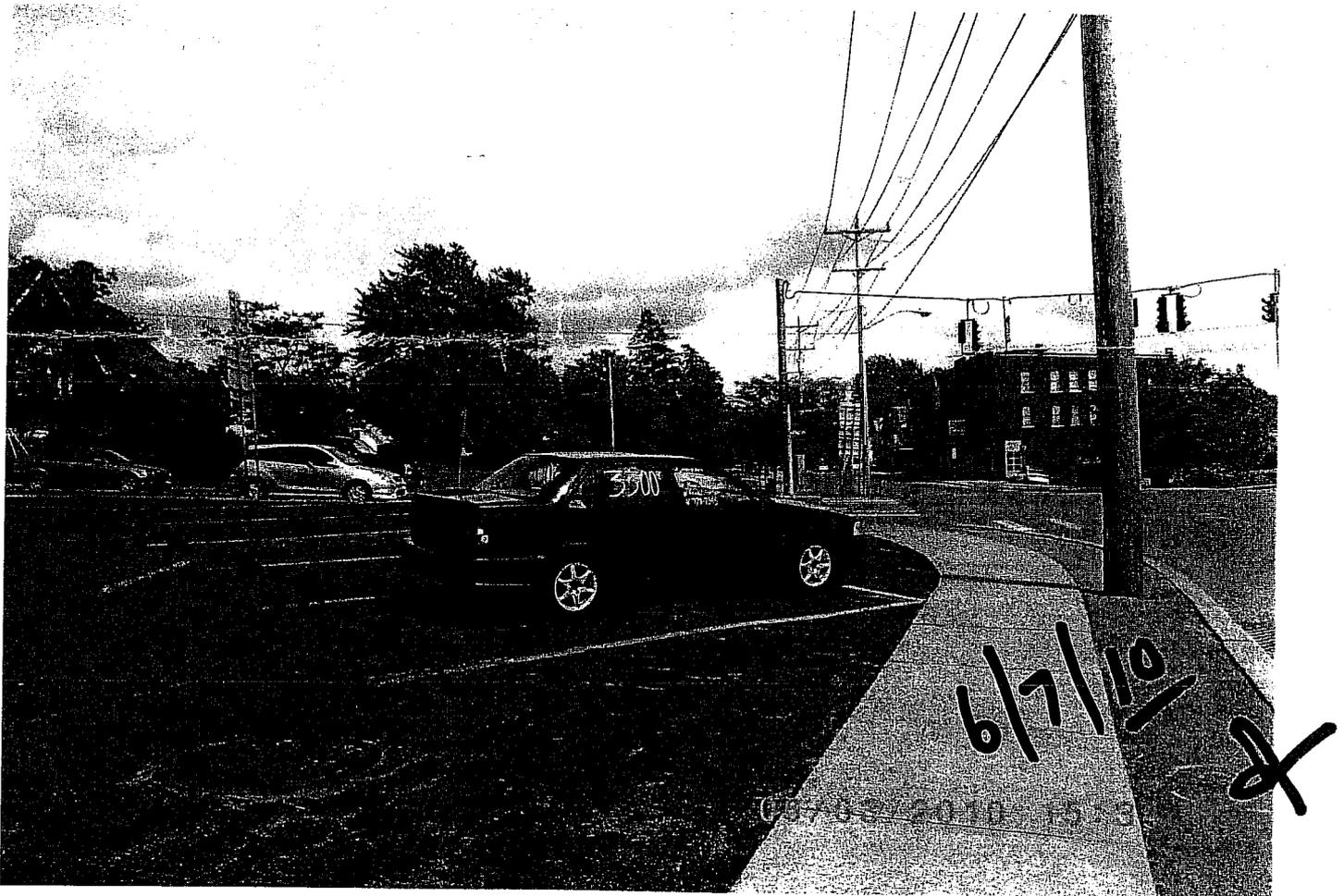
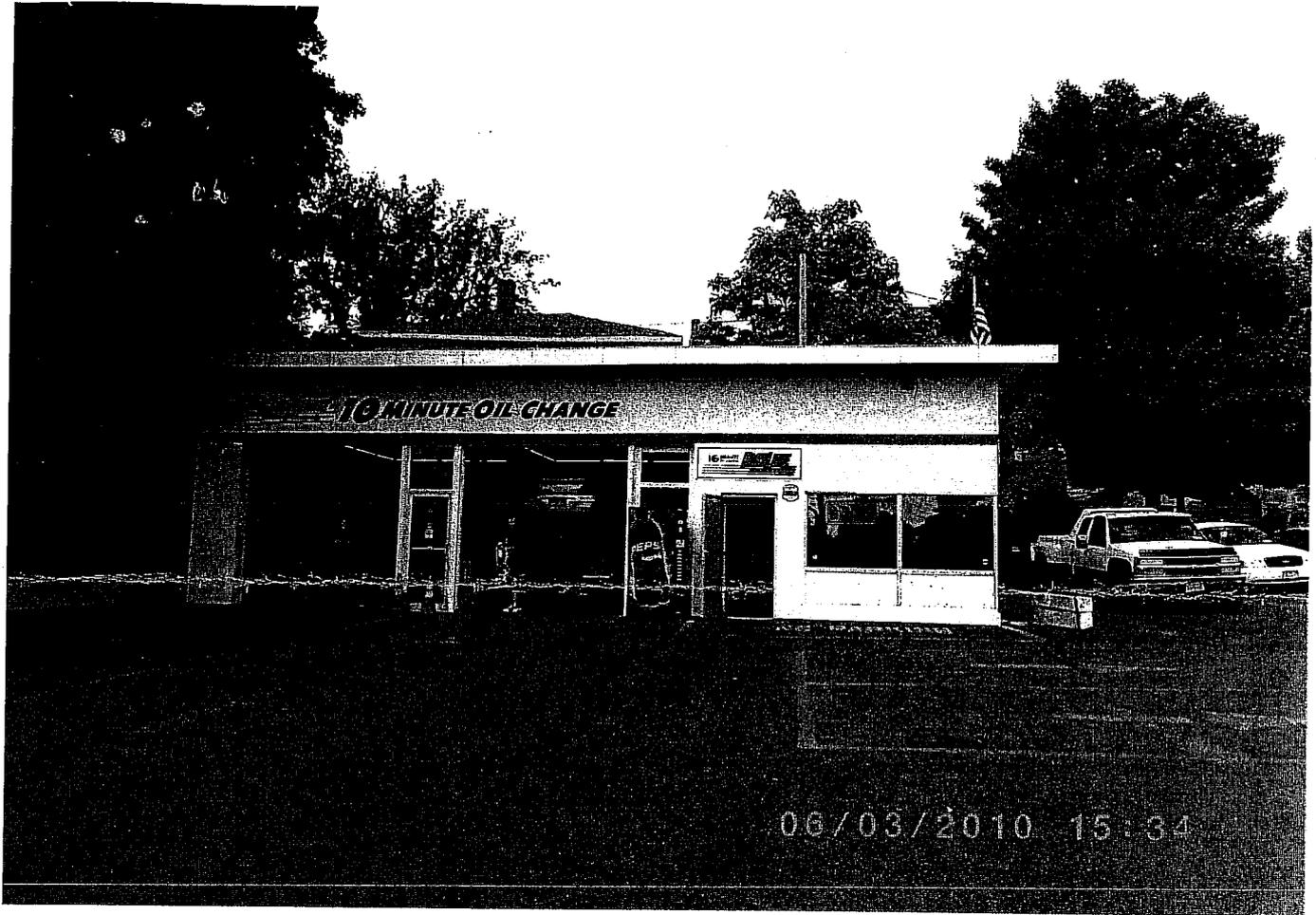
SRM/cas

