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DEC 09 2019

TOWN OF OWASCO

ZONING BOARD OF APPEALS
Town of Owasco, New York
Application for Interpretation or Variance
OFFICE USE ONLY

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TOWN OF OWASCO

This section to be completed by Code Enforcement Officer. Define part of ordinance in question

a. Ordinance _____ Case No. _____
b. Title _____ Date Rec'd BA _____
c. Section _____ Date Hearing _____
c. Paragraph _____ Date Action _____
Action _____

25-0

To the Zoning Board of Appeals:

A. Statement of Ownership and Interest

1. The applicant(s) Jacqueline Scanlon
(is) (are) the owner(s) of property situated at 7368 owasco Rd Auburn
NY 13021

2. The applicant's appeal concerns the property owned by Jacqueline Scanlon
and located at 7368 owasco Rd Auburn NY 13021
Tax Map # 116.18-2-31

B. Nature of Request: I would like to turn the south end
of my Gift Shop into a high end nail salon
and the old design room into a beauty
bar.

C. Attach copy of Plot Plan

Telephone No. 315-730-0200 Signature(s) Jacqueline Scanlon
315-730-1655 DATE 12-9-19
Cell No. _____

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TOWN OF OWASCO

TOWN OF OWASCO

Zoning Board of Appeals

2 Bristol Avenue, Auburn, New York 13021

Code Enforcement Officer – Patrick Doyle

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TOWN OF OWASCO

Special Permit Application

FEE Paid: \$ \$100.00 **(non- refundable) DATE:** 12-9-19

Telephone: 315-253-9021

owascoplanning@centralny.twcbc.com

FAX: 315-253-2683

FOR OFFICE USE ONLY

Case No. _____

Date Rec'd _____

Hearing Date _____

Action Date _____

Action _____

Date of Application: 12-9-19

To the Zoning Board of Appeals:

A. Statement of Ownership and Interest:

The Applicant(s) Jacqueline Scanlon
(is) (are) the owner(s) of property situated at the following address: 7368 Owasco Road
Auburn NY 13021 TAX MAP No. 11C-18-2-31

B. Request:

The applicant requests a special permit for the above described under the provisions of SECTION 150-44 of the zoning ordinance (local Law) for the following purposes: Converting the gift shop into a nail Salon and beauty bar as shown on the attached plan drawn to scale.

C. Reasons for Request:

The Applicant alleges that the approval of said special permit would be in harmony with the intent and purpose of said zoning ordinance (local Law) and that the proposed use conforms to the standards prescribed therefore in said ordinance (local Law and would not be detrimental to property or persons in the neighborhood for the following reasons: I believe the change will be better suited for the neighborhood. you will not see the seasonal traffic that we currently have. There will only be 5 chairs for nail and 3 chairs for hair. we will only be able to accommodate a certain number of people at one time.

D. Special Features:

In addition to meeting the standards prescribed by the zoning ordinance (local law), the applicant will provide: Site Plans

In order that the public convenience and welfare will be further served.

Signature: _____

Mailing Address: _____

Telephone/Cell No.: _____

Jacqueline Scanlon
65 South St Apt B2
Auburn NY 13021
315-730-1655

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TOWN OF OWASCO

Smiley's Town + Country
Renovation and Rebranding Plan
7368 Owasco Rd
Auburn, NY, 13021
12/9/2019

To the Members of the Owasco Planning Board,

Smiley's Town and Country has been owned and operated by our family for the last 13 years. It is time to refresh our business to allow us to further develop our strengths and adapt to market and industry changes. We will move from operating as a full-service florist and gift shop to offering a concise floral menu and salon services including manicures, pedicures, blowouts and men's care. The beauty bar concept continues to serve our loyal customer base while providing significant opportunity to increase our profit potential.

This narrative intends to demonstrate how the proposed changes for the Smiley's Town and Country renovation and rebranding are less objectionable in external effects than the existing nonconforming use, as requested in the following areas:

(A) Traffic generation and congestion, including truck, passenger car and pedestrian traffic

Our new concept will have a more regulated flow of traffic than our current business model as the vast majority of clients would schedule an appointment ahead of time. We will be able to regulate and control the flow of passenger cars which is the majority of our traffic volume. Deliveries requiring the presence of trucks or large vehicles would be scheduled for off hours and/or times of optimal convenience.

We will no longer have products on display outdoors, like hanging baskets or Christmas trees, which further eliminates pedestrians near the road.

It is likely we will no longer require the use of our dumpster. Its removal would open up more space for parking and deliveries.

We will be carrying out significant improvements and upgrades to the outdoor space, which will be executed in waves depending on priority and time of year. We have discussed paving and marking the parking lot, which would further improve the traffic conditions.

(B) Noise, smoke, dust, noxious matter, heat, glare and vibration

The salon will not produce any smoke, dust, noxious matter, heat, glare or vibration.

