

JAMES G. DOYLE
ATTORNEY AND COUNSELOR AT LAW
175 Church Street
Saratoga Springs, New York 12866

REC'D FEB 08 2013

Telephone (518) 583-1559
Facsimile (518) 584-1209

February 8, 2013

City Of Saratoga Springs
Attn: Mayor Scott Johnson
474 Broadway
Saratoga Springs, New York 12866

Dear Mayor Johnson:

Please consider this letter as a request to rezone the south side of **Gridley Street** and on the east side of **Jefferson Street** back to a **UR-2** zone from its current Horse Institutional classification, per my application before the City Council.

There exist 7 lots, of which one is currently zoned UR-2 and the other 6 lots are zoned Horse Institutional. The proposed rezoning would make all lots UR-2 and create less density by merging the 7 lots into a proposed 6 lots total.

Economic factors since 2008 have lessened any demand for Horse Institutional applications in that area while conversely heightened in need for UR-2 housing as that Jefferson Street corridor has since developed with residential and condo development. As such, there would be no change in character to the immediate neighborhood.

I respectfully ask you and the other Commissioners to approve such a change and to be assured I will build quality structures that will increase the tax base and further enhance that particular section of our City.

If you need anything further, please do not hesitate to contact me at (518) 583-1559. Thank you for your consideration.

Very truly yours,


James G. Doyle



CITY OF SARATOGA SPRINGS

OFFICE OF THE MAYOR

CITY HALL - 474 BROADWAY
SARATOGA SPRINGS, NEW YORK 12866-2296
TEL: 518-587-3550 FAX: 518-587-1688
HTTP://WWW.SARATOGA-SPRINGS.ORG

[FOR OFFICE USE]

(Application #)

REC'D JAN 07 2013
(Date received)

PETITION FOR: ZONING AMENDMENT

(Rev. 1/04/11)

1. Name of Petitioner: James G. Doyle and Lawrence P. Doyle

2. Type of Amendment (map or text):

Map Amendment:

Site Location: S. E. Corner of Gridley St. & Jefferson St.

Tax Parcel Number(s): 179.37-1-1, 2, 3, 14, 15, 16

Current Zoning: INST-HTR

Proposed Zoning: UR-2

Reason for amendment: To build single family houses

Location map: Submit 18 copies of location map (all sheets must be 24" x 36" or smaller).

Text Amendment:

Section to be amended: _____

Proposed wording of text amendment (attach additional sheets if necessary): _____

Reason for amendment: _____

3. Professional Representing Applicant (if any):

Name: _____ Phone: _____

Address: _____ Fax: _____

- 4. Environmental Assessment Form - All petitions must include a completed SEQOR Short or Long Form.
- 5. Petition Fee: \$700.00 plus \$100/acre Total \$ 843⁰⁰
 A check for the total amount payable to: "Commissioner of Finance" must accompany this petition.
- 6. Submit 18 copies of complete petition and all attachments.
- 7. Does any City officer, employee or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? YES _____ NO _____. If yes, a statement disclosing the name, residence, nature and extent of this interest must be filed with this application.
- 8. Submission Deadline - All completed petitions are to be submitted to the Office of the Mayor 5 days before the next City Council meeting.

I, the undersigned owner or purchaser under contract for the property, hereby request zoning amendment approval by the City Council for the above petition. I agree to meet all requirements under Section 240-15.3 of the Zoning Code for the City of Saratoga Springs.

Applicant Signature: [Signature]
 Name: Mrs. A. Doyle, Lawrence P. Doyle
 Address: 175 Church St
Saratoga Springs, NY 128

Date: 1/3/2012
 Phone: 583-1559
 Fax: 584-1209


cell
369-7186

PROJECT I.D. NUMBER

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 James G. Doyle and Lawrence P. Doyle	2. PROJECT NAME Proposed Zoning Change map lands of James G. Doyle and Lawrence P. Doyle
3. PROJECT LOCATION Municipality: City of Saratoga Springs (I.D.) County: Saratoga	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc. or provide map) S.E. Corner of Gridley St. & Jefferson St.	
5. IS PROPOSED ACTION: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: Change Zoning on (6) parcels from "INST-HTR" To "UR-2"	
7. AMOUNT OF LAND AFFECTED: Initially 56.709 acres soft Ultimately 56.709 acres SA FT.	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No, describe briefly This	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input checked="" 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: Mix of Residential & Horse Track Related	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals Saratoga Springs City Council must approve a zoning change	
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 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: Daniel G. Wheeler LS	Date: 1-2-2013
Signature: 	

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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>_____ Name of Lead Agency</p>	
<p>_____ Print or Type Name of Responsible Officer in Lead Agency</p>	<p>_____ Title of Responsible Officer</p>
<p>_____ Signature of Responsible Officer in Lead Agency</p>	<p>_____ Signature of Preparer (If different from responsible officer)</p>
<p>_____ Date</p>	