

Town of Manlius

Planning Board Meeting

January 23, 2023

6:30PM

1. Zoom Meeting Instructions

Documents:

[ZOOM PLANNING BOARD MEETING INSTRUCTIONS JANUARY 23, 2023.PDF](#)

2. Pledge Of Allegiance

3. Approval Of Minutes January 9, 2023

4. Daniel Nagy - 8014 Peck Road, Kirkville, NY 13082 - Initial Presentation - 2-Lot Subdivision  
- Same Address - Tax Map #'s 043.-01-11.5 And 043.-01-11.9

Documents:

[8014 PECK ROAD - APPLICATION.PDF](#)

[8014 PECK ROAD SUBDIVISION - SURVEY.PDF](#)

5. Peregrine Development, LLC - 217 Montgomery Street, Syracuse, NY 13202 - Discussion -  
Site Plan Amendment - Peregrine Assisted Living Center - Medical Center Drive,  
Fayetteville - Tax Map # 086.-01-03.7

Documents:

[UPDATED PLANS - PEREGRINE DEVELOPMENT\\_MEDICAL CENTER DR\\_SITE  
PLAN AMENDMENT 2023-01-12.PDF](#)

6. RM Zone Discussion

7. Other Business

8. Adjournment



January 23, 2023

## Virtual Planning Board Meeting

Instructions to attend the January 23, 2023 virtual Planning Board meeting:

The easiest way to join is to go to our website [www.TownOfManlius.org](http://www.TownOfManlius.org) and click on the link that is located on the homepage. You can also watch on our Facebook page by searching for "Town of Manlius"

Enter the meeting url web address as listed below:

<https://us02web.zoom.us/j/83449751592?>

Password to join when prompted:

Password: 013717

Enter your email address and name and join the meeting!

Join by telephone by dialing the number below:

1-(929) -436-2866

When prompted to enter the Webinar ID, use the number below followed by #

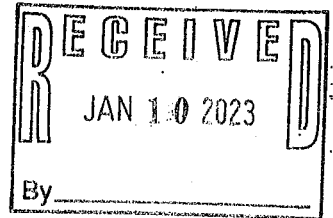
Webinar ID: 834 4975 1592

Press # again to skip the personal id and enter the password below followed by #

Password: 013717

Expected  
Fee: \_\_\_\_\_

TOWN OF MANLIUS  
PLANNING DEPARTMENT  
INITIAL APPEARANCE APPLICATION



DATE: 01/04/2023

Name of Project: NAGY LOT ADJUSTMENT

Applicant must submit ~~2~~ 2 copies of all site plans, surveys, and supporting data with the final application before a planning board meeting can be scheduled.

Location of Project: 8014 PECK RD., T. MANLIUS

Type of Project:

☐ Division of Land ☐ Subdivision ☐ Accessory Use ☐ Zone Change ☐ Site Review ☒ Other LOT ADJUSTMENT

Developer: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

Tax Map Number(#)/s: 43-01-11.5 (NAGY) + 43-01-11.9 (HAUSLER)

Present Zoning: \_\_\_\_\_

Desired Zoning: \_\_\_\_\_

Total Acreage: \_\_\_\_\_

Total Number of Lots: \_\_\_\_\_

Property Owner/s: DANIEL NAGY

Phone: 315-627-0243

Address: 8014 PECK RD., KIRKVILLE NY

Zip: 13082

Tax Map#(s): 43-01-11.5

Owner's Signature: Daniel P. Nagy

Printed Name: DANIEL NAGY

Property Owner/s: ROBERT HAUSLER

Phone: 315-420-8011

Address: 7250 OXBOW RD., KIRKVILLE NY

Zip: 13082

Tax Map#(s): 43-01-11.9

Owner's Signature: [Signature]

Printed Name: ROBERT HAUSLER

Use next page for additional known property owners' information

Planning Board Meeting Date Assignment: \_\_\_\_\_

Fee: \_\_\_\_\_

Paid: \_\_\_\_\_

Per: ☐ Credit/Debit Card ☐ Check ☐ Cash

Planning Board - Initial

## Short Environmental Assessment Form

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                                                                                                                                                                                                                                                                                                                                                |  |                                                           |                          |
| LOT ADJUSTMENT - T.M. #'S 43-01-11.5 + 43-01-11.9                                                                                                                                                                                                                                                                                                                                       |  |                                                           |                          |
| Name of Action or Project:<br>LOT ADJUSTMENT                                                                                                                                                                                                                                                                                                                                            |  |                                                           |                          |
| Project Location (describe, and attach a location map):<br>804 PECK RD, KIRKVILLE NY 13082 (SURVEY ATTACHED)                                                                                                                                                                                                                                                                            |  |                                                           |                          |
| Brief Description of Proposed Action:<br>CONVEY 27,543 SF (0.632 ACRE) OUT OF TAX PARCEL 43-01-11.9 (NAVLEE) AND ADD IT TO TAX PARCEL 43-01-11.5 (NAGY)                                                                                                                                                                                                                                 |  |                                                           |                          |
| Name of Applicant or Sponsor:<br>JOSEPH V. SALLIN, LS                                                                                                                                                                                                                                                                                                                                   |  | Telephone: 315-633-2737<br>E-Mail: SallinSurvey@gmail.com |                          |
| Address:<br>2973 ST. RT. 31                                                                                                                                                                                                                                                                                                                                                             |  |                                                           |                          |
| City/PO:<br>CANASTOTA                                                                                                                                                                                                                                                                                                                                                                   |  | State:<br>NY                                              | Zip Code:<br>13032       |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?                                                                                                                                                                                                                                                  |  | NO                                                        | YES                      |
| If Yes, attach a narrative description of the intent of the proposed action and the environmental impact may be affected in the municipality and proceed to Part 2. If no, continue to question 2.                                                                                                                                                                                      |  | <input checked="" type="checkbox"/>                       | <input type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other government? If Yes, list agency(s) name and permit or approval:                                                                                                                                                                                                                                        |  |                                                           |                          |
| 3.a. Total acreage of the site of the proposed action? 0.632 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? 3.1 acres                                                                                                                                                                                                                                                        |  |                                                           |                          |
| 4. Check all land uses that occur on, adjoining and near the proposed action.                                                                                                                                                                                                                                                                                                           |  |                                                           |                          |
| <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Res<br><input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify):<br><input type="checkbox"/> Parkland |  |                                                           |                          |

APPLICANT  
CALL W/  
QUESTIONS  
CALL WHEN  
APPLICATION  
COMPLETE  
ZONING CLASS  
DIFFERENT

|                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                   |                                                                                         |                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------|
| 5. Is the proposed action,<br>a. A permitted use under the zoning regulations?                                                                                                                                                                                                                                                                                                                                                          | NO<br><input type="checkbox"/>                                                                    | YES<br><input type="checkbox"/>                                                         | N/A<br><input type="checkbox"/> |
| b. Consistent with the adopted comprehensive plan?                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>                                                                          | <input type="checkbox"/>                                                                | <input type="checkbox"/>        |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?                                                                                                                                                                                                                                                                                                                         | NO<br><input type="checkbox"/>                                                                    | YES<br><input checked="" type="checkbox"/>                                              |                                 |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?<br>If Yes, identify: _____                                                                                                                                                                                                                                                                                             | NO<br><input type="checkbox"/>                                                                    | YES<br><input type="checkbox"/>                                                         |                                 |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels?                                                                                                                                                                                                                                                                                                                                        | NO<br><input checked="" type="checkbox"/>                                                         | YES<br><input type="checkbox"/>                                                         |                                 |
| b. Are public transportation service(s) available at or near the site of the proposed action?                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>                                                                          | <input checked="" type="checkbox"/>                                                     |                                 |
| c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>                                                                          | <input checked="" type="checkbox"/>                                                     |                                 |
| 9. Does the proposed action meet or exceed the state energy code requirements?<br>If the proposed action will exceed requirements, describe design features and technologies: _____                                                                                                                                                                                                                                                     | NO<br><input type="checkbox"/>                                                                    | YES<br><input type="checkbox"/>                                                         |                                 |
| 10. Will the proposed action connect to an existing public/private water supply?<br>If No, describe method for providing potable water: _____                                                                                                                                                                                                                                                                                           | NO<br><input checked="" type="checkbox"/>                                                         | YES<br><input type="checkbox"/>                                                         |                                 |
| 11. Will the proposed action connect to existing wastewater utilities?<br>If No, describe method for providing wastewater treatment: _____                                                                                                                                                                                                                                                                                              | NO<br><input checked="" type="checkbox"/>                                                         | YES<br><input type="checkbox"/>                                                         |                                 |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?<br>b. Is the proposed action located in an archeological sensitive area?                                                                                                                                                                                                                                           | NO<br><input checked="" type="checkbox"/><br><input type="checkbox"/>                             | YES<br><input type="checkbox"/><br><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?<br>b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?<br>If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____                                   | NO<br><input type="checkbox"/><br><input checked="" type="checkbox"/>                             | YES<br><input checked="" type="checkbox"/><br><input type="checkbox"/>                  |                                 |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:<br><input checked="" type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional<br><input checked="" type="checkbox"/> Wetland <input type="checkbox"/> Urban <input 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<br><input checked="" type="checkbox"/>                                                         | YES<br><input type="checkbox"/>                                                         |                                 |
| 16. Is the project site located in the 100 year flood plain?                                                                                                                                                                                                                                                                                                                                                                            | NO<br><input type="checkbox"/>                                                                    | YES<br><input checked="" type="checkbox"/>                                              |                                 |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources?<br>If Yes,<br>a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES<br>b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?<br>If Yes, briefly describe: _____                                                     | NO<br><input checked="" type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | YES<br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |                                 |

|                                                                                                                                                                                                                     |                          |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----|
| 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?<br>If Yes, explain purpose and size: _____ | NO                       | YES |
| <input checked="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?<br>If Yes, describe: _____                                               | NO                       | YES |
| <input checked="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?<br>If Yes, describe: _____                                             | NO                       | YES |
| <input checked="checked" type="checkbox"/>                                                                                                                                                                          | <input type="checkbox"/> |     |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE                                                                                                                       |                          |     |
| Applicant/sponsor name: <u>JOSEPH V. SALLIN, LLC</u>                                                                                                                                                                | Date: <u>01/01/2023</u>  |     |
| Signature: <u>Joe V Sallin LLC</u>                                                                                                                                                                                  |                          |     |

STOP

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. 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 type="checkbox"/>      | <input type="checkbox"/>           |
| 2. Will the proposed action result in a change in the use or intensity of use of land?                                                                                     | <input type="checkbox"/>      | <input type="checkbox"/>           |
| 3. Will the proposed action impair the character or quality of the existing community?                                                                                     | <input 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 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 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 type="checkbox"/>      | <input type="checkbox"/>           |
| 7. Will the proposed action impact existing:                                                                                                                               |                               |                                    |
| a. public / private water supplies?                                                                                                                                        | <input type="checkbox"/>      | <input type="checkbox"/>           |
| b. public / private wastewater treatment utilities?                                                                                                                        | <input type="checkbox"/>      | <input type="checkbox"/>           |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?                                   | <input type="checkbox"/>      | <input type="checkbox"/>           |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetland, waterbodies, groundwater, air quality, flora and fauna)?                      | <input type="checkbox"/>      | <input type="checkbox"/>           |

|                                                                                                                 | No, or<br>small<br>impact<br>may<br>occur | Moderate<br>to large<br>impact<br>may<br>occur |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? | <input type="checkbox"/>                  | <input type="checkbox"/>                       |
| 11. Will the proposed action create a hazard to environmental resources or human health?                        | <input type="checkbox"/>                  | <input type="checkbox"/>                       |

**Part 3 - Determination of significance.** The Lead Agency is responsible for the completion of Part 3. 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.

|                                                                                                                                                  |                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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 may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required. |
| <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.                                                             |
| <div> <div>Name of Lead Agency</div> <div>Date</div> </div>                                                                                      |                                                                                                                                                                                                                                                                              |
| <div> <div>Print or Type Name of Responsible Officer in Lead Agency</div> <div>Title of Responsible Officer</div> </div>                         |                                                                                                                                                                                                                                                                              |
| <div> <div>Signature of Responsible Officer in Lead Agency</div> <div>Signature of Preparer (if different from Responsible Officer)</div> </div> |                                                                                                                                                                                                                                                                              |

**PRINT**

## TOWN OF MANLIUS

### DISCLOSURE AFFIDAVIT

This affidavit is a part of and must be completed and attached to every application, petition, request submitted for a *site plan, variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit.*

STATE OF NEW YORK     )  
                                      ) SS:  
COUNTY OF ONONDAGA    )

I. JOSEPH V. SALLIN, being duly sworn, deposes and says that (s) he is:

APPLICANT

(applicant, petitioner, corporation officer, property owner, etc.)