We will comply with all ventilation requirements for salon safety and upgrade our heating and air systems as needed. All in-house products will be nontoxic and organic, which will keep the indoor space breathable and comfortable.

The building redesign does include a structured and contained outdoor seating area for relaxation and conversation. There will be decorative walls and gates that will prevent it from being visible from the road. Ambient music will play to cancel out the sound of traffic passing by. Overall, the noise level will be consistent with current emissions.

(C) Storage and waste disposal

Happily, we will greatly be reducing the amount of waste produced as the current majority is comprised of packing and shipping materials for gift shop merchandise.

We will sell some products, however it will not approach the scale that we are at currently. The products that we do ship in will, by their nature, not come in excessive layers of cardboard, styrofoam and other materials.

We will not need as much storage for waste and it is possible we will not require the use of a dumpster with our new concept.

(D) Appearance

Improvements to the overall appearance and function of our lot is what we look forward to the most in this rebrand. We will be pursuing a sleek, modern look that unifies the building and lot with a clean, refreshed feel. We will paint, replace lighting, add micro gardens, update signage and eliminate any excess materials and features that are currently outdoors.

Our enclosed outdoor space will be built in the space behind the current design room and back entrance. This area is currently functioning as storage and a staff walkway. Our plan is to put down new ground covering, build decorative walls, a pergola and potentially a water feature as well.

Indoors, we have an all-encompassing plan to create a new look. The design is on trend with successful salons and lounges in other cities across the country. We have interpreted popular looks and scaled them to suit our location. The design will greatly enhance the customer experience.

The appearance of both the outdoor and indoor areas are a crucial part of our rebranding. We are confident in the design and know that the outcome will yield a stronger business for us and will serve as a property that our community can be proud of.

*Jackie Scanlon, Owner + Operator
Prepared by Kayleen Spicer*

Town of Owasco Planning Board
2 Bristol Ave.
Auburn, NY 13021
Phone: (315) 253-9021 Fax: (315) 253-2683
owascoplanning@centralny.twcba.com

FEE: \$100.00

APPLICATION FOR SITE DEVELOPMENT PLAN APPROVAL

(Check appropriate boxes)

Preliminary ☐ Date 12-10-19

Final ☐ Date _____

Name of Proposed Development Nail Salon + Beauty Bar

Applicant:

Name: Jacqueline Scanlon

Address: 65 South St Auburn
NY 13021

Telephone/Cell: 315-730-0200

Owner: (if different)

Name: _____

Address: _____

Telephone/Cell: _____

Plans prepared by:

Name: Miki Palmieri

Address: 6028 South St
Auburn NY 13021

Telephone/Cell: 315-255-1010

(If more than one owner, provide information for each)

Ownership intentions—i.e., purchase options: I would like to turn the
gift shop into a nail salon and the old design
room into a blow out bar.

Location of site: 2368 Owasco Rd Auburn NY
13021

Tax Map No.: 116.18-2-31

Current zoning classification: ☒ Residential ☐ Lakeshore ☐ Agriculture/Residential

State and federal permits needed (List type and appropriate departments): Will need
a permit from NYS to operate

Proposed use(s) of Site: Flower Shop, Nail + Hair salon

Total site area (square feet or acres): .698 Acres

Anticipated construction time: would like to start after valentine Day

Will development be phased: yes-will Do interior first the exterior

Current land use of site: (agriculture, commercial, undeveloped, etc.): Commercial

Current condition of site: (buildings, brush, etc.) Good

Character of surrounding lands: (residential, agriculture, lakeshore, etc.) residential

Estimated cost of proposed improvement: \$ I would like to keep it around \$40,000
for interior

Anticipated increase in number of residents, shoppers, employees, etc.: (as applicable) _____

Increase in employees around 6

Describe proposed use including primary and secondary use, ground floor area, height and number of stories for each building:

- For residential buildings include number of dwelling units by size (efficiency, one bedroom, two bedrooms, three or more bedrooms) and number of parking spaces to be provided:

- For non-residential buildings, include total floor area, total sales area, number of automobile and truck parking spaces:

Total Floor Area around 3000 Sq ft - total Sales
area around 2000 Sq ft

- Other proposed structures:

None

(Use separate sheet if needed)

Jagdish Sen
Signature of Applicant

12-10-19
Date:

**Cayuga County GML §239 l, m & n Review Committee
Referral Form**

To: Cayuga County Department of Planning
and Economic Development
160 Genesee Street; 5th Floor
Auburn, New York 13021

From: Municipal Board:
Primary Contact:
Address:

Town of Owasco Planning Board and Zoning Board of Appeals
J. Patrick Doyle, Code Enforcement Officer
2 Bristol Avenue, Auburn, New York 13021

Phone: (315) 253-1276
Email: planning@cayugacounty.us

Phone: 315-253-9021
Email: jpdoyleiii@hotmail.com

Applicant: Jacqueline Scanlon - Smiley's Town and Country, LLC
Site Address: 7368 Owasco Road, Town of Owasco
Tax Map Number: 116.18-2-31 **Acres:** 0.72
Current Zoning: Residential **Current Land Use:** Commercial
Project Description: Change from one nonconforming use to another nonconforming use - see attached project
narrative and additional information submitted by applicant.

