

Building & Zoning Dept.
41 City Hall Place
Plattsburgh, New York 12901
Ph: 518-563-7707
Fax: 518-563-6426

Plattsburgh

X USE CLASS A VARIANCE _____ AREA CLASS B VARIANCE _____ SUP SPECIAL USE PERMIT

Date: 9-24-2021 Appeal No.: 2297

An application is hereby made to the Zoning Board of Appeals pursuant to the City of Plattsburgh Zoning Ordinance for a variance to allow the property use as herein described.

Applicant: 8 South Platt St Ent LLC / Andrew GOLT

Applicant's Address: P.O. Box 2735 Plattsburgh NY 12901

Telephone No.: 518-572-6450

Parcel Identification: 207.74-2-5

Location of Request: 8 South Platt St

Property Owner: Andrew GOLT / 8 South Platt St Ent LLC

Request Description: Convert Storage Area to Retail

Zoning District: R2

Section Appealed: 360-11

Previous Appeal: No.: _____ Date: _____

Identify Applicant's Right to Apply for Variance:

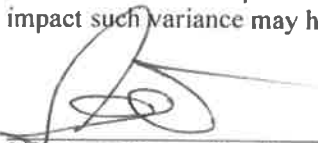
Ownership: Long Term Lease: _____ Contract To Purchase: _____

Other (Please Explain): _____

Applications for Zoning Variances must be accompanied by:

- 13 copies of existing and proposed site plan
- 13 copies of existing and proposed floor plan

The Zoning Board of Appeals may impose reasonable conditions and restrictions on the grant of area and use variances provided they are directly related to and incidental to the proposed use of the property. Such conditions shall be consistent with the spirit and intent of the zoning law, and shall be imposed for the purpose of minimizing any adverse impact such variance may have on the neighborhood or community.



Signature (Owner/Applicant)
Andrew Golt
Print First and Last Name


Notary Public

LISA M. BEEBIE
Notary Public, State of New York
No. 01BE8395749
Qualified in Clinton County
Commission expires August 5, 2023

USE VARIANCE CRITERIA

No such use variance shall be granted by the zoning board of appeals without a showing by the applicant that applicable zoning regulations and restrictions have caused an "Unnecessary Hardship." In order to prove such unnecessary hardship the applicant shall demonstrate to the Zoning Board of Appeals that for each and every permitted use under the zoning regulations for the particular district where the property is located:

Please give a written response to the following criteria;

- (1) You must prove a lack of reasonable return. Please provide competent financial evidence which proves a lack of reasonable return.

- (2) Please demonstrate why your hardship is unique to your property and does not apply to a substantial portion of the neighborhood.

- (3) Please show that granting this use variance will not change the essential character of the neighborhood.

- (4) Please demonstrate why the alleged hardship has not been self-created

**Full Environmental Assessment Form
Part 1 - Project and Setting**

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

Name of Action or Project:		
Project Location (describe, and attach a general location map): <i>8 South Platt Street, Plattsburgh NY 12901</i>		
Brief Description of Proposed Action (include purpose or need): <i>Convert storage building to retail</i>		
Name of Applicant/Sponsor: <i>Andrew GOLT / 8 South Platt St Ext</i>		Telephone: <i>518.572-6450</i>
Address: <i>P.O. Box 2735</i>		E-Mail: <i>CORVAIRWILD@6m AK.com</i>
City/PO: <i>Plattsburgh</i>	State: <i>NY</i>	Zip Code: <i>12901</i>
Project Contact (if not same as sponsor; give name and title/role): <i>SAME</i>		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor): <i>SAME</i>		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, <input type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village <input type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission		
c. City, Town or <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. Is the project site within a Coastal Erosion Hazard Area?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the Yes No only approval(s) which must be granted to enable the proposed action to proceed?

- If Yes, complete sections C, F and G.
- If No, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site Yes No where the proposed action would be located?

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action Yes No would be located?

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Yes No Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)

If Yes, identify the plan(s):

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, Yes No or an adopted municipal farmland protection plan?

If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance, Yes No
 If Yes, what is the zoning classification(s) including any applicable overlay district?

b. Is the use permitted or allowed by a special or conditional use permit? Yes No

c. Is a zoning change requested as part of the proposed action? Yes No
 If Yes,
 i. What is the proposed new zoning for the site?