II. That deponent has read and is familiar with the provisions of the General Municipal Law, Section 809 which states:

- A. Every application, petition or request submitted for a site plan, variance, amendment, change of zoning, approval of a plat, exemption from a plat or official map, license or permit, pursuant to the provisions or any ordinance, local law, rule or regulation constituting the zoning and planning regulations of a municipality shall state the name, residence and the nature and extent of the interest of any state officer or any officer or employee of such municipality is a part, in the person, partnership or association making such application, petition or request (hereinafter called the applicant) to the extent known to such applicant.
- B. For the purpose of this action an officer or employee shall be deemed to have an interest in the applicant when (s)he, his/her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them:
  - 1) is the applicant, or
  - 2) is an officer, director, partner or employee of the applicant, or
  - 3) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or
  - 4) is a party to an agreement with such an applicant, express or implied, whereby (s) he may receive any payment or other benefit, whether or not for services rendered, or contingent upon the favorable approval of such application, petition or request.
- C. Ownership of less than five percent (5%) of the stock of a corporation whose stock is listed on the New York or American Stock Exchanges shall not constitute an interest for the purposes of this section.
- D. A person who knowingly and intentionally violates this section shall be guilty of a misdemeanor.

III. That no Town of Manlius officer, employee or a relative of either, as defined in Section 809 General Municipal Law has any interest in this application.

-OR-

If a Town of Manlius officer, employee or relative of either as defined in Section 809 General Municipal law has any interest in this application, the full particulars are provided on an attached sheet.

Date: JAN 4, 2023.

Date: \_\_\_\_\_, 20\_\_\_\_\_.

JOSEPH V. SALLIN  
(Print Name)

\_\_\_\_\_  
(Print Name)

Joe V Salli 23  
(Signature)

\_\_\_\_\_  
(Signature)

N/A  
(Entity Name)

\_\_\_\_\_  
(Entity Name)

N/A  
By (Officer) (Title)

\_\_\_\_\_  
By (Officer) (Title)

2473 ST. RT 31 CANASTOTA  
(Mailing Address of Applicant)

\_\_\_\_\_  
(Mailing Address of Applicant)

315-633-2737  
(Telephone Number)

\_\_\_\_\_  
(Telephone Number)

### ACKNOWLEDGEMENTS

STATE OF NEW YORK )  
 ) SS:  
COUNTY OF ONONDAGA )

On this 4<sup>th</sup> day of January in the year 2023, before me, the undersigned, a notary public in and for said state, personally appeared Joseph V. Sallin,

N/A, and N/A personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within Petition and acknowledged to me the he/she/they executed the same in his/her/their capacity, and that by his/her/their signature(s) on the Petition, the individual or the persons upon behalf of which the individual acted executed the instrument.

Kristin L. Sayre  
Notary Public

KRISTIN L. SAYRE  
Notary Public, State of New York  
No. 01540150379  
Qualified in Onondaga County  
Commission Expires January 7, 2024

LOT ADJUSTMENT FOR TM# 43-01-11.5  
PART OF LOT 16 IN THE TOWN OF MANLIUS  
ONONDAGA COUNTY, NEW YORK

THE UNDERSIGNED SURVEYOR HEREBY  
CERTIFIES THAT THIS IS AN ACCURATE  
MAP OF AN ACTUAL SURVEY COMPLETED  
ON 12-01-2022.

DATE: JANUARY 2, 2023

PLS. LICENSE NO. 1056641111



JOSEPH VINCENT SALLIN P.L.S.  
2473 NYS ROUTE 31  
CANASTOTA, NY, 13032  
(315) 633 - 2737

UNAUTHORIZED REPRODUCTION OR ADDITION TO A SURVEY MAP BEARING A  
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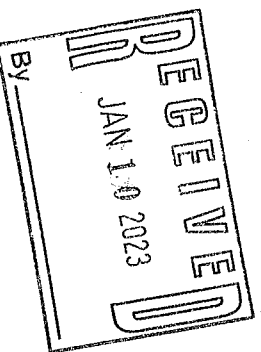
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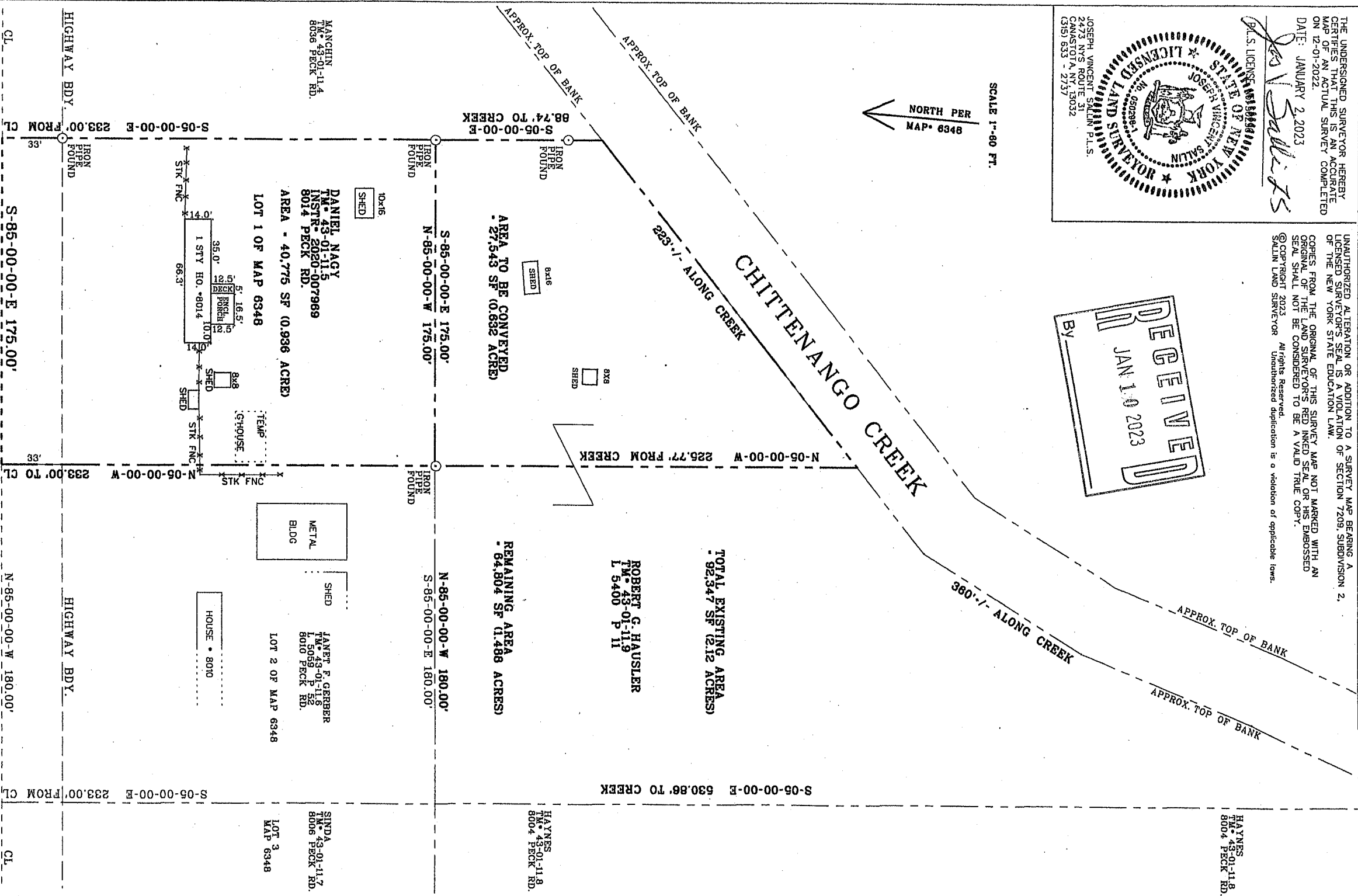
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**SCALE 1"-60 FT.**

**NORTH PER**  
**MAP- 6348**

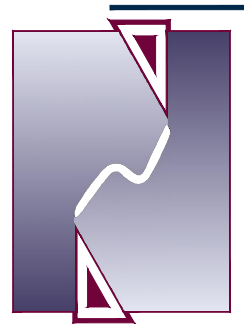


PECK RD. (66' WIDE)

# PEREGRINE DEVELOPMENT LLC SENIOR LIVING CENTER

MEDICAL CENTER DRIVE  
TOWN OF MANLIUS  
ONONDAGA COUNTY  
NEW YORK STATE

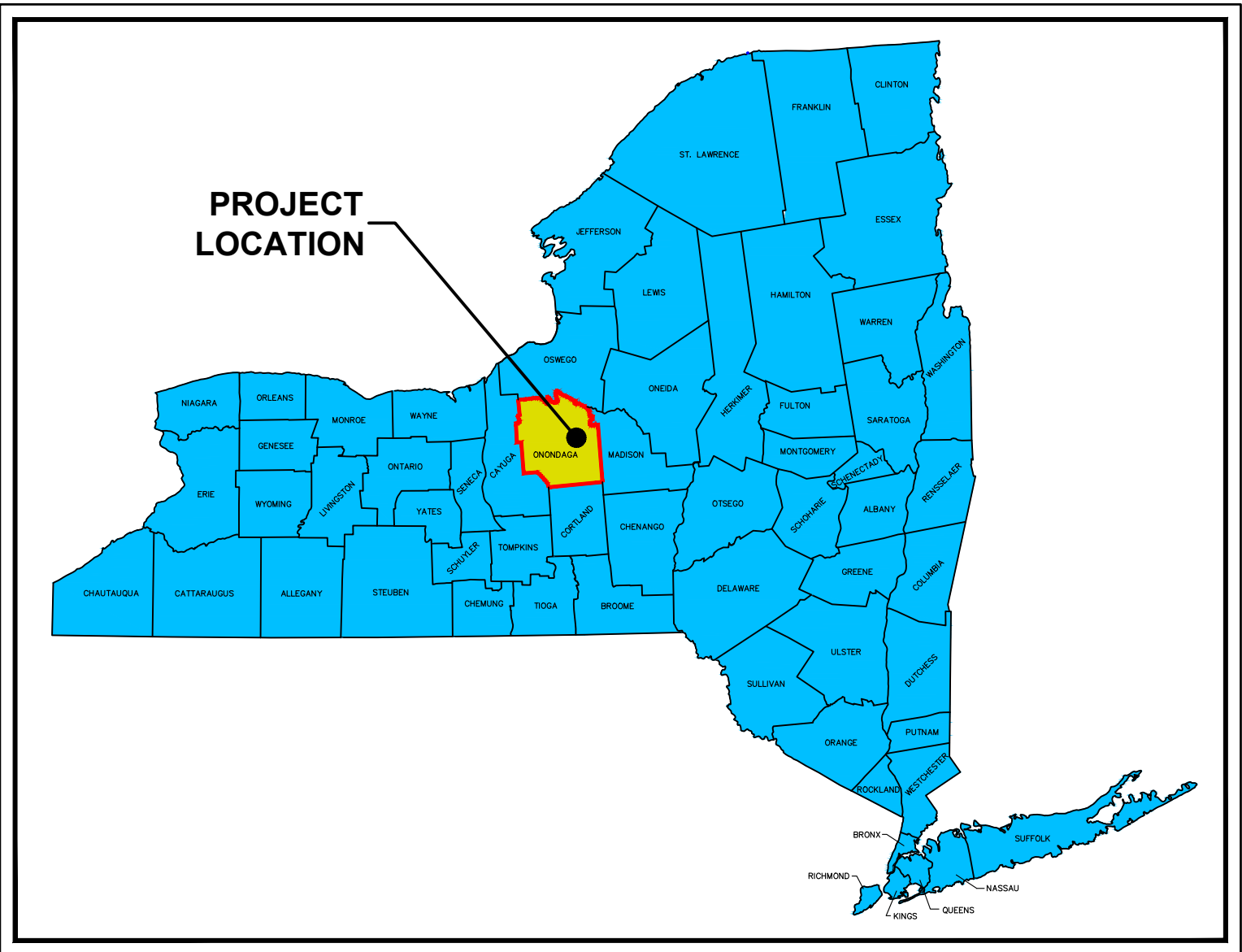
PREPARED BY:



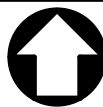
**NAPIERALA  
CONSULTING**  
PROFESSIONAL ENGINEER, P.C.  
SITE • DESIGN • ENGINEERING

110 FAYETTE STREET  
MANLIUS, NEW YORK 13104

email: MNAP@NAPCON.COM  
PH: (315) 682-5580 FAX: (315) 682-5544

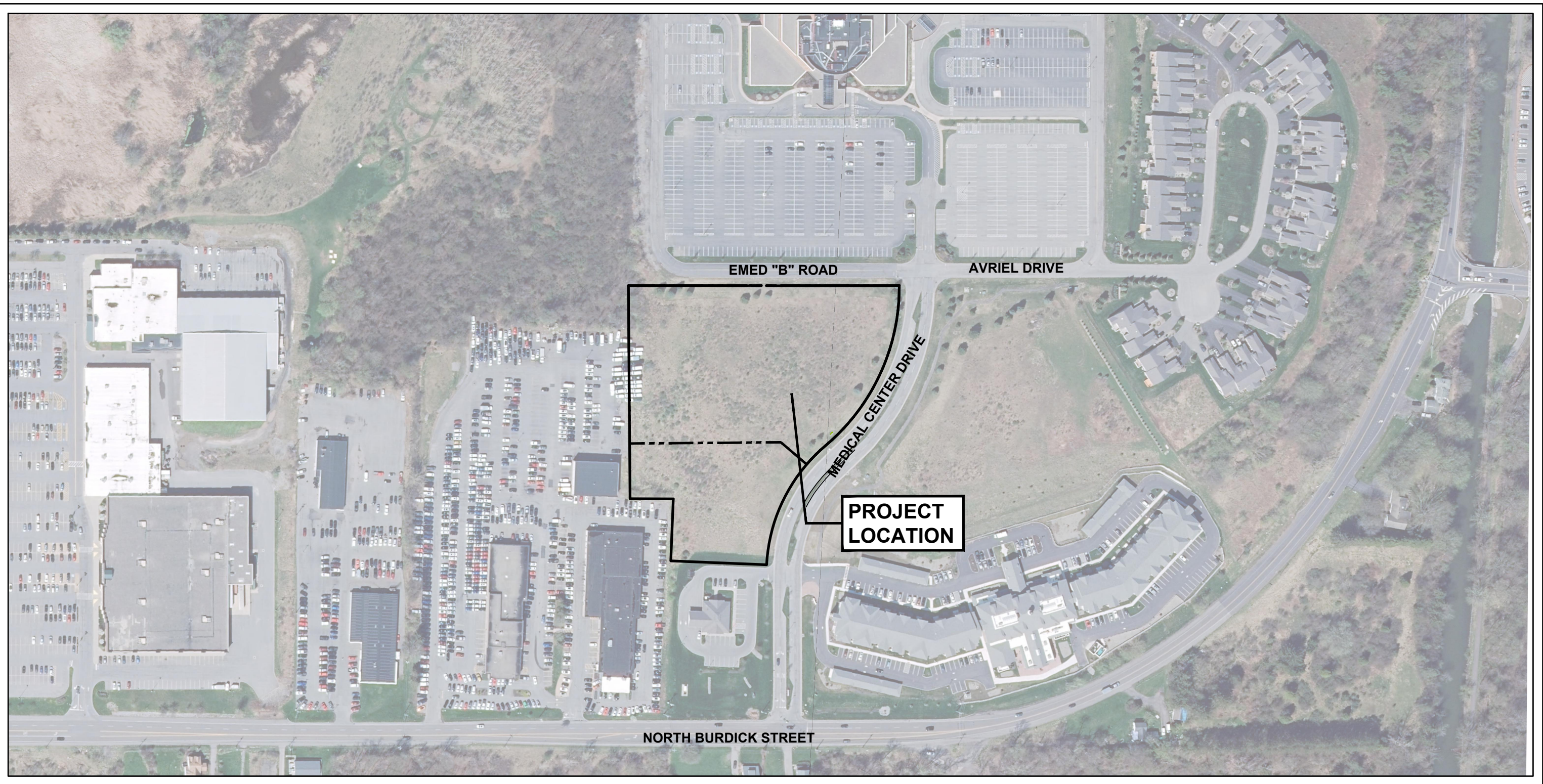


SITE LOCATION MAP  
NOT TO SCALE



SHEET INDEX:

|                                       |                  |
|---------------------------------------|------------------|
| TITLE SHEET                           | C-1              |
| GENERAL NOTES                         | C-2              |
| SURVEY / EXISTING CONDITIONS          | C-3              |
| SITE PREPARATION PLAN                 | C-4              |
| NEIGHBORHOOD PLAN                     | C-5              |
| LAYOUT PLAN                           | C-6              |
| OFFSITE IMPROVEMENT PLAN              | C-6.1            |
| GRADING AND DRAINAGE PLAN             | C-7              |
| DETAILED GRADING PLANS (1"=10' SCALE) | C-7.01 TO C-7.04 |
| EROSION AND SEDIMENT CONTROL PLAN     | C-8              |
| UTILITY PLAN                          | C-9              |
| LANDSCAPING PLAN                      | C-10             |
| LIGHTING PHOTOMETRIC                  | C-11             |
| CONSTRUCTION DETAILS                  | C-12.X           |
| EROSION CONTROL DETAILS               | C-13             |



AERIAL MAP  
1"=200'



PREPARED FOR:

PEREGRINE DEVELOPMENT, LLC.

217 MONTGOMERY STREET  
SYRACUSE, NY 13202



APPROVED BY OWNER

NAME DATE

SHEET TITLE:

TITLE SHEET

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

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NAPIERALA CONSULTING PROFESSIONAL ENGINEER, P.C.  
IT IS A VIOLATION OF LAW FOR ANY PERSON, UNLESS  
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ALTERATIONS.

PRELIMINARY  
NOT FOR CONSTRUCTION

| PROJECT NO.                                                                                  | DATE        |
|----------------------------------------------------------------------------------------------|-------------|
| 22-2099                                                                                      | 25 AUG 2022 |
| PEREGRINE DEVELOPMENT, LLC<br>MEDICAL CENTER DRIVE<br>TOWN OF MANLIUS<br>ONONDAGA COUNTY, NY |             |

C-1

PROPERTY LINE INFORMATION TAKEN FROM A PLAN ENTITLED "ALTA/NSPS LAND TITLE SURVEY, LOT 2  
CANAL PROPERTIES LLC SUBDIVISION, MEDICAL CENTER DRIVE" PREPARED BY C.T. MALE ASSOCIATES,  
P.C. (DAVID J. UHRINEC, PLS).

THE PLANS SHOW SUBSURFACE STRUCTURES, ABOVEGROUND STRUCTURES, AND/OR UTILITIES FROM  
FIELD LOCATION AND RECORD MAPPING. EXACT LOCATION MAY VARY FROM THE LOCATIONS  
INDICATED. IN PARTICULAR, THE CONTRACTOR IS WARNED THAT THE EXACT OR EVEN APPROXIMATE  
LOCATION OF SUCH PIPELINES, SUBSURFACE STRUCTURES AND/OR UTILITIES IN THE AREA MAY BE  
DIFFERENT FROM THAT SHOWN OR MAY NOT BE SHOWN AND IT SHALL BE HIS RESPONSIBILITY TO  
PROCEED WITH GREAT CARE IN EXECUTING ANY WORK. THE CONTRACTOR IS TO CALL DIG SAFELY NY  
AT 1-800-962-7982 A MINIMUM OF 72 HOURS BEFORE DIGGING, DRILLING, OR BLASTING.

THE ENGINEER SHALL BE NOTIFIED IN WRITING OF ANY CONDITIONS THAT VARY FROM THOSE SHOWN  
ON THE PLANS. THE CONTRACTOR'S WORK SHALL NOT VARY FROM THE PLANS WITHOUT THE  
EXPRESSED APPROVAL OF THE ENGINEER.

THE CONTRACTOR IS INSTRUCTED TO COOPERATE WITH ANY AND ALL OTHER CONTRACTORS  
PERFORMING WORK ON THIS JOB SITE DURING THE PERFORMANCE OF THIS CONTRACT.

THE CONTRACTOR SHALL RESTORE LAWNS, DRIVEWAYS, CULVERTS, SIGNS, AND OTHER PUBLIC  
PRIVATE PROPERTY DAMAGED OR REMOVED TO AT LEAST AS GOOD A CONDITION AS BEFORE BEING  
DISTURBED AS DETERMINED BY THE ENGINEER. ANY DAMAGED TREES, SHRUBS, AND/OR HEDGES  
SHALL BE REPLACED AT THE CONTRACTOR'S EXPENSE.

THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING AND INCURRING THE COST OF ALL  
REQUIRED PERMITS, INSPECTIONS, CERTIFICATES, ETC. AND SHALL COMPLY WITH ALL PERMITS.

ALL WORK SHALL BE DONE IN STRICT COMPLIANCE WITH ALL APPLICABLE NATIONAL, STATE, AND  
LOCAL CODES, STANDARDS, ORDINANCES, RULES, AND REGULATIONS.

ALL PROPOSED UTILITIES AND APPURTENANCES ARE TO BE CONSTRUCTED IN COMPLIANCE WITH THE  
LOCAL TOWN OF MANLIUS'S CODES AND REGULATIONS GOVERNING THE INSTALLATION OF SUCH  
UTILITIES.

THE ENGINEER RESERVES THE RIGHT TO EXAMINE ANY WORK DONE ON THIS PROJECT AT ANY TIME  
TO DETERMINE CONFORMANCE WITH THE REQUIREMENTS OF THE CONTRACT DOCUMENTS OF THIS  
PROJECT AS INTENDED AND INTERPRETED BY THE ENGINEER.

MISCELLANEOUS WORK NOT SPECIFICALLY SHOWN ON THE CONTRACT DRAWINGS SUCH AS PATCHING,  
BLOCKING, TRIMMING, ETC. SHALL BE PERFORMED AS REQUIRED TO MAKE THE WORK COMPLETE.

THE CONTRACTOR SHALL PROTECT EXISTING PROPERTY LINE INFORMATION. ANY MONUMENTATION  
DISTURBED OR DESTROYED, AS JUDGED BY THE ENGINEER OR OWNER, SHALL BE REPLACED AT THE  
CONTRACTOR'S EXPENSE UNDER THE SUPERVISION OF A NEW YORK STATE LICENSED LAND SURVEYOR.

IT IS THE CONTRACTOR'S RESPONSIBILITY TO EXAMINE ALL PLAN SHEETS AND COORDINATE WORK  
WITH ALL OTHER CONTRACTORS FOR THE SITE.

