

CONDITIONAL USE PERMIT APPLICATION

Part 1. Application Notes

A Conditional Use Permit is required for a property with a proposal for a use listed in the Permitted Use Table in Section 375-3(B) as a conditional use for a zone district. Conditional uses are those uses that have potential unforeseen impacts or unique form and require a careful case-by-case review of their location, design, configuration and impact to determine the desirability of permitting their establishment on any particular site.

1. The Planning Board reviews the application and makes its decision based on the standards in Section 375-5(E)(16)(c).
2. The Planning Board may impose conditions to ensure that the proposed use meets these standards and any other applicable provisions of the USDO.
3. A public hearing is required for all conditional use permit applications.
4. If approved, the conditional use is approved only for the portions of the property specified in the application.
5. In addition to meeting the requirements of the USDO, the proposal may be subject to other City ordinances, including but not limited to Chapter 133 (Building Construction), and may be subject to disapproval if not proposed in compliance with these articles.

Note: A pre-application meeting is available upon request prior to submitting this application.

Part 2. General Information

Proposed Conditional Use: **Blood Plasma Collection Office (Light Manufacturing)**

Building Area to be Occupied (sq. ft.): **11,000 sq. ft.**

Outdoor Site Area to be Occupied (sq. ft.): **0**

Other Uses at the Site: **Retail shopping plaza with supermarket, restaurants, offices, general retail**

Has any portion of the land been the subject of a conditional use permit previously? Yes No

If yes, state the case number(s) of the conditional use approval(s):

Part 3. Project Description

Project Description (*Describe what the proposed use is and how it will operate, including hours and days of operation, number of employees, number of clients, parking and loading requirements, etc.*):

Establishment of a blood plasma collection office in an existing space of approximately 11,000 square feet. The proposed location is in the Hannaford Plaza located at 900 Central Avenue, involving interior alterations and exterior signage.

Number of Employees: **20**

Maximum Occupancy: **Not yet determined by Fire Marshall**

Hours of Operation:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	8-4	7-7	7-7	7-7	7-7	7-7	8-4

County Permit(s) Required:

State Permit(s) Required:

Federal Permit(s) Required: **Food and Drug Administration Licensing**

Part 4. Consistency with Neighborhood and Development Pattern

A. Describe why the proposed location was chosen for the establishment of the conditional use being sought:

The use is permitted in the MU-CH zone as a conditional, and is in a retail plaza with ample parking, access via a main thoroughfare (Central Avenue), and is on a bus line.

B. Describe how the proposed use is consistent with the existing and planned development within the immediate area:

The proposed use has no external impacts to the neighborhood, and is similar to existing retail and office uses in the MU-CH zoning district. The operation is entirely indoors, including all storage, and pickups and deliveries are infrequent.

Part 5. Fiscal and Environmental Impacts

A. Describe the nature, scope and duration of work to be undertaken in order to establish the use:

The interior of the space will be demolished, and the improvements shown on the attached test-fit floor plan will be constructed. Signage will be erected on the front facade and pylon sign, consistent with the attached photographs. The construction process is expected to take 6 to 7 months from the start of construction.

B. Describe any impacts the proposed conditional use will have upon the adjacent properties, and if and how they will be mitigated:

None

C. Indicate any of the following operational characteristics (from Section 375-4(J)(1), Operating Standards) that will be generated by the proposed use (check all that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> Electromagnetic radiation | <input type="checkbox"/> Emissions | <input type="checkbox"/> Glare |
| <input type="checkbox"/> Hazardous materials | <input checked="" type="checkbox"/> Materials and waste handling | <input type="checkbox"/> Noise |
| <input type="checkbox"/> Odors | <input type="checkbox"/> Vibration | <input type="checkbox"/> Nuclear Radiation |
| | <input type="checkbox"/> Smoke | <input checked="" type="checkbox"/> N/A |

For all checked boxes please describe the source, and explain how it will be mitigated as part of this application.

A minimal amount of medical waste is to be disposed of in accordance with State and Federal regulations, as per CSL's operating procedures.

D. Describe the volume of refuse expected to be generated by the use, and the means of storage and disposal:

There is minimal waste associated with this use.

E. Are there any public funds from any source being used to improve the site or for the operation of the conditional use?

No

F. Are any unplanned public infrastructure or service improvements required as a result of an approval of the proposed conditional use (e.g., street repaving, sewer upgrade, storm drainage improvements, etc.)?

No

G. Indicate whether there is an increase or decrease in impervious surface area as a result of the proposal:

No increase or decrease in impervious surface area

Part 6. District and Use Standards

A. Explain how the proposed conditional use is consistent with the purposes and objectives of the zone district in which it is located:

The use has been determined to be permissible in the MU-CH zoning district as a "light manufacturing" use. It produces no noise, odor, smoke, vibrations or other external impacts, and is therefore consistent with the other uses in the Hannaford Plaza and the MU-CH zoning district.

