



Date: \_\_\_\_\_

## Section 1. Project Summary

<b>Project Name:</b>	
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Contact Person for this Application:		
Name	Phone	Email

Primary Applicant		
Organization	First Name	Last Name

Site Data	
Street Address:	City Council District(s):
Community District(s):	Zoning Sectional Map Number(s):
Existing Zoning District(s):	Special District(s):

### LIST ALL ACTIONS BY THEIR ACTION CODE

*For applications seeking more than one type of action, each action must be listed separately.*

Action code*	If Follow-up action, indicate previous approval Action code	Is applicant solely a public agency?	Application number	Data to differentiate multiple actions of same type

\*See instructions for list of all action types and their appropriate codes.

Does this project require a legal instrument to be recorded against the subject property?  Yes  No  Unknown

ANY PERSON WHO SHALL KNOWINGLY MAKE A FALSE REPRESENTATION ON OR WHO SHALL KNOWINGLY FALSIFY OR CAUSE TO BE FALSIFIED ANY FORM, MAP, REPORT OR OTHER DOCUMENT SUBMITTED IN CONNECTION WITH THIS APPLICATION SHALL BE GUILTY OF AN OFFENSE PUNISHABLE BY FINE OR IMPRISONMENT OR BOTH, PURSUANT TO SECTION 10-154 OF THE CITY OF NEW YORK ADMINISTRATIVE CODE.

**NOTICE:** THIS APPLICATION WILL BE DEEMED PRELIMINARY UNTIL IT IS CERTIFIED AS COMPLETE BY THE DEPARTMENT OF CITY PLANNING OR THE CITY PLANNING COMMISSION. ADDITIONAL INFORMATION MAY BE REQUESTED OF THE APPLICANT BY THE DEPARTMENT OF CITY PLANNING.



## Land Use Application

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### Section 2. Applicants

1	<b>Applicant</b>	<b>Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
	<b>Signature by or on behalf of** Applicant</b>	<b>Printed Name of Authorized Applicant Representative*</b>	<b>Title</b>		<b>Date</b>

2	<b>Applicant</b>	<b>Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
	<b>Signature by or on behalf of** Applicant</b>	<b>Printed Name of Authorized Applicant Representative*</b>	<b>Title</b>		<b>Date</b>

3	<b>Applicant</b>	<b>Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
	<b>Signature by or on behalf of** Applicant</b>	<b>Printed Name of Authorized Applicant Representative*</b>	<b>Title</b>		<b>Date</b>

\* Person authorized to sign the application, if different from 'Applicant'

\*\* Note that signatures by or on behalf of an applicant may require the submission of materials that demonstrate the authority of the signer to sign on behalf of the company/agency/organization. Please contact the Lead Planner to determine if this is necessary.

APPLICANT REPRESENTATIVE(S)	
Name	Company/Agency or Organization

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### Section 3. Environmental Review

Discuss with CITY ENVIRONMENTAL QUALITY REVIEW (CEQR) lead agency before completing.

1. Who is the LEAD AGENCY (responsible for the CEQR)? \_\_\_\_\_

2. CEQR NUMBER \_\_\_\_\_

3. Indicate CEQR Process type:  Type I  Unlisted  Type II

Type II Category: \_\_\_\_\_ Date of Determination: \_\_\_\_\_

### Section 4. Project Area and Development Site Data & Geography

#### PROPOSED PROJECT AREA

The **proposed Project Area** is the entirety of all land parcels that are affected by all actions being sought.

Do **ALL** actions being sought apply to:

the whole City?  Yes  No

the entirety of one or more Borough(s)?  Yes  No

Borough(s): \_\_\_\_\_

the entirety of one or more Community District(s)?  Yes  No

Community District(s) \_\_\_\_\_

Land or land underwater that is not associated with a tax block or lot?  Yes  No

Description of the geographic boundaries (especially for non-tax lots or irregular sites) by cross streets, bounding streets, dimensions, etc.:



# Land Use Application

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## Section 4. (continued)

Existing zoning districts/special district: \_\_\_\_\_

Select all that apply to any portion of the **proposed Project Area**:

Located within the State Designated Coastal Zone Management (CZM) Area  **Yes**  **No**