C.4. Existing community services.

a. In what school district is the project site located? Plattsburgh City School

b. What police or other public protection forces serve the project site?
Plattsburgh City Police

c. Which fire protection and emergency medical services serve the project site?
Plattsburgh City Fire

d. What parks serve the project site?
FOX HILL

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)?
convert ~~retail~~ storage to retail

b. a. Total acreage of the site of the proposed action? _____ acres
 b. Total acreage to be physically disturbed? _____ acres
 c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres

c. Is the proposed action an expansion of an existing project or use? Yes No
 i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? Yes No
 If Yes,
 i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)

 ii. Is a cluster/conservation layout proposed? Yes No
 iii. Number of lots proposed? _____
 iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will the proposed action be constructed in multiple phases? Yes No
 i. If No, anticipated period of construction: _____ months
 ii. If Yes:
 • Total number of phases anticipated _____
 • Anticipated commencement date of phase 1 (including demolition) _____ month _____ year
 • Anticipated completion date of final phase _____ month _____ year
 • Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? If Yes, show numbers of units proposed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;"><u>One Family</u></td> <td style="text-align: center; border: none;"><u>Two Family</u></td> <td style="text-align: center; border: none;"><u>Three Family</u></td> <td style="text-align: center; border: none;"><u>Multiple Family (four or more)</u></td> </tr> </table>	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>	
<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>		
Initial Phase _____ At completion _____ of all phases _____	<input checked="" type="checkbox"/>				
g. Does the proposed action include new non-residential construction (including expansions)? If Yes,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
i. Total number of structures _____ ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length iii. Approximate extent of building space to be heated or cooled: _____ square feet					
h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? If Yes,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
i. Purpose of the impoundment: _____ ii. If a water impoundment, the principal source of the water: <input type="checkbox"/> Ground water <input type="checkbox"/> Surface water streams <input type="checkbox"/> Other specify: _____ iii. If other than water, identify the type of impounded/contained liquids and their source. _____ iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____					
D.2. Project Operations					
a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite) If Yes:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
i. What is the purpose of the excavation or dredging? _____ ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site? • Volume (specify tons or cubic yards): _____ • Over what duration of time? _____ iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____ _____ iv. Will there be onsite dewatering or processing of excavated materials? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe. _____ _____ v. What is the total area to be dredged or excavated? _____ acres vi. What is the maximum area to be worked at any one time? _____ acres vii. What would be the maximum depth of excavation or dredging? _____ feet viii. Will the excavation require blasting? <input type="checkbox"/> Yes <input type="checkbox"/> No ix. Summarize site reclamation goals and plan: _____ _____					
b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? If Yes:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description). _____					

ii. Describe how the proposed action would affect that waterbody or wetland. e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes No
If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No
If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____

- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No

If Yes:

i. Total anticipated water usage/demand per day: _____ gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No

If Yes:

- Name of district or service area: _____
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____

- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No

If, Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No

If Yes:

i. Total anticipated liquid waste generation per day: _____ gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No

If Yes:

- Name of wastewater treatment plant to be used: City Plattsburgh wastewater
- Name of district: _____
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

• Do existing sewer lines serve the project site? Yes No
 • Will a line extension within an existing district be necessary to serve the project? Yes No
 If Yes:
 • Describe extensions or capacity expansions proposed to serve this project: _____

ii. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No
 If Yes:
 • Applicant/sponsor for new district: _____
 • Date application submitted or anticipated: _____
 • What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

c. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No
 If Yes:
 i. How much impervious surface will the project create in relation to total size of project parcel?
 _____ Square feet or _____ acres (impervious surface)
 _____ Square feet or _____ acres (parcel size)
 ii. Describe types of new point sources. _____

 iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

 • If to surface waters, identify receiving water bodies or wetlands: _____

 • Will stormwater runoff flow to adjacent properties? Yes No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No
 If Yes, identify:
 i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) _____
 ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) _____
 iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) _____

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No
 If Yes:
 i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No
 ii. In addition to emissions as calculated in the application, the project will generate:
 • _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
 • _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
 • _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
 • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
 • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
 • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? Yes No
 If Yes:
 i. Estimate methane generation in tons/year (metric): _____
 ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring) _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No
 If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? Yes No
 If Yes:
 i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend
 Randomly between hours of _____ to _____
 ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____
 iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____
 iv. Does the proposed action include any shared use parking? Yes No
 v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____
 vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site? Yes No
 vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? Yes No
 viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No
 If Yes:
 i. Estimate annual electricity demand during operation of the proposed action: _____
 ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____
 iii. Will the proposed action require a new, or an upgrade, to an existing substation? Yes No

l. Hours of operation. Answer all items which apply.
 i. During Construction:
 • Monday - Friday: _____
 • Saturday: _____
 • Sunday: _____
 • Holidays: _____
 ii. During Operations:
 • Monday - Friday: 8:8
 • Saturday: 8:6
 • Sunday: 8:6
 • Holidays: _____

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p>
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe: _____</p>
<p>n. Will the proposed action have outdoor lighting? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>_____</p>
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe: _____</p>
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures:</p> <p>_____</p>
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (c.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p>
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p>
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ tons per _____ (unit of time) • Operation : _____ tons per _____ (unit of time) <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: _____ • Operation: _____ <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • Construction: _____ • Operation: _____

s. Does the proposed action include construction or modification of a solid waste management facility? Yes No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____

ii. Anticipated rate of disposal/processing:

- _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
- _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

- Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Aquatic Other (specify): _____

ii. If mix of uses, generally describe:

Fire Station, mixed retail, multi family residential

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	<i>+ - 1/2 acre</i>	<i>NO CHANGE SAME</i>	<i>NO CHANGE SAME</i>
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____			

c. Is the project site presently used by members of the community for public recreation? Yes No
 i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? Yes No
 If Yes:
 i. Identify Facilities: _____

e. Does the project site contain an existing dam? Yes No
 If Yes:
 i. Dimensions of the dam and impoundment:
 • Dam height: _____ feet
 • Dam length: _____ feet
 • Surface area: _____ acres
 • Volume impounded: _____ gallons OR acre-feet
 ii. Dam's existing hazard classification: _____
 iii. Provide date and summarize results of last inspection: _____

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
 If Yes:
 i. Has the facility been formally closed? Yes No
 • If yes, cite sources/documentation: _____
 ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____
 iii. Describe any development constraints due to the prior solid waste activities: _____

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes No
 If Yes:
 i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
 If Yes:
 i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes No
 Yes – Spills Incidents database Provide DEC ID number(s): _____
 Yes – Environmental Site Remediation database Provide DEC ID number(s): _____
 Neither database
 ii. If site has been subject of RCRA corrective activities, describe control measures: _____
 iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
 If yes, provide DEC ID number(s): _____
 iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site: _____ %
 _____ %
 _____ %

d. What is the average depth to the water table on the project site? Average: _____ feet

e. Drainage status of project site soils: Well Drained: _____ % of site
 Moderately Well Drained: _____ % of site
 Poorly Drained: _____ % of site

f. Approximate proportion of proposed action site with slopes: 0-10%: _____ % of site
 10-15%: _____ % of site
 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes No

ii. Do any wetlands or other waterbodies adjoin the project site? Yes No
 If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? Yes No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? Yes No
 If yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? Yes No

j. Is the project site in the 100-year Floodplain? Yes No

k. Is the project site in the 500-year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:

i. Name of aquifer: _____

m. Identify the predominant wildlife species that occupy or use the project site: NONE

n. Does the project site contain a designated significant natural community? Yes No
 If Yes:
 i. Describe the habitat/community (composition, function, and basis for designation): _____
 ii. Source(s) of description or evaluation: _____
 iii. Extent of community/habitat:
 • Currently: _____ acres
 • Following completion of project as proposed: _____ acres
 • Gain or loss (indicate + or -): _____ acres

o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? Yes No
 If Yes:
 i. Species and listing (endangered or threatened): _____

p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? Yes No
 If Yes:
 i. Species and listing: _____

q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? Yes No
 If yes, give a brief description of how the proposed action may affect that use: _____

E.3. Designated Public Resources On or Near Project Site

a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? Yes No
 If Yes, provide county plus district name/number: _____

b. Are agricultural lands consisting of highly productive soils present? Yes No
 i. If Yes: acreage(s) on project site? _____
 ii. Source(s) of soil rating(s): _____

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? Yes No
 If Yes:
 i. Nature of the natural landmark: Biological Community Geological Feature
 ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? Yes No
 If Yes:
 i. CEA name: _____
 ii. Basis for designation: _____
 iii. Designating agency and date: _____

e. 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? Yes No

If Yes:

i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District

ii. Name: _____

iii. Brief description of attributes on which listing is based: _____

f. 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? Yes No

g. Have additional archaeological or historic site(s) or resources been identified on the project site? Yes No

If Yes:

i. Describe possible resource(s): _____

ii. Basis for identification: _____

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? Yes No

If Yes:

i. Identify resource: _____

ii. Nature of, or basis for, designation (c.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____

iii. Distance between project and resource: _____ miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? Yes No

If Yes:

i. Identify the name of the river and its designation: _____

ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? Yes No

F. Additional Information

Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

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

Applicant/Sponsor Name Andrew Golt / 8 S. Platt St. City Date 9.22.2021

Signature  Title Sole Managing member

8 South Platt Street Ent. LLC.

c/o Andrew Golt

PO Box 2735

Plattsburgh, NY 12901

September 22, 2021

Dear Zoning Board members:

8 South Platt Street was specifically built and used as showroom and sales floor for a plumbing business. This building was constructed slab on grade without a basement. Therefore, it would be cost prohibitive to jack hammer the expansive concrete floor to provide routing for the plumbing and drains that would be necessary to convert this former showroom space into any residential use.

I have owned 8 South Platt Street over 3 years and have tried to rent the front showroom since I purchased this property, without any success. After several years without any revenue, I finally found someone interested in renting the front showroom. David Yokum operates Community Service Project of the North Country Inc. He has been running his operation outside the city and wishes to bring his business to a city location near downtown to better serve his customers.

This building is unique for this neighborhood, because it has floor to ceiling showroom windows immediately adjacent to the sidewalk with zero set back from the street. The majority of the adjacent properties are residential.

This use variance if granted, will not alter the essential character of the neighborhood, because it has been historically used for the same purpose that I am requesting today. In addition, my only neighbor who is directly across from the showroom is the Plattsburgh City Fire Station.

My request to use this portion of the building as a showroom is the highest and best use for 8 South Platt Street, because it designed for this use and is therefore not self-created. Nor, will it have any adverse effect on the neighborhood. David Yokum's business will have less of an impact on the neighborhood than if this space was converted to residential.