THE CONTRACTOR SHALL:

- A. VERIFY ALL CONDITIONS IN THE FIELD PRIOR TO COMMENCEMENT OF WORK AND NOTIFY THE  
ENGINEER OF ANY DISCREPANCIES.
- B. EXAMINE THE SITE AND INCLUDE IN HIS WORK THE EFFECT OF ALL EXISTING CONDITIONS ON THE  
WORK.
- C. PROVIDE AND INSTALL ALL MATERIALS AND PERFORM ALL WORK IN ACCORDANCE WITH  
RECOGNIZED GOOD STANDARD PRACTICE.
- D. HOLD THE OWNER HARMLESS AGAINST ANY AND ALL CLAIMS ARISING FROM WORK DONE BY THE  
CONTRACTOR ON THE SITE.

ALL TRENCH EXCAVATION AND ANY REQUIRED SHEETING AND SHORING SHALL BE DONE IN  
ACCORDANCE WITH THE LATEST REVISIONS OF NEW YORK STATE INDUSTRIAL CODE RULE 23 AND  
OSHA REGULATIONS FOR CONSTRUCTION. SHEET PILING SHALL BE DESIGNED AND SEALED BY A NEW  
YORK STATE PROFESSIONAL ENGINEER.

CONTRACTOR SHALL BE RESPONSIBLE FOR DEWATERING AND THE MAINTENANCE OF SURFACE  
DRAINAGE DURING THE COURSE OF WORK. HE SHALL SUBMIT A DEWATERING PLAN DESIGNED AND  
SEALED BY A NEW YORK STATE PROFESSIONAL ENGINEER. CONTRACTOR SHALL MAINTAIN EXISTING  
SITE DRAINAGE PATTERNS THROUGHOUT CONSTRUCTION.

ALL BACKFILL USED IN TRENCHES EXCAVATED IN EXISTING ROADWAYS SHALL BE PLACED IN MAXIMUM  
6-INCH LIFTS AND COMPACTED BY MEANS OF A MECHANICAL COMPACTOR BETWEEN LIFTS TO 90%  
STANDARD PROCTOR COMPACTION.

WHEN BACKFILLING AROUND PROPOSED OR EXISTING STRUCTURES, MATERIAL SHALL BE PLACED IN  
MAXIMUM 6-INCH LIFTS AND COMPACTED BY MEANS OF A MECHANICAL COMPACTOR BETWEEN LIFTS  
TO 90% STANDARD PROCTOR COMPACTION.

ALL UTILITY WORK INVOLVING CONNECTIONS TO EXISTING SYSTEMS SHALL BE COORDINATED WITH THE  
ENGINEER AND THE UTILITY OWNER. NOTIFY THE ENGINEER AND THE UTILITY OWNER 72 HOURS  
BEFORE EACH AND EVERY CONNECTION TO AN EXISTING SYSTEM IS MADE.

CONSTRUCTION OF ALL PROPOSED UTILITIES MUST BEGIN AT ITS POINT OF CONNECTION TO THE  
EXISTING UTILITY OR AT THE LOWEST POINT IN THE SYSTEM. RIMS, GRATES, INVERTS, CLEARANCES,  
AND LOCATION AT CROSSINGS MUST BE VERIFIED PRIOR TO THE BEGINNING OF CONSTRUCTION.

MAINTAIN FLOW FOR ALL EXISTING UTILITIES.

THE CONTRACTOR SHALL BE RESPONSIBLE FOR PROVIDING ALL FIELD LAYOUT. THE CONTRACTOR  
SHALL TAKE TIES TO ALL UTILITY CONNECTIONS AND PROVIDE MARKED-UP AS-BUILT PLANS FOR ALL  
UTILITIES SHOWING TIES TO CONNECTIONS, BENDS, VALVES, LENGTHS OF LINES, AND INVERTS. THE  
OWNER AND HIS REPRESENTATIVES SHALL REVIEW AS-BUILT PLANS SHOWING ALL UNDERGROUND  
UTILITIES INSTALLED OR ENCOUNTERED. THE CONTRACTOR SHALL PROVIDE ANY CORRECTION OR  
OMISSIONS TO THE SATISFACTION OF THE OWNER AND HIS REPRESENTATIVES BEFORE UTILITIES  
WILL BE ACCEPTED.

THE CONTRACTOR SHALL MAINTAIN ALL TRAFFIC IN ALL AREAS IN ACCORDANCE WITH THE NYSDOT  
MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES.

THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL COMMERCIAL, RESIDENTIAL, AND PUBLIC  
PROPERTIES OR AS DIRECTED BY THE ENGINEER.

ALL EXCAVATIONS SHALL BE BACKFILLED TO EXISTING GRADE AT THE END OF EACH WORKDAY.

THE CONTRACTOR SHALL TAKE CARE TO PREVENT DAMAGE TO EXISTING UTILITIES. DAMAGED  
UTILITIES SHALL BE IMMEDIATELY REPAIRED BY THE CONTRACTOR AT THE CONTRACTOR'S EXPENSE.

MAXIMUM SLOPE FOR ALL CUT AND FILL LAWN AREAS SHALL BE 3H:1V UNLESS SHOWN OTHERWISE ON PLANS.

SLOPES GREATER THAN 4H:1V SHALL BE STABILIZED IMMEDIATELY AFTER GRADING OCCURS IN ACCORDANCE WITH THE NEW YORK STANDARDS AND SPECIFICATIONS FOR EROSION AND SEDIMENT CONTROL.

CONTRACTOR SHALL OBTAIN A COPY OF THE GEOTECHNICAL REPORT AND BECOME FAMILIAR WITH THE SOIL CONDITIONS ON THE SITE. CONTRACTOR SHALL FOLLOW ALL RECOMMENDATIONS AND REQUIREMENTS FROM THE GEOTECHNICAL ENGINEER.

UNLESS OTHERWISE NOTED, LIMITS OF DISTURBANCE ARE AS REPRESENTED BY PROPOSED GRADES. NO GRADING SHALL TAKE PLACE BEYOND LIMITS SHOWN.

ALL SLOPES STEEPER THAN 3H:1V SHALL BE TREATED WITH AN EROSION CONTROL PRACTICE SUCH AS A ROLLED EROSION CONTROL BLANKET OR RIPRAP. SEE DESIGNATED AREAS ON PLANS.

ALL CONSTRUCTION SHALL CONFORM WITH APPROPRIATE CODE AND REGULATORY REQUIREMENTS.

ALL UTILITIES SHALL BE INSTALLED IN ACCORDANCE WITH MUNICIPAL REGULATIONS AND THE STANDARDS OF THE PRIVATE UTILITY COMPANIES.

THESE PLANS SHOW PUBLIC UTILITY CONNECTION ONLY. PRIVATE UTILITY SERVICE FINAL LOCATION, SIZE AND DEPTH ARE SUBJECT TO THE APPROVAL OF THE UTILITY COMPANY.

EXTERIOR BUILDING LIGHTING LUMINAIRES SHALL BE OF SIZE AND TYPE, AND AT LOCATIONS SPECIFIED BY THE ARCHITECTS ELECTRICAL SITE PLAN AND SHALL CONFORM TO THE MUNICIPAL ZONING REQUIREMENTS.

WATER

WATER LINES, FITTINGS AND APPURTENANCES TO BE IN CONFORMANCE WITH APPROPRIATE CODE AND REGULATORY REQUIREMENTS. VERIFY EXISTING LINE SIZE AND LOCATION PRIOR TO CONSTRUCTION. ALL WATER LINES MUST MAINTAIN A MINIMUM 10' HORIZONTAL SEPARATION WITH SANITARY SEWER AND STORM SEWER LINES. ALL WATER MAIN AND SERVICE WORK MUST BE COORDINATED WITH THE MUNICIPAL WATER DEPARTMENT.

SANITARY SEWER

SANITARY SEWERS SHALL BE PVC PER ASTM D3034 SDR 26 UNLESS OTHERWISE NOTED. SUITABLE COUPLINGS AND ADAPTERS SHALL BE PROVIDED AT BUILDING CONNECTIONS.

STORM DRAINAGE

STORM DRAINAGE PIPING SHALL BE SMOOTH INTERIOR CORRUGATED PLASTIC PIPE (SICPP) UNLESS OTHERWISE NOTED (SICPP). PIPE JOINTS AND FITTINGS SHALL CONFORM TO AASHTO M252 OR AASHTO M294.

ELECTRIC AND GAS

ALL ELECTRIC AND GAS INSTALLATION SHALL BE COORDINATED WITH NATIONAL GRID. ALL SITE ELECTRIC IS TO BE PROVIDED BY THE BUILDING ARCHITECT/PROJECT ELECTRICIAN. THESE DRAWINGS DO NOT SHOW CIRCUITING OR SITE WIRING. REFER TO SITE ELECTRICAL BY ELECTRICIAN.

|                                                                                       |                                                    |
|---------------------------------------------------------------------------------------|----------------------------------------------------|
|    | ----- PROPOSED BUILDING                            |
|    | ----- PROPERTY LINE                                |
|    | ----- PROPOSED EASEMENT LINE                       |
|    | ----- PROPOSED CONCRETE PAVEMENT/SIDEWALK/PAD      |
|    |                                                    |
|    | ----- EXISTING CONTOUR                             |
|    | ----- PROPOSED CONTOUR                             |
|    | ----- PROPOSED STORM INLET                         |
|    | ----- PROPOSED MANHOLE (STORM OR SEWER AS NOTED)   |
|    | ----- PROPOSED SANITARY PIPE                       |
|    | ----- PROPOSED STORM PIPE                          |
|    | ----- PROPOSED WATER PIPE                          |
|    | ----- PROPOSED GAS PIPE                            |
|    | ----- PROPOSED UNDERGROUND ELECTRIC                |
|    | ----- PROPOSED STOCKADE FENCE                      |
|    | ----- PROPOSED LANDSCAPING                         |
|    | ----- PROPOSED PARKING LOT LIGHT                   |
|  | ----- PROPOSED DESIGNATED ACCESSIBLE PARKING SPACE |
|                                                                                       | ----- PROPOSED NO PARKING                          |