cc: Justin Wood, Civil Engineer II



6/7/10

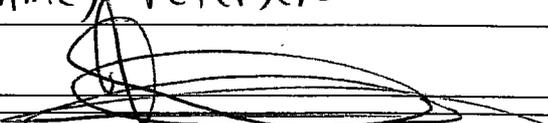
X



SHORT ENVIRONMENTAL ASSESSMENT FORM

For UNLISTED ACTIONS Only

PART 1 - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR JAMES PETERSEN		2. PROJECT NAME FAST LUBE / AUTO lot	
3. PROJECT LOCATION: Municipality 500 MAIN ST W County Jefferson			
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) CORNER OF WEST MAIN ST + LERAY ST WATERBURY			
5. IS PROPOSED ACTION: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration			
6. DESCRIBE PROJECT BRIEFLY: FAST LUBE oil change shop would like to make 5 spots for auto sales on corner.			
7. AMOUNT OF LAND AFFECTED: Initially <u>N/A</u> acres Ultimately <u>N/A</u> acres			
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, describe briefly with Special Use permit			
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 checked="" type="checkbox"/> Other Describe: Neighborhood Business			
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 checked="" type="checkbox"/> No If yes, list agency(s) and permit/approvals			
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list agency(s) and permit/approvals			
12. AS A RESULT OF PROPOSED ACTION, WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE			
Applicant/sponsor name: James Petersen		Date: 6/7/2010	
Signature: 			

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.12? If yes, coordinate the review process and use the FULL EAF.
 Yes No

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If NO, a negative declaration may be superseded by another involved agency.
 Yes No

C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)

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:

C2. Aesthetic agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:

C3. Vegetation or fauna, fish shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:

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:

C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly.

C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly.

C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly.

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CEA?
 Yes No

E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
 Yes No If yes, explain briefly

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.

- 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.
- 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:

_____ Name of Lead Agency _____

_____ 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) _____

_____ Date _____