Sincerely,

Andrew Golt

Sole managing member of 8 South Platt Street Ent. LLC.

8 South Platt Street Ent. LLC.

c/o Andrew Golt

PO Box 2735

Plattsburgh, NY 12901

September 22, 2021

Dear Zoning Board members:

REASONABLE RETURN: I have not been able to rent the store front of 8 South Platt Street since I have purchased it over 4 years ago. Even though I have actively pursued renters. I have posted a sign on the Front side of the building since I purchased it, advertised on line and have reached out to a number of real estate agents advising them of the availability. Unfortunately it has remained unrented since my acquisition of this property.

HARDSHIP: I have included copies of my current property and school tax bills for your review. I paid property and school taxes, building insurance, oil heat, electricity, repairs and have had to maintain 8 South Platt Street since ownership without any income to offset my expenses. I have spent over \$60,000 for taxes, insurance, heating & electricity plus repairs and maintenance.

UNIQUE HARDSHIP: 8 South Platt Street is the only floor to ceiling glass store front on the street and is therefore unique to this neighborhood. It was specifically built and used as showroom and sales floor for a plumbing business. This building was constructed slab on grade without a basement. Therefore, it would be cost prohibitive to jack hammer the expansive concrete floor to provide routing for the plumbing and drains that would be necessary to convert this former showroom space into any residential use.

ESSENTIAL CHARACTER Granting of this use variance will NOT change the character of the neighborhood, because the building next door has been used since my ownership as commercial retail and the Plattsburgh City Fire Department is directly across the street and C & E Fencing is across the street at the rear of my property. These properties along with 8 South Platt Street have been used as commercial rather than residential use since my building existed and therefore granting me permission to use 8 South Platt Street as a showroom and Community outreach thrift store will not change the character of this section of my neighborhood.

NOT SELF CREATED HARDSHIP: 8 South Platt Street was built and historically used as a retail store front. I merely wish to return it to its original and best use.

Sincerely,

Andrew Golt

Sole managing member of 8 South Platt Street Ent. LLC

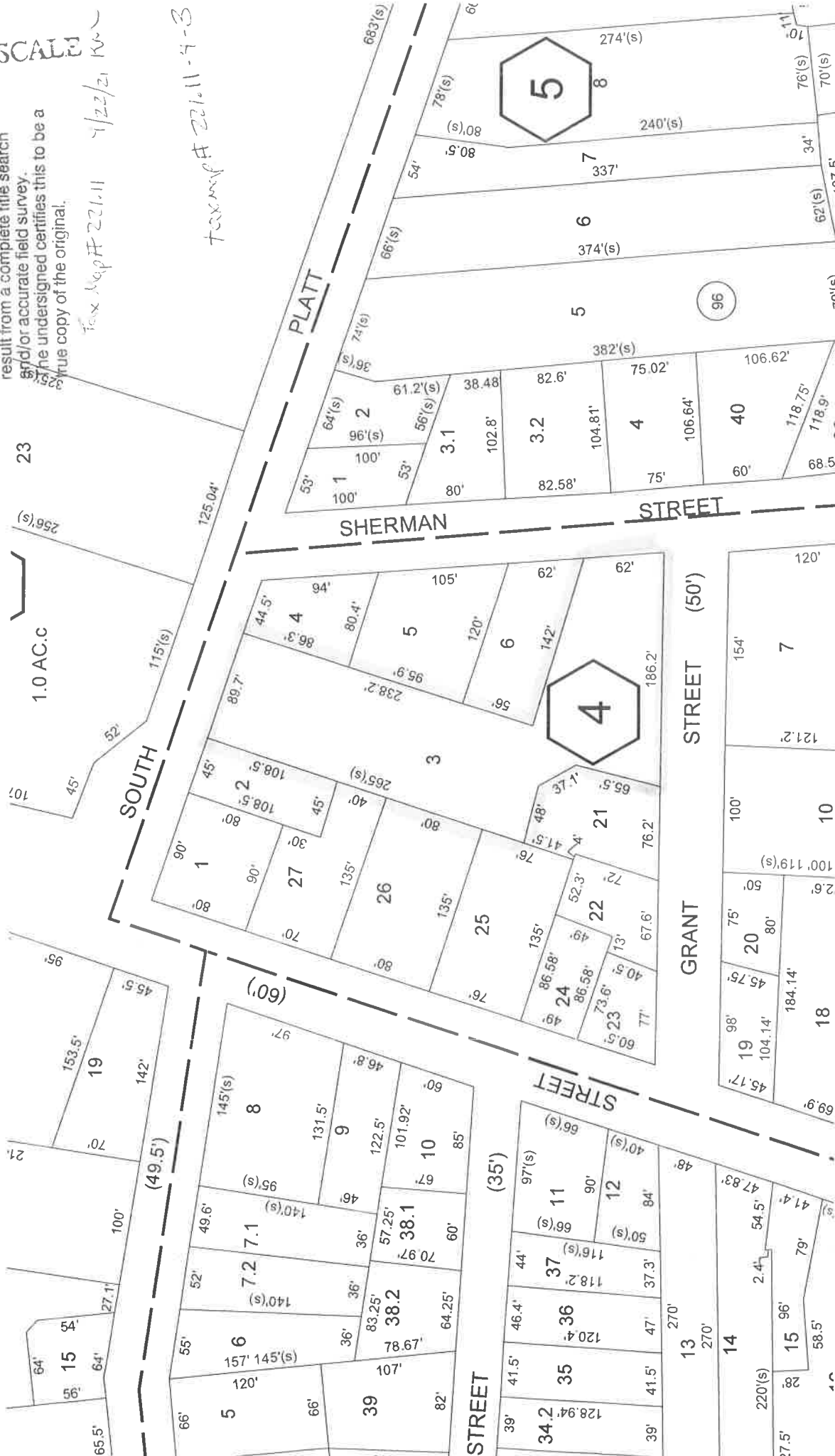
This map was prepared for tax administration purposes only. Not intended for use in conveyance of land. Absolutely no accuracy or completeness guarantee is implied or intended. All information on this map is subject to such variations and corrections as might result from a complete title search and/or accurate field survey. The undersigned certifies this to be a true copy of the original.