Located within a Historic District  **Yes**  **No**

Historic District Name: \_\_\_\_\_

### DEVELOPMENT SITE

*The **Development Site** is the specific parcel(s) that the applicant is seeking to develop. The Project Area and Development Site can be the same parcels of land or different, depending on the actions being sought. For instance, a special district may be mapped over a portion of a neighborhood (project area), but only certain parcels within it may be proposed for immediate development by the applicant (development site).*

Does the application result in the development of 500,000+ zoning square feet of floor area?  **Yes**  **No**

If **yes**, development size:  **500,000 to 999,999 zoning square feet**

**1,000,000 to 2,499,999 zoning square feet**

**At least 2,500,000 zoning square feet**

Is the **Development Site** a (New York City or Other) Landmark or within a Historic District?  **Yes**  **No**

Indicate Landmark or Historic District Name: \_\_\_\_\_







Date: \_\_\_\_\_

## Section 5. Related Actions

1. List all **prior** site-specific actions by the **City, State or Federal Government** within the project area and describe in more detail in the attached Project Description.

Reference/ Application Number*	Description	Disposition or Status	Calendar Number*	Date*

*\*If applicable*

2. List all **future** site-specific actions by the City, State, or Federal Government within the project area, and describe in more detail in the attached Project Description:

Reference/ Application Number*	Description	Status	Calendar Number*	Date*

*\*If applicable*



## Land Use Application

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### Section 6.

### HOUSING PLANS; URBAN RENEWAL AREAS; URBAN DEVELOPMENT ACTION AREAS PROGRAM (UDAAP)

Applies to: HA, HC, HD, HG, HN, HO, HP, HU

1. Select all that apply:  DESIGNATION  PROJECT  DISPOSITION (If disposition is sought, fill in Section 7)

2. Fill in the table below for all the subject sites (existing conditions):

Borough	Block	Lot	UR Site Number	Owner	Existing Number of Buildings	Existing Stories in each Building	Existing Uses	Existing Zoning	Community/Institutional facilities			Number of Dwelling units	
									Number Occupied	Number Vacant	Number of Workers	Occupied	Vacant





## Land Use Application

Date: \_\_\_\_\_

### Section 6. (continued)

3. Fill in the table below for all the subject sites (proposed conditions)

Borough	Block	Lot	UR Site Number*	Address	Owner	PROPOSED	
						Uses	Is site to be disposed? (yes/no)

\*Urban Renewal Site Number



Date: \_\_\_\_\_

**Section 7.**

**DISPOSITION RELATED TO URBAN DEVELOPMENT ACTION AREAS PROGRAM (UDAAP) OR URBAN RENEWAL**

**Applies to: HA,HD**

1. Type of disposition:

HA (Urban Development Action Area – UDAAP)  **Yes**  **No**

HD (Disposition of Urban Renewal Site)  **Yes**  **No**

2. Manner of disposition:  **General**  **Direct**

If **Direct** Disposition, indicate:

From: *(Indicate city agency)* \_\_\_\_\_

To: \_\_\_\_\_

*Indicate Sponsor/ Developer/ Purchaser/ Lessee or Local Public Development Corporation*  
*If recipient has not been selected or disposition is not limited to a particular recipient, indicate "To be determined by agency"*

3. Restrictions and conditions:  **None** (Pursuant to Zoning)  
 **Restricted** (Describe the restrictions in the attached project description, including any restrictions on disposition, term, or use of property)



Date: \_\_\_\_\_

**Section 8.**

**OFFICE SPACE LEASE, PUBLIC FACILITY SITE SELECTION OR ACQUISITION**

**Applies to: PC, PQ, PS, PX**

1. Action(s) requested:

OFFICE SPACE LEASE

Yes

No

ACQUISITION

Yes

No

SITE SELECTION

Yes

No

2. Type of facility:

Local/Neighborhood

Regional/Citywide

3. The Proposed facility is a(n):

EXISTING FACILITY PROPOSED TO REMAIN

Yes

No

How long has existing facility been at this location?

\_\_\_\_\_

EXISTING FACILITY TO REMAIN AND EXPAND/ENLARGE

Yes

No

How long has existing facility been at this location?

\_\_\_\_\_

EXISTING FACILITY REPLACEMENT IN NEW LOCATION

Yes

No

Where is the current facility located?