B. Describe how the use complies with the Use Specific Standards applicable to that use, as enumerated in Section 375-3(C) of the USDO:

There is no outdoor storage associated with this use (Section 375-3(C)(5)(b)(iii)).

Part 7. Public Impact

A. Will the proposed use generate any unique or elevated need for police, fire or emergency services?

No. CSL's offices in other municipalities have not created a unique or elevated need for police, fire or emergency services.

B. Describe the type of traffic the use is expected to generate and indicate which days and between what hours the peak period of use occurs.

The anticipated traffic, based on CSL's experience with similar-sized offices, will be consistent with other uses in the Hannaford Plaza, which has ample parking. The peak periods are anticipated to be mornings and evenings, based on CSL's experience at other locations.

C. Describe if the use will be served by commercial delivery vehicles, the anticipated number of deliveries per day and where the vehicles will park:

Yes. Approximately 3-4 incoming delivery vehicles per week, and 1-2 outgoing shipments per week.

D. Indicate the type of parking facilities available to the use and if off-site, the distance from the property:

The Hannaford Plaza has a large, on-site parking lot (517 spaces, including handicapped-accessible spaces) which requires no modification to accommodate this use.

E. Describe any proposed changes to curb cuts, streets, sidewalks and connections to public spaces (e.g., removal of curb cuts, improving crosswalks, installation of wider sidewalks, removal of any sidewalk, etc.):

None

F. Describe how building entrances are connected to sidewalks, parking areas, and other pedestrian facilities:

The plaza is serviced by on-site sidewalks adjacent to the building, connecting each of the spaces. There is a sidewalk on Central Avenue, which borders the plaza to the northeast.

G. Describe any changes that are required to bring the property into compliance with the ADA Standards for Accessible Design:

None

H. Are there any planned changes to utility provisions (water, sewer, electric, etc.)?

No

Part 8: Necessity and Desirability of Service

A. Describe how the proposed use is in the interest of the public convenience:

The closest blood plasma donation center is currently in Schenectady. There is no similar center in the City of Albany.

B. Describe any similar or identical uses in the area, their size and location:

There are no nearby blood plasma collection offices in the City of Albany. To the applicant's knowledge, this would be the first and only such center in the City.

C. Please indicate any positive public health and safety impacts or improvements of the proposed use:

Blood plasma is used to produce therapies that treat people with bleeding disorders who are unable to clot blood properly, individuals who have improperly functioning immune systems and do not respond to traditional antibiotics, and those with genetic emphysema. In addition, plasma is used to derive albumin (used to treat burns, trauma patients and surgical patients), as well as hyperimmune globulins (used to treat rabies, tetanus, dialysis patients, organ transplant recipients, and pregnant women who have Rh incompatibility).

Part 9: Submittal Requirement Checklist

	Required Documents	Hard Copies	Electronic Copies	Electronic Submission (.pdf) (Required Document Name)
A. Required for All Conditional Use Permit Applications				
<input checked="" type="checkbox"/>	Master Application	0	1	Master Application
<input checked="" type="checkbox"/>	Conditional Use Permit Application	0	1	CUP
<input checked="" type="checkbox"/>	Color photographs of the property in context with surrounding properties	1	1	Photos
<input checked="" type="checkbox"/>	Site plan on 24" x 36" sheet and drafted at a scale that best conveys any proposed changes to the site (1"=50', 1"=100', or 1"=200')	1	1	Site Plan [YYYY]-[MM]-[DD]
<input checked="" type="checkbox"/>	Floor Plans, drawn to scale	0	1	Floor Plan [YYYY]-[MM]-[DD]
<input type="checkbox"/>	Elevations for all new buildings and additions, drawn to scale	0	1	Elevations [YYYY]-[MM]-[DD]
<input checked="" type="checkbox"/>	Short or Full Environmental Assessment Form as required by SEQR	0	1	Short or Full EAF
<input checked="" type="checkbox"/>	Application fee as established in the Albany Fee Schedule – Payable to <i>The City of Albany Treasurer</i> Conditional Use Permit: \$250 Per Additional Permit: \$100			
B. Voluntary or Upon Request				
<input type="checkbox"/>	Project Narrative	0	1	Project Narrative
<input type="checkbox"/>	Business Plan	0	1	Business Plan
<input type="checkbox"/>	Water/Sewer Engineering Report	0	1	Water Sewer Report
<input type="checkbox"/>	Stormwater Management Report	0	1	Stormwater Report
<input type="checkbox"/>	Traffic Study	0	1	Traffic Study
<input type="checkbox"/>	Federal, state, county, or local licensing paperwork	0	1	Licensing Paperwork
<input type="checkbox"/>	Any additional information determined to be necessary by the Chief Planning Official	0	1	[Document Name]
Electronic document submissions shall be sent via email to planningboard@albanyny.gov , USB Flash Drive, or by another medium approved by the City of Albany Planning Staff. CD and DVD submissions are <u>not</u> accepted.				