NOT TO SCALE

Tax Map # 22.1.11

4/22/21

Tax Map # 22.1.11-7-3



MIXED COMMERCIAL RESIDENTIAL 125.04' AL

FIRE STATION

SOUTH

SHERMAN

STRE

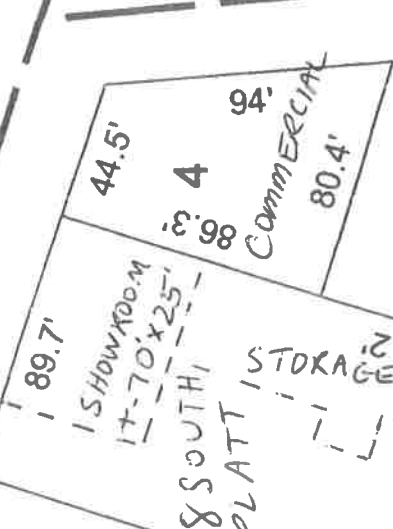
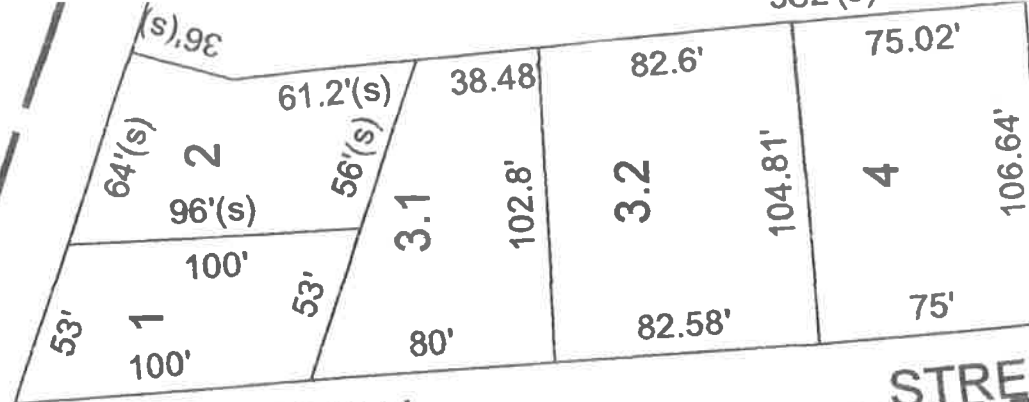
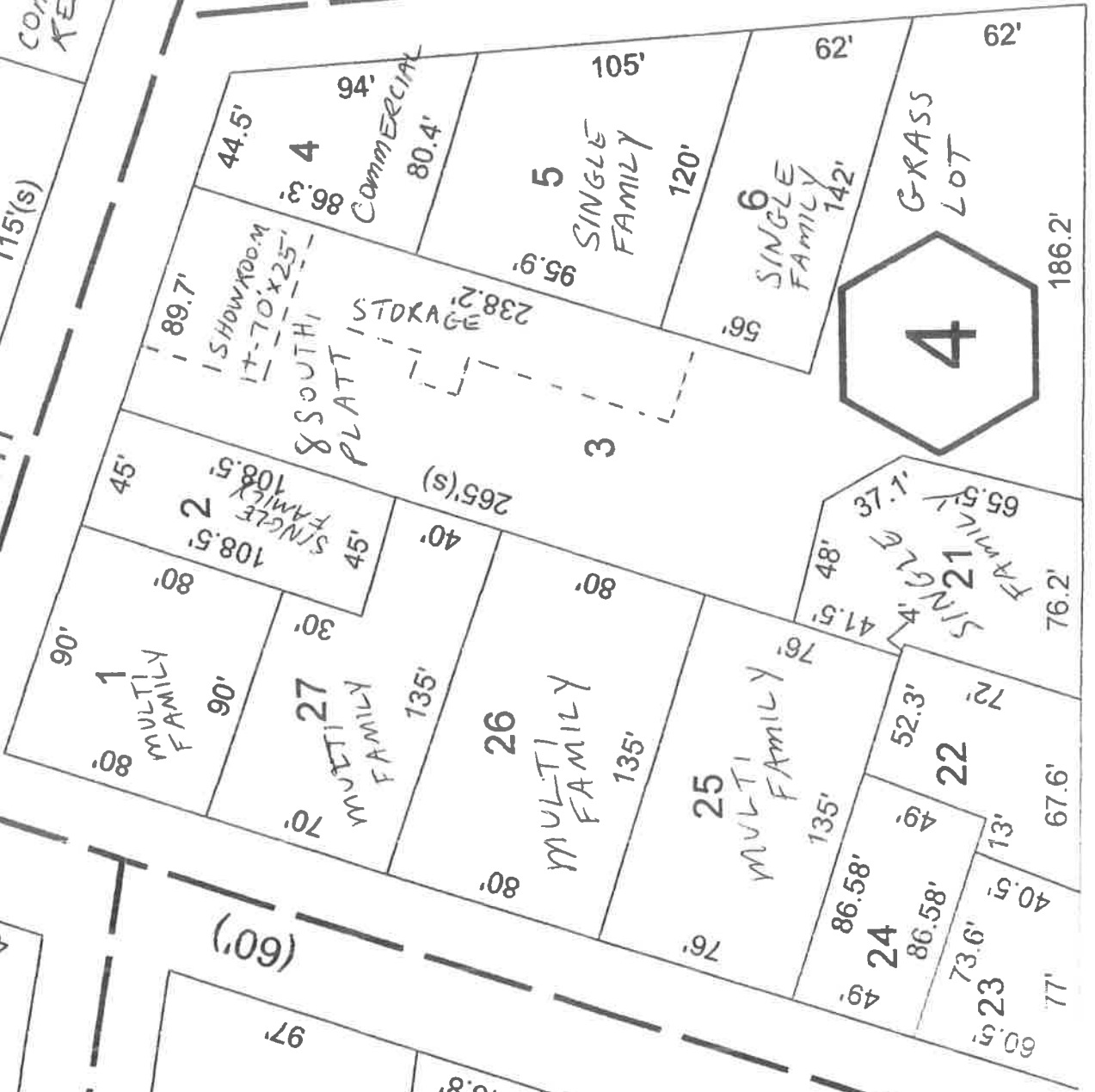
STREET (50')