\_\_\_\_\_

NEW FACILITY

Yes

No

4. Is project listed in Citywide Statement of Needs?

Yes

No

Indicate Fiscal Year(s)

\_\_\_\_\_

Indicate Page Number(s)

\_\_\_\_\_

5. Did the Borough President propose an alternate site pursuant to charter section 204(f) or (g)?

Yes

No

Identify Alternate Site

\_\_\_\_\_

6. Capital budget line

\_\_\_\_\_

For Fiscal Years:

\_\_\_\_\_





Date: \_\_\_\_\_

## Section 9. DISPOSITION

### Applies to: PP

1. Type of disposition:  **General**  **Direct**

From which City Agency? \_\_\_\_\_

To Whom? \_\_\_\_\_

*Sponsor/ Developer/ Purchaser/ Lessee or Local Public Development Corporation.  
If recipient has not been selected or disposition is not limited to a particular recipient, indicate:  
"To be determined by agency"*

2. Restrictions and conditions:  **None** (Pursuant to Zoning)
- Restricted** (Describe the restrictions in the attached project description, including any restrictions on disposition, term, or use of property)

## Section 10. CHANGE IN CITY MAP

### Applies to: MM, MY, ME

1. Please select all requested map changes that apply:

Establish/Delineate New:	Eliminate/Remove Existing:	Change Existing:
<input type="checkbox"/> STREET	<input type="checkbox"/> STREET	<input type="checkbox"/> STREET (Width)
<input type="checkbox"/> PARK	<input type="checkbox"/> PARK	<input type="checkbox"/> STREET (Alignment)
<input type="checkbox"/> PUBLIC PLACE	<input type="checkbox"/> PUBLIC PLACE	<input type="checkbox"/> STREET (Grade)
<input type="checkbox"/> GRADE	<input type="checkbox"/> GRADE	<input type="checkbox"/> EASEMENT
<input type="checkbox"/> EASEMENT	<input type="checkbox"/> EASEMENT	

2. Is there a related Acquisition of Property?  **Yes**  **No**
3. Is there a related Disposition of Property?  **Yes**  **No**
4. Is the only proposed City Map Change the elimination of a mapped but unimproved street?  **Yes**  **No**  
If yes, is the mapped but unimproved street being eliminated from the property of an owner-occupied, one- or two- family residence?  **Yes**  **No**



Date: \_\_\_\_\_

## Section 11.

### ZONING SPECIAL PERMITS, AUTHORIZATIONS AND CERTIFICATIONS

**Applies to: ZS, ZA, ZC, CM, LD, RS, RA, RC**

*Use the following action codes to indicate action types in this section:*

- ZS** new or modified zoning special permit
- ZA** new or modified zoning authorization
- ZC** new or modified zoning certification
- CM** renewal of a zoning special permit or authorization
- LD** action pursuant to or modification of a legal document

#### South Richmond District

- RS** new or modified zoning special permit
- RA** new or modified zoning authorization
- RC** new or modified zoning certification

1. Is the Applicant:

- |   |                                     |                                    |
|---|-------------------------------------|------------------------------------|
| Owner of the development site?                      | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Lessee of the development site?                     | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Other? (explain in attached project description)    | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| In a contract to lease or buy the development site? | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |

2. Are there other owners or long-term lessees of the subject property?  **Yes**  **No**









Date: \_\_\_\_\_

## Section 12. ZONING TEXT AMENDMENT

### Applies to: ZR

1. Please Indicate the affected Zoning Resolution Sections by title and number, below:

Zoning Section Name	Zoning Section Number

## Section 13. ZONING MAP AMENDMENT

### Applies to: ZM

1. What is the total area of all zoning lots in the area to be rezoned?

- |   |   |
|---|---|
| <input type="checkbox"/> Less than 10,000 square feet | <input type="checkbox"/> 70,000 to 99,000 square feet     |
| <input type="checkbox"/> 10,000 to 19,999 square feet | <input type="checkbox"/> 100,000 to 239,999 square feet   |
| <input type="checkbox"/> 20,000 to 39,999 square feet | <input type="checkbox"/> 240,000 to 500,000 square feet   |
| <input type="checkbox"/> 40,000 to 69,999 square feet | <input type="checkbox"/> Greater than 500,000 square feet |

2. Please indicate all existing and proposed zoning districts in the table below:

Zoning Section Map(s) to be modified	EXISTING Zoning Districts	PROPOSED Zoning Districts

-END OF FORM-