| TEMPORARY SEEDING MIXTURES                                                                                                                                                                                                                   |           |           | PERMANENT SEEDING MIXTURES |                                                                                                                             |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------|
|                                                                                                                                                                                                                                              | LBS./ACRE | LBS./1000 | SEED MIXTURE NO. 1         |                                                                                                                             | LBS./ACRE |
| FOR SPRING, SUMMER OR EARLY FALL SEEDINGS:                                                                                                                                                                                                   |           |           |                            |                                                                                                                             |           |
| A. ANNUAL RYEGRASS—OR—                                                                                                                                                                                                                       | 30        | 0.70      | 1                          | CREeping RED FESCUE (var. ENSYLVA)                                                                                          | 10        |
| B. PERENNIAL RYEGRASS                                                                                                                                                                                                                        | 30        | 0.70      | 2                          | PERENNIAL RYE GRASS (var. PENNFINE)                                                                                         | 10        |
|                                                                                                                                                                                                                                              |           |           | 3                          | SEED MIXTURE NO. 2                                                                                                          |           |
| FOR LATE FALL OR EARLY WINTER                                                                                                                                                                                                                |           |           |                            | SWITCHGRASS (var. SHELTER, PATHFINDER, TRAILBLAZER, OR BLACKWELL)                                                           | 20        |
| A. WINTER RYE (AROSTOOK)                                                                                                                                                                                                                     | 100       | 2.50      | 4                          | SEED MIXTURE NO. 3                                                                                                          |           |
| MULCH THE AREA WITH HAY OR STRAW AT 2 TONS/ACRE (APPROXIMATELY 2 LARGE ROLLED BALES/ACRE).                                                                                                                                                   |           |           | 5                          | BIRDFOOT TREFOIL (var. EMPIRE, PARDEE)                                                                                      | 10        |
|                                                                                                                                                                                                                                              |           |           | 6                          | REDTOP                                                                                                                      | 2         |
|                                                                                                                                                                                                                                              |           |           | 7                          | TALL FESCUE (var. KY 31, REBEL)                                                                                             | 20        |
| MULCH ANCHORING IS REQUIRED WHERE WIND OR AREAS OF CONCENTRATED WATER ARE OF CONCERN.                                                                                                                                                        |           |           | 8                          | SEED MIXTURE NO. 4                                                                                                          |           |
|                                                                                                                                                                                                                                              |           |           | 9                          | CREeping RED FESCUE (var. ENSYLVA)                                                                                          | 20        |
| PERMANENT SEEDINGS SHOULD TAKE PLACE IN EARLY SPRING. PROPER MULCHING AND ADEQUATE MOISTURE MUST BE PROVIDED FOR PERMANENT SEEDING. RESEEDING OF CHAILED AREAS SHALL TAKE PLACE DURING THE SUMMER/EARLY FALL OR DURING THE FOLLOWING SPRING. |           |           | 10                         | CHEWINGS FESCUE (COMMON)                                                                                                    | 20        |
|                                                                                                                                                                                                                                              |           |           | 11                         | PERENNIAL RYE GRASS (var. PENNFINE)                                                                                         | 5         |
|                                                                                                                                                                                                                                              |           |           | 12                         | RED CLOVER (COMMON)                                                                                                         | 10        |
| FERTILIZER:                                                                                                                                                                                                                                  |           |           |                            | SEED MIXTURE 1 TO BE APPLIED TO SHADED AREAS.                                                                               |           |
| 5% NITROGEN                                                                                                                                                                                                                                  |           |           |                            | SEED MIXTURE 2 IS IN PURE LIVE SEED. TO BE APPLIED TO AREAS UPLAND OF WETLANDS AND ALONG STORMWATER MITIGATION BASIN BANKS. |           |
| 10% PHOSPHORUS                                                                                                                                                                                                                               |           |           |                            |                                                                                                                             |           |
| 5% POTASH                                                                                                                                                                                                                                    |           |           |                            | SEED MIXTURE 3 TO BE APPLIED TO ALL SWALES AND WATERWAYS                                                                    |           |
| HYDROMULCH                                                                                                                                                                                                                                   |           |           |                            | MULCH CLOVER OR LADINO CLOVER MAY BE SUBSTITUTED FOR BIRDFOOT TREFOIL AND SEEDED AT THE SAME RATE                           |           |
| (50% MULCH SHALL BE A WOOD-FIBER COMPOSITION (MULCH PAPER — 50% WOOD))                                                                                                                                                                       |           |           |                            | PERENNIAL RYEGRASS MAY BE SUBSTITUTED FOR REDTOP BUT INCREASE SEEDING RATE TO 5 LBS./ACRE (0.1 LBS./1000 SQ. FT)            |           |
| IF MULCHING IS NOT APPLIED WITH HYDROSEED MIXTURE, APPROVED MULCHING, CONSISTING OF STALKS OF WHEAT, OATS, OR RYE, SHALL BE SPREAD EVENLY AT A RATE OF 2 TONS PER ACRE. MULCH IS TO BE TACKED INTO PLACE.                                    |           |           |                            | SEED MIXTURE 4 TO BE APPLIED TO ALL AREAS. (NOT FOR USE IN PLAYGROUNDS OR AS TURF)                                          |           |

METHOD OF SEEDING  
BROADCAST, DRILLING WITH A CULTIPACK TYPE SEEDER, OR HYDROSEEDING ARE ACCEPTABLE. GOOD SOIL TO SEED CONTACT IS  
THE KEY TO SUCCESSFUL SEEDINGS.

MULCHING  
APPLY STRAW MULCH AT A RATE OF 2 TON/ACRE (90 LBS./1,000 SF) ANCHORED WITH WOOD FIBER MULCH (HYDROMULCH) AT 500 - 750 LBS./ACRE (11 - 17 LBS./1,000 SF). THE WOOD FIBER MULCH MUST BE APPLIED THROUGH A HYDROSEEDER AFTER MULCHING.

WATERING MAY BE ESSENTIAL TO ESTABLISH TO NEW SEEDING. WEATHER CONDITIONS WILL DICTATE WHEN TO WATER. EACH APPLICATION MUST BE UNIFORMLY APPLIED AND 1 TO 2 INCHES OF WATER SHOULD BE APPLIED PER APPLICATION.

PERMANENT SEEDING TO OCCUR AFTER FINAL GRADING HAS OCCURRED. PERMANENT SEEDING WILL INCLUDE

- A. SCARIFY ALL COMPACT, SLOWLY PERMEABLE, MEDIUM AND FINE TEXTURED SUBSOIL AREAS. SCARIFY AT APPROXIMATELY 90 DEGREE ANGLES TO THE SLOPE DIRECTION IN SOIL AREAS THAT ARE STEEPER THAN 5 PERCENT.
- B. REMOVE REFUSE, WOOD PLANT PARTS, STONES OVER 3 INCHES IN DIAMETER, AND OTHER LITTER.

- A. TOPSOIL SHALL HAVE AT LEAST 2 PERCENT AND NO GREATER THAN 6 PERCENT BY WEIGHT OF FINE TEXTURED STABLE ORGANIC MATERIAL.
- B. TOPSOIL SHALL HAVE NOT LESS THAN 20 PERCENT FINE TEXTURED MATERIAL (PASSING THE NO. 200 SIEVE) AND NOT MORE THAN 15 PERCENT CLAY.
- C. TOPSOIL TREATED WITH SOIL STERILANTS OR HERBICIDES SHALL BE SO IDENTIFIED TO THE PURCHASER.
- D. TOPSOIL SHALL BE RELATIVELY FREE OF STONES OVER 1½" INCHES IN DIAMETER, TRASH, NOXIOUS WEEDS SUCH AS NUTSEDGE AND QUACKGRASS, AND WILL HAVE LESS THAN 10% GRAVEL BY VOLUME.
- E. TOPSOIL CONTAINING SOLUBLE SALTS GREATER THAN 500 PPM SHALL NOT BE USED.

- A. TOPSOIL SHALL BE DISTRIBUTED TO A UNIFORM DEPTH OVER THE AREA. IT SHALL NOT BE PLACED WHEN IT IS PARTLY FROZEN, MUDDY, OR ON FROZEN SLOPES OR OVER ICE, SNOW, OR STANDING WATER PUDDLES.
- B. TOPSOIL PLACED AND GRADED ON SLOPES STEEPER THAN 5% SHALL BE PROMPTLY FERTILIZED, SEEDED, MULCHED AND STABILIZED BY "TRACKING" WITH SUITABLE EQUIPMENT.
- C. A MINIMUM OF 4 INCHES OF TOPSOIL IS TO BE USED IN ALL AREAS.

- A. LIME TO A pH OF 7.0. LIME IS NOT TO BE APPLIED WITHIN 50 FEET OF STREAMS AND WETLANDS.
- B. FERTILIZER APPLICATION RATE TO BE BASED ON SOIL TESTS.
  1. IN NO CASE SHALL FERTILIZER BE APPLIED BETWEEN DECEMBER 1 AND APRIL 1 ANNUALLY.
  2. FERTILIZER SHALL BE SPREAD WITHIN 20 FEET OF A SURFACE WATER.
  3. FERTILIZER SHALL BE APPLIED TO ALL IMPERVIOUS SURFACE AREAS SUCH AS PARKING LOT, DRIVEWAYS, SIDEWALKS SHALL BE IMMEDIATELY CONTAINED AND LEGALLY APPLIED OR PLACED IN AN APPROVED CONTAINER.
  4. INCORPORATE THE FERTILIZER, AND LIME IF SPECIFIED, INTO THE TOP 2 - 4 INCHES OF THE TOPSOIL.
  5. WHEN APPLYING FERTILIZER BY HYDROSEEDING CARE SHOULD BE TAKEN TO APPLY MIX ONLY TO AN APPROPRIATE FLOW RATE TO PREVENT EROSION AND SPRAYING ON IMPERVIOUS AREAS.

[illegible]

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22-2099

PROJECT NO.

PRC

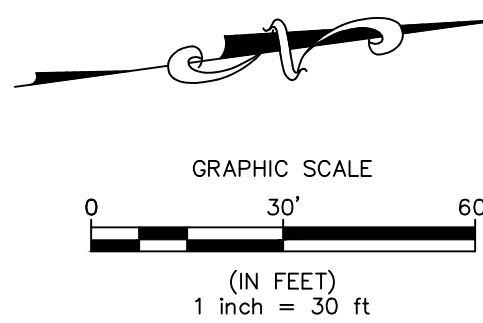
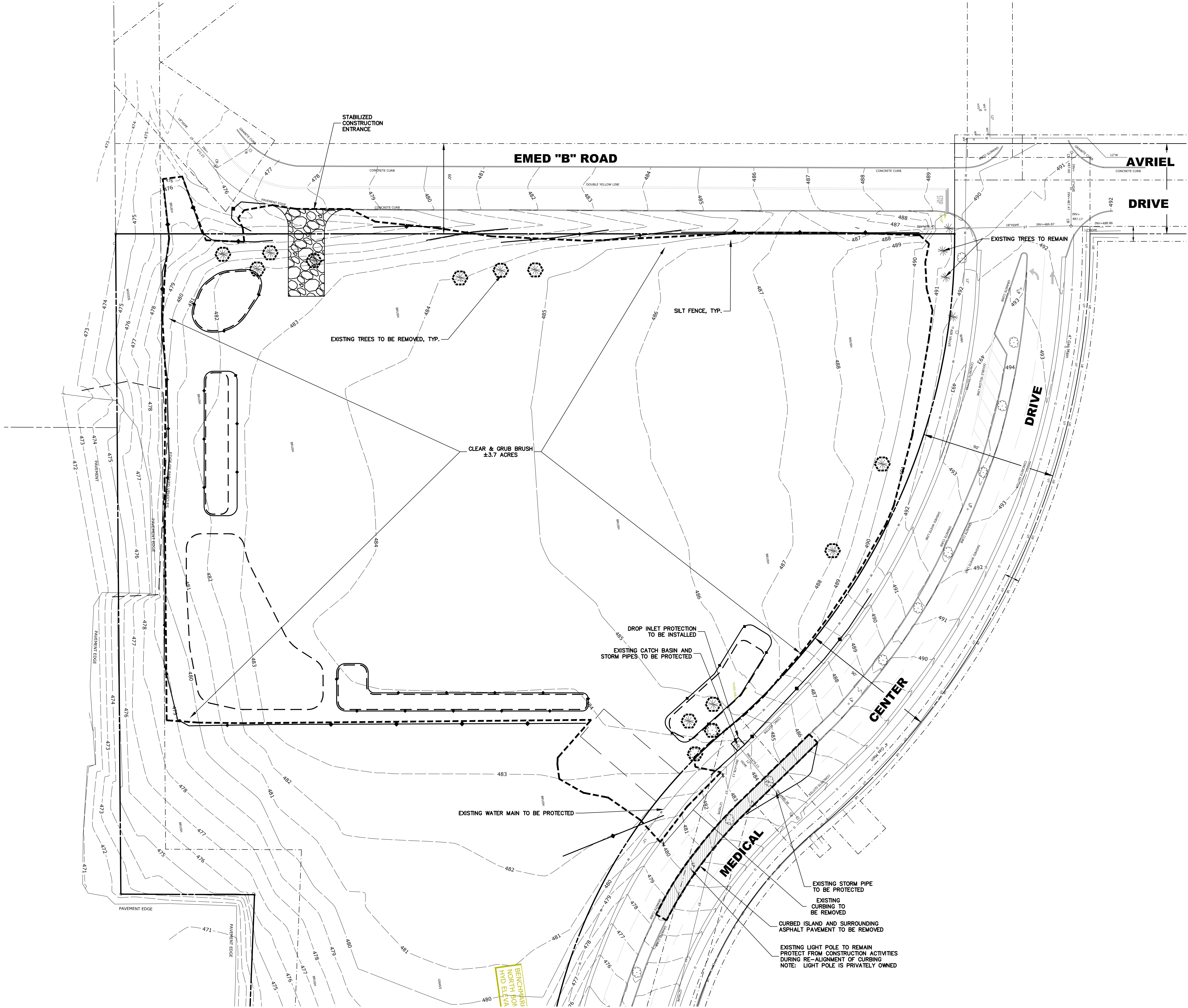
SHEET