GRANT

153.5' 142' 70' 149.5'

145'(s) 8 131.5' 9 122.5' 101.92' 10 85'

STREET



053

ARTICLES OF ORGANIZATION

OF

8 SOUTH PLATT STREET ENTERPRISES, LLC

(List entity name)

UNDER SECTION 203 OF THE LIMITED LIABILITY COMPANY LAW
OF THE STATE OF NEW YORK

Filed by: Kate Hepburn
(Name)

P.O. Box 2947
(Mailing address)

Plattsburgh, New York 12901
(City, State and Zip Code)

FILED

2017 AUG 30 AM 7:45

RECEIVED

2017 AUG 29 PM 3:04

ke

STATE OF NEW YORK
DEPARTMENT OF STATE

FILED AUG 30 2017

TAX \$ _____
BY: [Signature]

052

MAKE CHECKS, DRAFTS OR MONEY ORDERS PAYABLE TO:

Plattsburgh City School District - REPRINTED TAX BILL

Plattsburgh City School District
49 Broad Street
Plattsburgh, NY 12901

SCHOOL CODE	WARRANT DATE	ROLL SECT	BILL NO
503	08/01/2020	1	000065
FISCAL YEAR		BANK CODE	SWIS CODE
07/01/2020 to 06/30/2021			091300
ESTIMATED STATE AID		TAX MAP NO.	
School	19,440,075	221.11-4-3	

TAXES PAID BY	
REC'D BY & DATE	

FOR YOUR INFORMATION

Post-dated checks will not be accepted.
US Postmark denotes date of payment.

091300 221.11-4-3
8 So Platt St Enterprises LLC
PO Box 2735
Plattsburgh, NY 12901

PROPERTY DESCRIPTION & LOCATION		YOU MAY BE ELIGIBLE FOR AN EXEMPTION ON FUTURE TAX BILLS, FOR INFO CALL YOUR ASSESSOR.					
TAX MAP NO.	LOCATION:	EXEMPTION	TAX PURPOSE	VALUE	EXEMPTION	TAX PURPOSE	VALUE
091300 221.11-4-3	8 So Platt St						
DIMENSIONS:	123 X 300						
SCHOOL:	Plattsburgh CSD						
PROPERTY CLASS:	449	THE ASSESSOR ESTIMATES THE FULL MARKET VALUE OF THIS PROPERTY AT					175,000
		THE UNIFORM PERCENTAGE OF VALUE USED TO ESTABLISH ASSESSMENTS IS:					100
		THE ASSESSED VALUE OF THIS PROPERTY AS OF 03/01/2020 WAS					175,000