(attach additional pages if necessary)

Proposed Action(s)

Complete only the section(s) that apply to the action proposed by this referral

Local Law or Regulation

☐ New

☐ Amendment

☐ Comprehensive Plan

☐ Local Law

☐ Zoning Law / Ordinance

☐ Other

Site Plan

Proposed Improvements: Converting part of gift shop into a nail salon and beauty bar

Intended Use(s): Full service florist, gift shop, nail salon and beauty bar

Will the proposed project require a variance? ☐ Yes ☒ No **Specify:** _____

Is a State or County DOT work permit required? ☐ Yes ☒ No **Specify:** _____

Special Use Permit

List the section(s) of the local zoning law/ordinance that requires a special use permit for the proposed use: 150-44

Required conditions: See Section 150-44

Will the proposed use require a variance? ☐ Yes ☒ No **Specify:** _____

SubdivisionName: N/ANumber of Lots: _____ Type: ☐ Residential☐ Preliminary☐ Final☐ Single/Multi-Family☐ Commercial/IndustrialIs Public Water available? ☐ Yes ☐ NoIs Public Sewer available? ☐ Yes ☐ NoIs a State or County DOT work permit required? ☐ Yes☐ No Specify: _____Will the proposed project require a variance? ☐ Yes☐ No Specify: _____**Variance**Type: ☐ Area ☐ UseList the section(s) of the local zoning law/ordinance requirements that the variance is being sought for, **and** the specific details of the variance request: N/A**SEQR Determination**

Please provide the State Environmental Quality Review (SEQR) information below regarding the type of SEQR action and, if the SEQR process is completed note the SEQR finding. The GML §239 l, m & n Committee does not require full completion of the SEQR process and a local determination prior to reviewing and acting on a referral, however a complete referral package must include a completed and signed Part I of the SEQR forms.

Action: ☐ Type I

Finding:

☐ Positive Declaration- Draft EIS☐ Type II☐ Conditional Negative Declaration☐ Unlisted Action☐ Negative Declaration☐ Exempt☐ No Finding (Type II Only)SEQR Determination Made by (Lead Agency): TBD

Date: _____

Attachments☒ Local Application Form☒ SEQR Forms☐ Text Amendment☒ Other Project Narrative☒ Site Plan☒ Survey☐ Subdivision Plat (map)

To my knowledge, this referral request, as required by NYS GML §239 l, m & n, is complete and includes copies of all documents/applications required of and submitted by the applicant to the local municipality, and supporting materials to assist the Cayuga County GML §239 l, m, & n Review Committee ("Committee") in its review. I understand that if no formal action is taken by the Committee within 30 days of receipt of this referral, then the referring board identified on this form may proceed without the Committee's recommendation, unless an extension of time is agreed upon or unless the Committee's recommendation is received at least 2 days prior to local municipal action.



Name and Title of Person Completing this Form

12/10/2019

Transmittal Date

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.

Part 1 – Project and Sponsor Information			
Name of Action or Project: <div style="font-family: cursive; font-size: 1.2em;">Nail Salon and beauty bar</div>			
Project Location (describe, and attach a location map): <div style="font-family: cursive; font-size: 1.2em;">7368 Owasco Rd Auburn NY 13021</div>			
Brief Description of Proposed Action: <div style="font-family: cursive; font-size: 1.2em;">I would like to turn the south end of the current gift shop into a high end nail salon and the old design room into a beauty bar.</div>			
Name of Applicant or Sponsor: <div style="font-family: cursive; font-size: 1.2em;">Jacqueline Scanlon</div>		Telephone: 315-730-0200 E-Mail: jmscanlon77@gmail.com	
Address: <div style="font-family: cursive; font-size: 1.2em;">65 South St</div>			
City/PO: <div style="font-family: cursive; font-size: 1.2em;">Auburn</div>		State: <div style="font-family: cursive; font-size: 1.2em;">NY</div>	Zip Code: <div style="font-family: cursive; font-size: 1.2em;">13021</div>
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 type="checkbox"/>	YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		.6 acres	
b. Total acreage to be physically disturbed?		0 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.6 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input 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			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: <u>I will have a handicap bathroom in the nail salon as well as new water heater and furnace</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Jaqueline Scanlon</u> Date: <u>12-9-19</u> Signature: <u>Jaqueline Scanlon</u> Title: <u>owner</u>		

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.

 Name of Lead Agency

 Date

 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)

HAVENS AVE

METROSE RD

N