**C-2**



Doc ID: 037332090001 Type: MAP  
Recorded: 10/17/2019 at 01:59:51 PM  
Fee Amt: \$10.00 Page 1 of 1  
Onondaga County, NY  
Lisa Dell County Clerk  
File **12839**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <p align="center"><b>SUBDIVISION PLAT</b></p> <p align="center"><b>LOT 2 CANAL PROPERTIES LLC SUBDIVISION</b></p> <p align="center">INTO</p> <p align="center"><b>LOT 2A AND 2B CANAL PROPERTIES LLC SUBDIVISION</b></p>                                                                                                                                                                                                                                  |                                                |
| TOWN OF MANLIUS                                                                                                                                                                                                                                                                                                                                                                                                                                           | ONONDAGA COUNTY, NEW YORK                      |
| <p align="center"><b>C.T. MALE ASSOCIATES</b></p> <p align="center"><i>Engineering, Surveying, Architecture, Landscape Architecture, &amp; Geology, D.P.C.</i></p> <p align="center">200 GATEWAY PARK DRIVE, BLDG. C, P.O. BOX 3246<br/>SYRACUSE, NY 13220-3246<br/>315.458.6498 * FAX 315.458.4427</p>                                                                                                                                                   |                                                |
| <br><br><br><br> | <p>SHEET 1 OF 1</p> <p>DRAWING NO. 10-0200</p> |



**PRELIMINARY  
NOT FOR CONSTRUCTION**

PLAN SEAL BY:  
PROFESSIONAL ENGINEER P.C.  
NYS REGISTRATION # 07842

SHEET

PROJECT NO.

22-2099

DATE

25 AUG 2022

SCALE

1"=30'

**C-4**

**PREPARED BY:**  
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| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

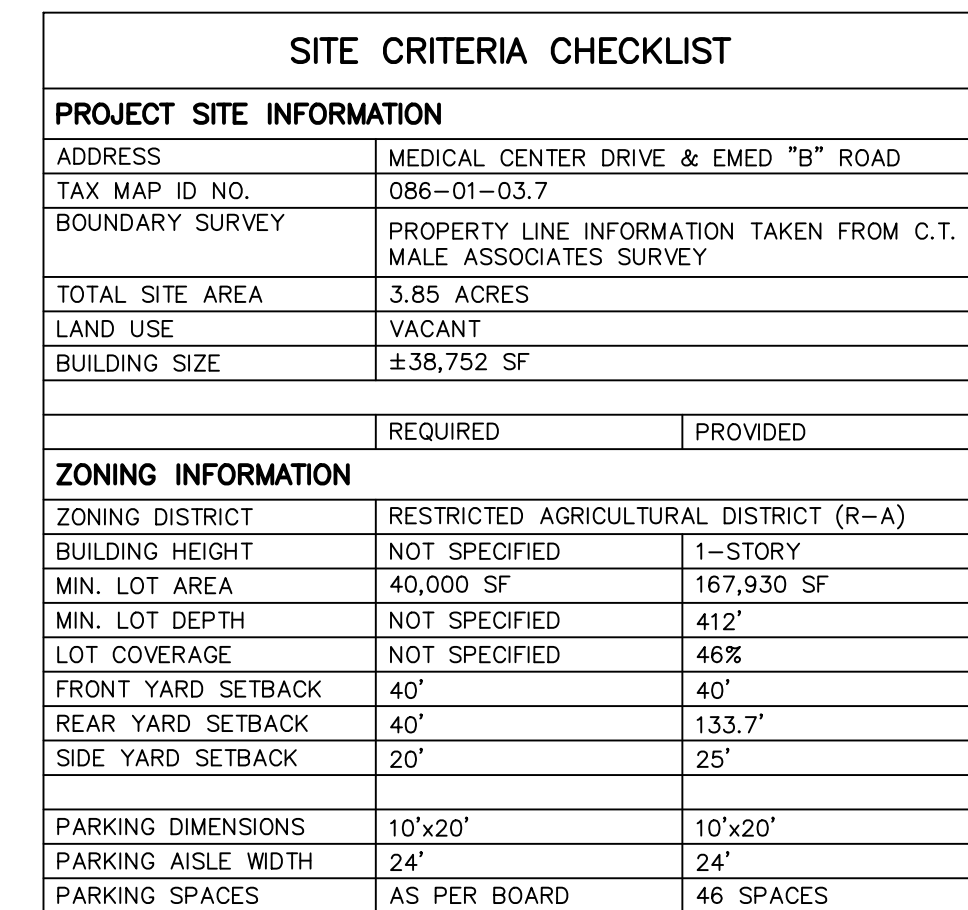
**SITE PREPARATION PLAN**

**PROJECT TITLE:**  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**

**TOWN OF MANLIUS**    **ONONDAGA COUNTY, NEW YORK**

**PREPARED FOR:**  
**PEREGRINE DEVELOPMENT, LLC.**  
217 MONTGOMERY STREET  
SYRACUSE, NY 13202





**PRELIMINARY**  
**NOT FOR CONSTRUCTION**

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NAPIERALA CONSULTING  
PROFESSIONAL ENGINEER, PC**

PROJECT TITLE: **PEREGRINE CARE FACILITY  
MEDICAL CENTER DRIVE**

TOWN OF MANLIUS      ONONDAGA COUNTY, NY

PREPARED FOR: **PEREGRINE DEVELOPMENT**

**217 MONTGOMERY STREET  
SYRACUSE, NY 13202**

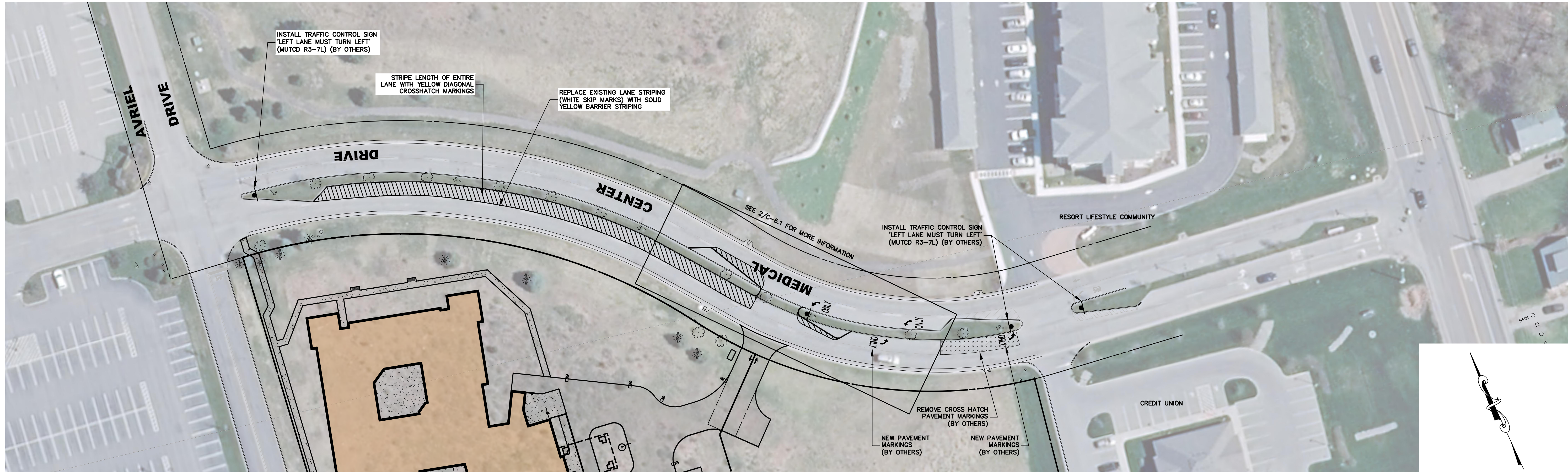
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|              |                               |  |          |                |      |
| B            | SITE PLAN AMENDMENT SUBMITTAL |  | 01/12/23 |                |      |
| A            | PLANNING BOARD SUBMITAL       |  | 10/13/22 |                |      |
| NO.          |                               |  |          | REVISION/ISSUE | DATE |

**PREPARED BY:**

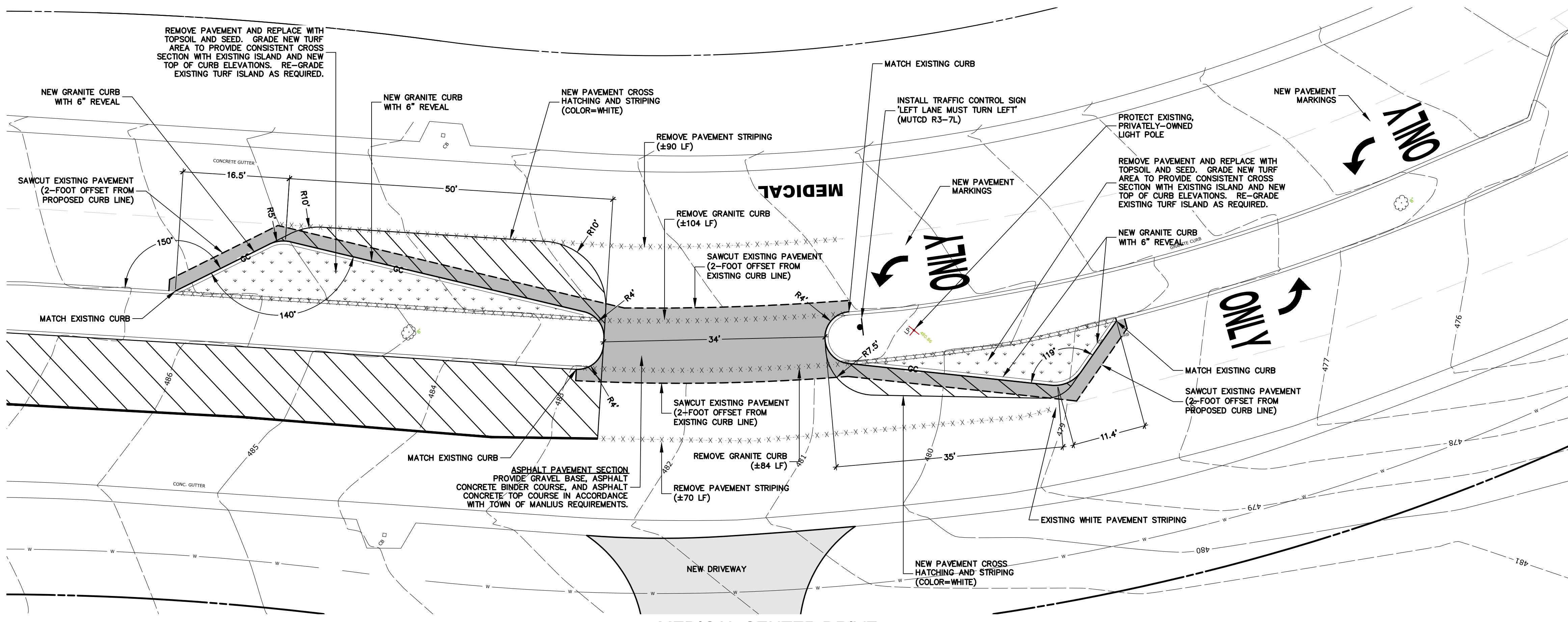
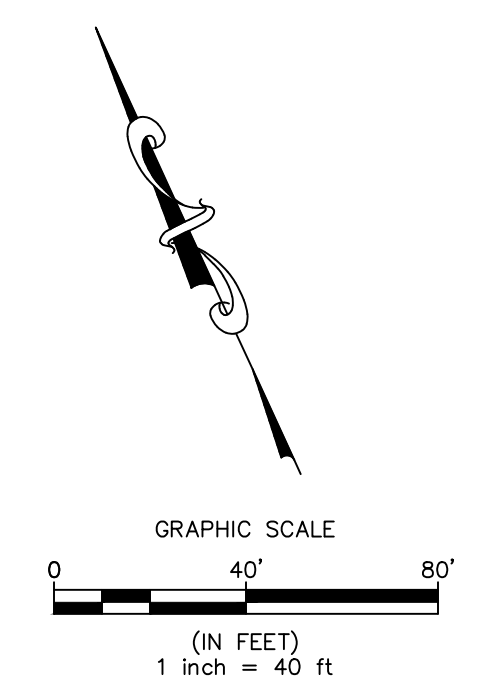
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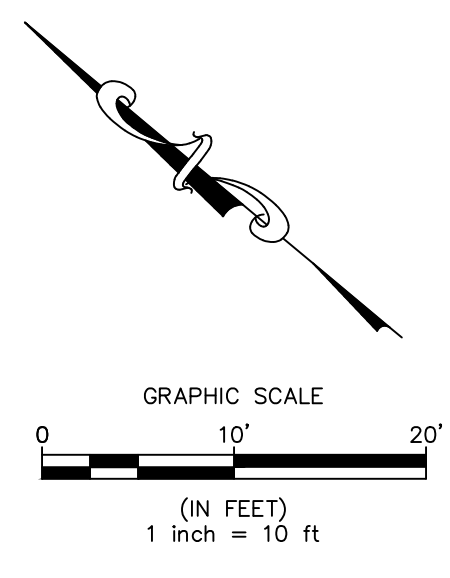
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| <b>C-6</b>               | <b>SHEET</b>                  |
|                          | PROJECT NO.<br><b>22-2099</b> |
|                          | DATE<br><b>15 AUG 2022</b>    |
| SCALE<br><b>1" = 30'</b> |                               |