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHG PRIOR YEAR	TAXABLE VALUE ADJUSTED BY EXEMPTION	TAX RATE PER \$1000	TAX AMOUNT
School Levy	23607794	2.200	175,000.	23.27567000	4,073.24

*Christina LeClair 518-957-6004
checlair@plattscsd.org*

Plattsburgh City School District - REPRINTED TAX BILL

TAXPAYER'S COPY

Total Tax	\$4,073.24
	DUE BY: 08/31/2020

Bill No: 000065

Plattsburgh City School District
49 Broad Street
Plattsburgh, NY 12901

STAR Savings

Installment 1:	\$1,018.31
Installment 2:	\$1,018.31
Installment 3:	\$1,018.31
Installment 4:	\$1,018.31

FULL PAYMENT

DUE BY	AMOUNT
08/31/2020	\$4,073.24

TAXES PAID BY	
REC'D BY & DATE	

091300 221.11-4-3
8 So Platt St Enterprises LLC
PO Box 2735
Plattsburgh, NY 12901

CHECK THIS BOX IF RECEIPT REQUESTED

*CK # 140
9-30-20
\$1018.31
CK # 141
10-31-20
\$1018.31
CK # 144
11-30-20
\$1018.21*

City Chamberlain
 City of Plattsburgh
 41 City Hall Place
 Plattsburgh, NY 12901

City of Plattsburgh, Clinton County New York

SCHOOL CODE 503	SEQUENCE NO. 2999	PAGE NO. 1 OF 1	ROLL SECT. 1	BILL NO. 004266
FISCAL YEAR 01/01/2021-12/31/2021		WARRANT DATED 01/01/2021	BANK CODE	SWIS CODE 091300
ESTIMATED STATE AID CITY 2,467,687			SEE REVERSE SIDE FOR MORE INFORMATION	
FOR YOUR INFORMATION				

TAXES PAID BY	
REC'D BY & DATE	

Please see back for payment options and collection hours.

Full Payment Option – use the coupon below.

Installment Payment Option – use the enclosed coupons.

091300 221.11-4-3
 8 SO PLATT ST ENTERPRISES LLC
 PO BOX 2735
 PLATTSBURGH, NY 12901-0239 8-2702



PROPERTY DESCRIPTION & LOCATION		YOU MAY BE ELIGIBLE FOR AN EXEMPTION ON FUTURE TAX BILLS, FOR INFO CALL: 563-7708					
TAX MAP NO.	091300 221.11-4-3	EXEMPTION	TAX PURPOSE	VALUE	EXEMPTION	TAXPURPOSE	VALUE
LOCATION	8 So Platt St						
DIMENSIONS	123.00 X 300.00						
SCHOOL DIST.	Plattsburgh CSD						
PROPERTY CLASS	Other Storage						
THE ASSESSOR ESTIMATES THE FULL MARKET VALUE OF THIS PROPERTY AT:							175,000.00
THE UNIFORM PERCENTAGE OF VALUE USED TO ESTABLISH ASSESSMENTS IS:							100.00
THE ASSESSED VALUE OF THIS PROPERTY AS OF March 1, 2020 WAS							175,000.00

Warehse Off Shop Lot

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHG PRIOR YEAR	TAXABLE VALUE ADJUSTED BY EXEMPTION	TAX RATE PER \$1000	TAX AMOUNT
County Levy	5,518,737	-5.8	175,000.00	5.525784	967.01
City Levy	11,364,518	-1.5	175,000.00	11.370831	1,989.90
School relevy			0.00		1,018.31
Sch Relevy Penalty			0.00		10.18
Sch Collection Fee			0.00		51.42

TOTAL TAX 4,036.82

TAXPAYER'S COPY

FULL PAYMENT COUPON

Bill No: **004266**

CHECK THIS BOX IF RECEIPT REQUESTED

**City of Plattsburgh
 Clinton County
 New York**

PAY WITHOUT INTEREST BY	AMOUNT
04/14/2021	4,036.82

091300 221.11-4-3
 8 SO PLATT ST ENTERPRISES LLC
 PO BOX 2735
 PLATTSBURGH, NY 12901-0239

Make Check Payable To: City Chamberlain
 Mail Payment To: City of Plattsburgh
 41 City Hall Place
 Plattsburgh, NY 12901



00002002021400004266300004036828

8 South Platt St.

221.11-4-3

CO#241-7/5/83

#6469-5/26/70-Issued to owner, E.W.Tompkins, Co.Inc.
Const.warehouse, erect fence. Cost
\$11,500.

Sign Permit # 1082-6/2/83--Delta Electronics & Office
Products

#12499-6/1/83--Issued to EW Tompkins-Install wall, plants
& Counter. Cost \$5,000.

Variance # 70-4/22/74--expand non-conforming use -rear
yard setback. Denied.

Variance # 525-5/2/83--est. office supply sales & service
and erect sign--Denied.

Variance # 527-5/31/83--est. first floor for sales &
services & re-est. office-Granted.

Sign Permit # 1347 - 9-29-87 issued Delta Electronics
4x16 wood & plastic attached sign. \$600

#16077 - 7/28/89 Delta Office Products - steel pole
with chain to be fence between properties.
\$200.

4958 So Catherine	Mooney	Reginald	West Chazy, NY 12992	210 4958 So Catherine	Mooney, Reginald
4960 So Catherine	Saba	Pierre	60 Cumberland Ave Plattsburgh, NY 12901	411 4960 So Catherine	Saba, Pierre
4968 So Catherine	Saba	Pierre	60 Cumberland Ave Plattsburgh, NY 12901	220 4968 So Catherine	Saba, Pierre
4992 So Catherine	Murphy	Matthew J	Peru, NY 12972	411 4968 So Catherine	Murphy, Matthew J
4993 So Catherine	Terrault	Gregory	4932 So Catherine St Newark, NY 12901	484 4992 So Catherine	Terrault, Gregory
4989 So Catherine	William Cosgriff Platts LLC	Common Sense Prop	7 Cornelia Street, Apt 5C Saratoga Springs, NY 12866	457 4989 So Catherine	William Cosgriff Platts LLC
4994 So Catherine	Stewart's Shop Corp	Common Sense Prop	435 6 Miller St Plattsburgh, NY 12901	485 4994 So Catherine	Stewart's Shop Corp
7 So Platt	City of Plattsburgh	Jack	28 Lakeland Dr Plattsburgh, NY 12901	662 7 So Platt	City of Plattsburgh
9 So Platt	Conroy	Carl	6 Miller St Plattsburgh, NY 12901	485 9 So Platt	Conroy, Jack
21 So Platt	City of Plattsburgh	Carl	2 So Platt St Plattsburgh, NY 12901	592 21 So Platt	City of Plattsburgh
4 So Platt	Heath	Marlene	6 So Platt St Plattsburgh, NY 12901	220 2-4 So Platt	Heath, Carl
6 So Platt	Pelkey	Marlene	2735 10 So Platt St Plattsburgh, NY 12901	210 6 So Platt	Pelkey, Marlene
8 So Platt	8 So Platt St Enterprises, LLC	Terrance	12 So Platt St Apt A Plattsburgh, NY 12901	449 8 So Platt	8 So Platt St Enterprises, LLC
10 So Platt	Plattsburgh Foreign Fire LLC	Brad	28 So Platt St Plattsburgh, NY 12901	484 10 So Platt	Plattsburgh Foreign Fire LLC
12 So Platt	Rodriguez	Melisa	57 Lafayette St Apt 3 Plattsburgh, NY 12901	220 12 So Platt	Rodriguez, Terrance
28 So Platt	Polhemus	Jerry	14 So Platt St Plattsburgh, NY 12901	210 28 So Platt	Polhemus, Brad
14 So Platt	Bushy	David	22 So Platt St Plattsburgh, NY 12901	230 16 So Platt	Bushy, Melisa
16 So Platt	VanMoerkerque	Jerry	24 So Platt St Plattsburgh, NY 12901	220 20 So Platt	VanMoerkerque, Jerry
20 So Platt	Foley	David	20 S Platt St Plattsburgh, NY 12901	210 22 So Platt	Foley, David
22 So Platt	Avery	Jacob William	24 So Platt St Plattsburgh, NY 12901	220 24 So Platt	Avery, Jacob William
24 So Platt	Shedrick	Rodney	2076 12 Gadbois Dr Plattsburgh, NY 12901	210 26 So Platt	Shedrick, Rodney
26 So Platt	Mallinak	Thomas	1585 9 St John St Plattsburgh, NY 12901	210 13 St John	Mallinak, Thomas
13 St John	Delf	Doris	12 Gadbois Dr Plattsburgh, NY 12901	210 11 St John	Delf, Doris
11 St John	Gadbois	Bernadette	9 St John St Plattsburgh, NY 12901	210 9 St John	Gadbois, Bernadette
9 St John	Thibault	Heather	7 St John St Plattsburgh, NY 12901	210 7 St John	Thibault, Heather
7 St John	Pescia	Brenda	6945 Sydney Rd Fairfax Station, VA 22039	220 5 St John	Pescia, Brenda
5 St John	Lakeview Oval Properties LLC	Thomas	4 St John St Plattsburgh, NY 12901	210 4 St John	Lakeview Oval Properties LLC
4 St John	Caron	Thomas	6 St John St Plattsburgh, NY 12901	484 6 St John	Caron, Thomas
6 St John	Caron	Thomas	12 St John St Plattsburgh, NY 12901	210 12 St John	Caron, Thomas
12 St John	Somody	Walter	18 O'Neill Rd West Chazy, NY 12992	210 14 St John	Somody, Walter
14 St John	Durocher	Thomas			Durocher, Thomas