1  
C-6.1  
MEDICAL CENTER DRIVE  
IMPROVEMENTS PLAN  
SCALE: 1"=40'



2  
C-6.1  
MEDICAL CENTER DRIVE  
IMPROVEMENTS PLAN DETAIL  
SCALE: 1"=10'



PROJECT TITLE: PEREGRINE SENIOR LIVING MEDICAL CENTER DRIVE  
TOWN OF MANLIUS ONONDAGA COUNTY, NY  
PREPARED FOR: PEREGRINE DEVELOPMENT, LLC.  
217 MONTGOMERY STREET SYRACUSE, NY 13202

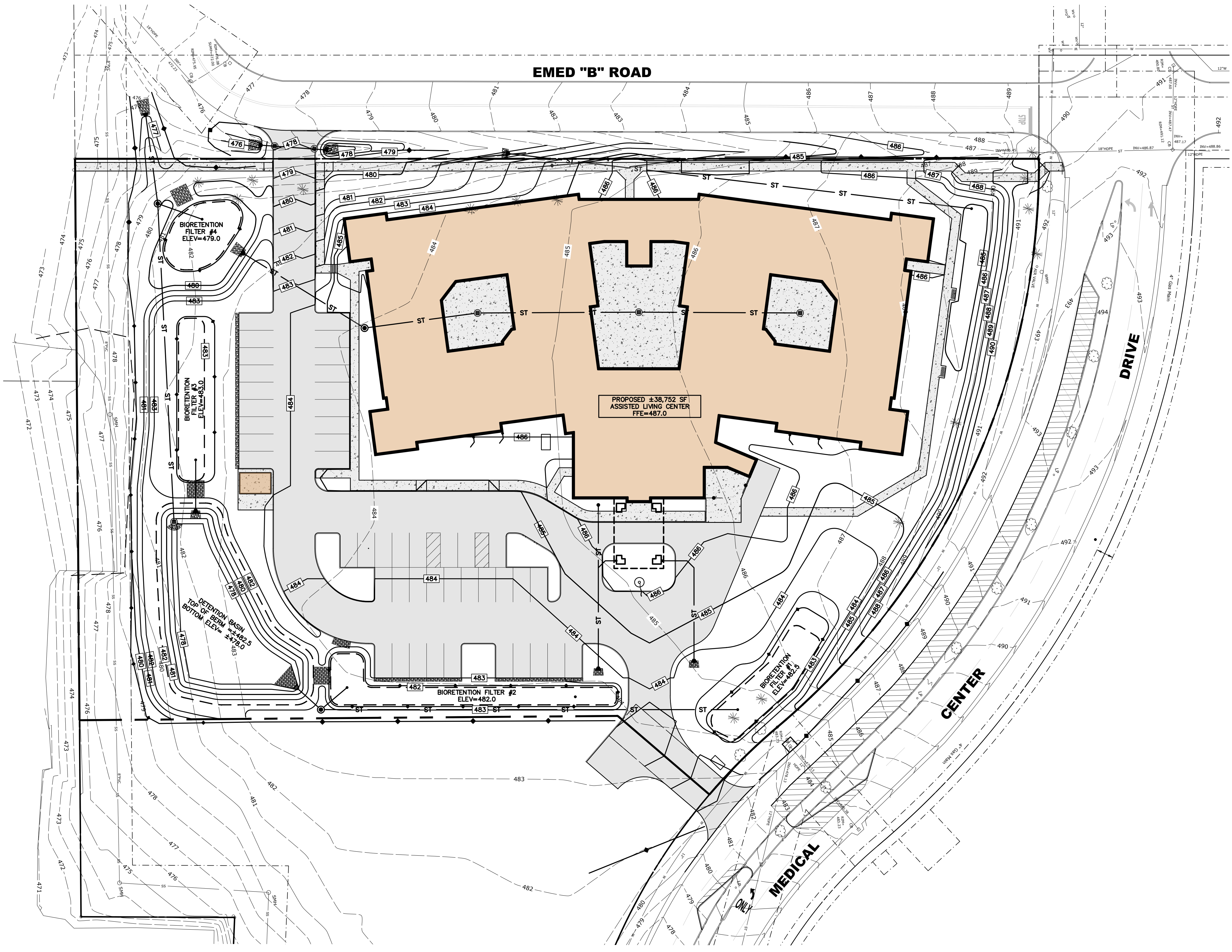
SHEET TITLE: OFFSITE IMPROVEMENT PLAN

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

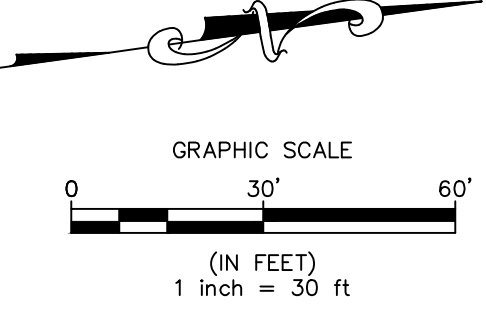
PREPARED BY: NAPIERALA CONSULTING PROFESSIONAL ENGINEER, P.C.  
110 FAYETTE STREET  
MANLIUS, NEW YORK 13104  
email: MN.AP@NAPCON.COM  
PH: (315) 682-5580 FAX: (315) 682-5544

PRELIMINARY  
NOT FOR CONSTRUCTION  
PLAN SEAL BY: P.E.  
PROJ. REGISTRATION # 07842

DATE: 25 AUG 2022  
SCALE: AS SHOWN  
SHEET: C-6.1



- GRADING LEGEND**
- 458 — EXISTING CONTOUR GRADES
  - 459 — PROPOSED CONTOUR GRADES
  - MEE MATCH/MEET EXISTING ELEVATION
  - ST — PROPOSED STORM PIPE
  - PROPOSED BIORETENTION AREA
  - PROPOSED CATCH BASIN
  - PROPOSED DRAINAGE MANHOLE



**PRELIMINARY**  
**NOT FOR CONSTRUCTION**

PLAN SEAL BY:  
PROFESSIONAL ENGINEER, P.E.  
NYS REGISTRATION # 07842

PROJECT TITLE:  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**

TOWN OF MANLIUS  
ONONDAGA COUNTY, NY

PREPARED FOR:  
**PEREGRINE DEVELOPMENT, LLC.**

217 MONTGOMERY STREET  
SYRACUSE, NY 13202

**GRADING AND  
DRAINAGE PLAN**

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

PREPARED BY:  
**NAPIERALA  
CONSULTING**  
PROFESSIONAL ENGINEER, P.C.

SITE: • DESIGN • ENGINEERING  
110 FAYETTE STREET  
MANLIUS, NEW YORK 13104

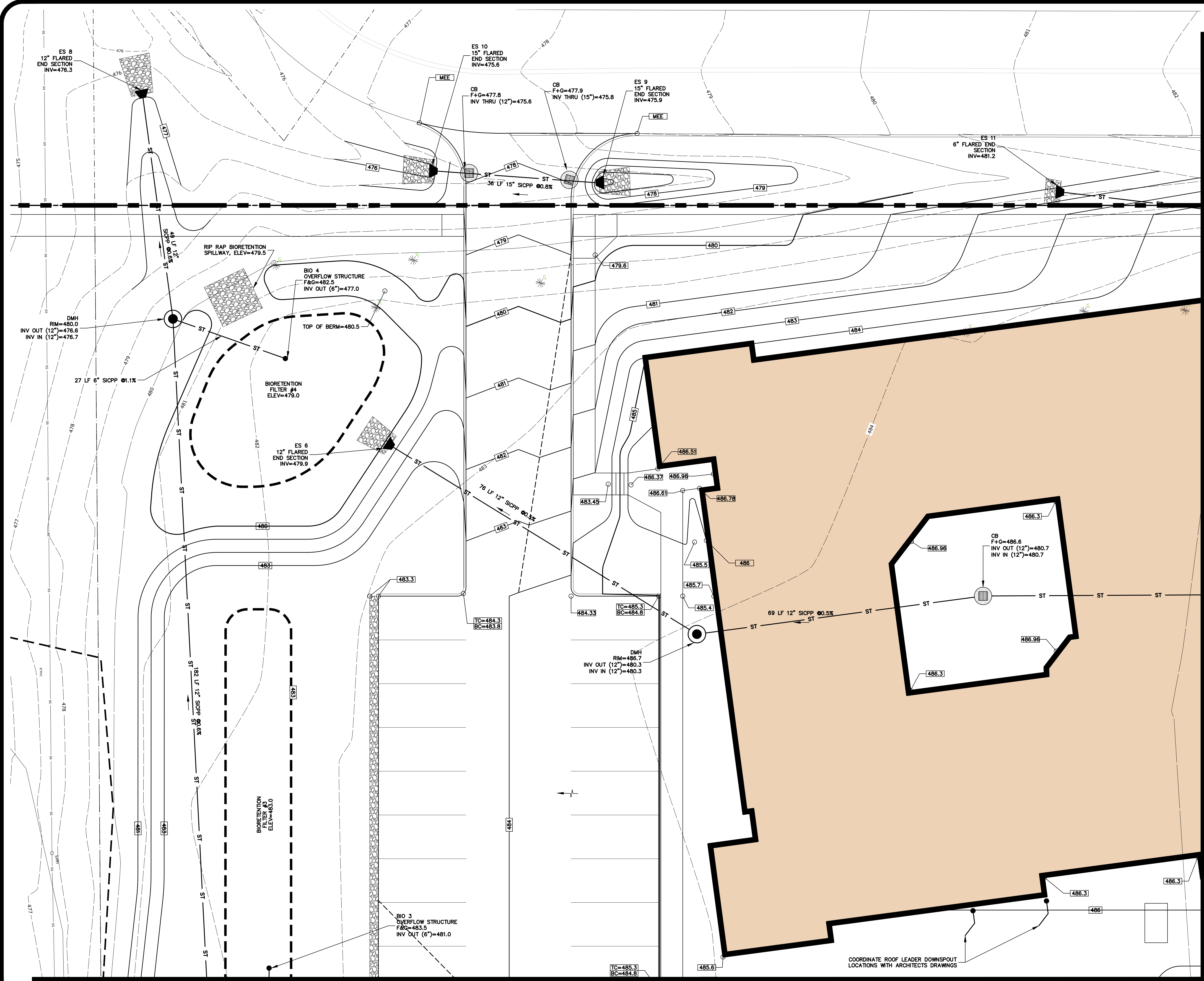
email: MNAP@NAPCON.COM  
PH: (315) 682-5580 FAX: (315) 682-5544

SHEET  
**C-7**

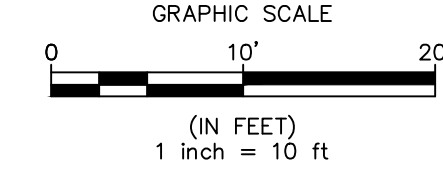
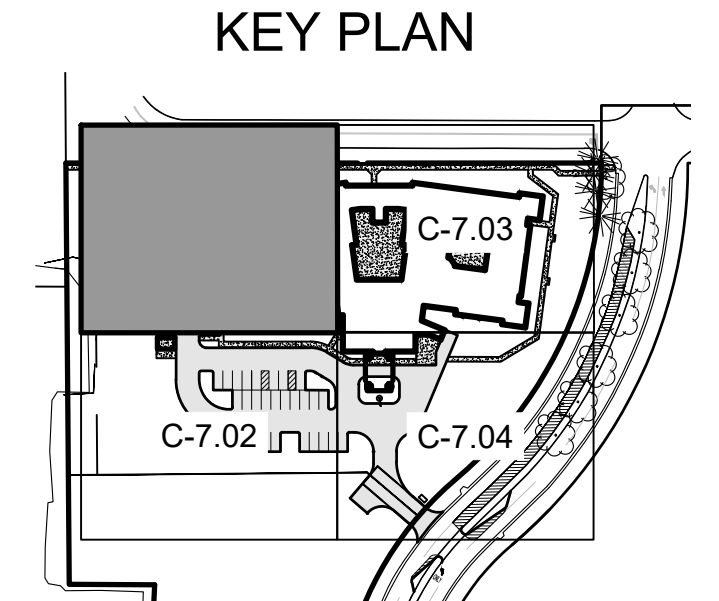
PROJECT NO.  
**22-2099**

DATE  
**25 AUG 2022**

SCALE  
**1" = 30'**



- GRADING LEGEND**
- 458 — EXISTING CONTOUR GRADES
  - 459 — PROPOSED CONTOUR GRADES
  - 459.8 — PROPOSED FINISHED SPOT ELEVATION
  - TC=459.8 BC=459.3 PROPOSED TOP OF CURB AND BOTTOM OF CURB ELEVATIONS
  - MEE MATCH/MEET EXISTING ELEVATION
  - ST PROPOSED STORM PIPE
  - PROPOSED BIORETENTION AREA
  - PROPOSED CATCH BASIN
  - PROPOSED DRAINAGE MANHOLE



**PRELIMINARY**  
**NOT FOR CONSTRUCTION**

PLAN SEAL BY:  
PROFESSIONAL ENGINEER, P.E.  
NYS REGISTRATION # 07842

PROJECT TITLE: **PEREGRINE SENIOR LIVING MEDICAL CENTER DRIVE**  
TOWN OF MANLIUS  
ONONDAGA COUNTY, NY  
PREPARED FOR: **PEREGRINE DEVELOPMENT, LLC.**  
217 MONTGOMERY STREET  
SYRACUSE, NY 13202

**GRADING AND DRAINAGE PLAN**

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

PREPARED BY: **NAPIERALA CONSULTING**  
PROFESSIONAL ENGINEER, P.C.  
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MANLIUS, NEW YORK 13104  
email: MN.AP@NAPCON.COM  
PHONE: (315) 682-5580 FAX: (315) 682-5544

PROJECT NO. **22-2099**  
DATE **25 AUG 2022**  
SCALE **1" = 10'**

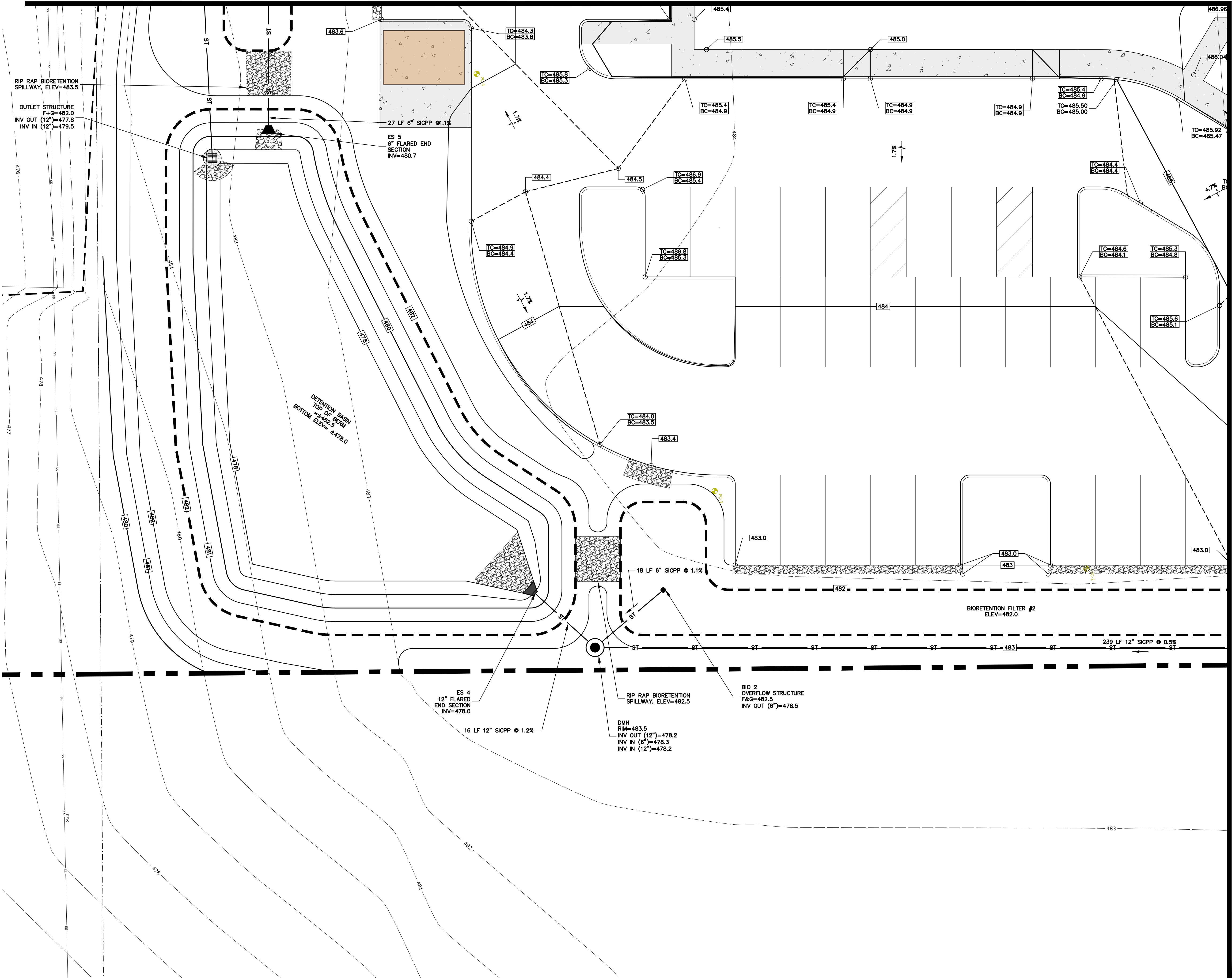
**C-7.01**

MATCH LINE - SEE SHEET C-7.02

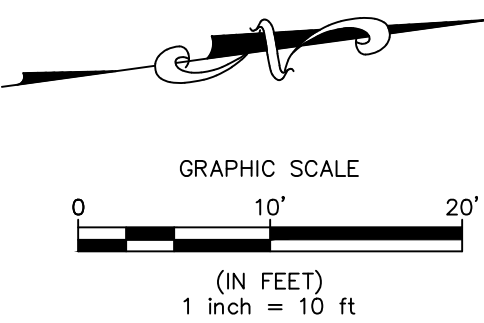
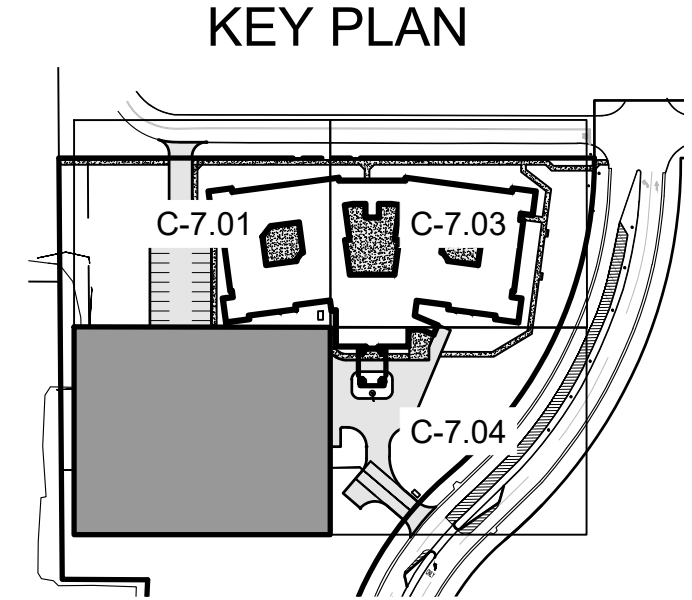
MATCH LINE - SEE SHEET C-7.03

COORDINATE ROOF LEADER DOWNSPOUT LOCATIONS WITH ARCHITECTS DRAWINGS

MATCH LINE - SEE SHEET C-7.01



- GRADING LEGEND**
- 458 — EXISTING CONTOUR GRADES
  - 459 — PROPOSED CONTOUR GRADES
  - 459.8 PROPOSED FINISHED SPOT ELEVATION
  - TC=459.8 BC=459.3 PROPOSED TOP OF CURB AND BOTTOM OF CURB ELEVATIONS
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  - PROPOSED BIORETENTION AREA
  - PROPOSED CATCH BASIN
  - PROPOSED DRAINAGE MANHOLE



**PRELIMINARY**  
**NOT FOR CONSTRUCTION**

**PROJECT NO.** 22-2099  
**DATE** 25 AUG 2022  
**SCALE** 1" = 10'

**PROJECT TITLE:** PEREGRINE SENIOR LIVING MEDICAL CENTER DRIVE  
**TOWN OF MANLIUS** ONONDAGA COUNTY, NY  
**PREPARED FOR:** PEREGRINE DEVELOPMENT, LLC.  
217 MONTGOMERY STREET  
SYRACUSE, NY 13202

**SHEET TITLE:** GRADING AND DRAINAGE PLAN

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

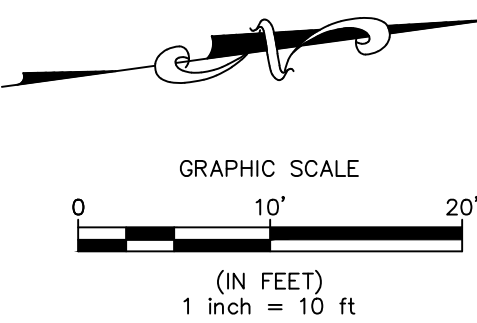
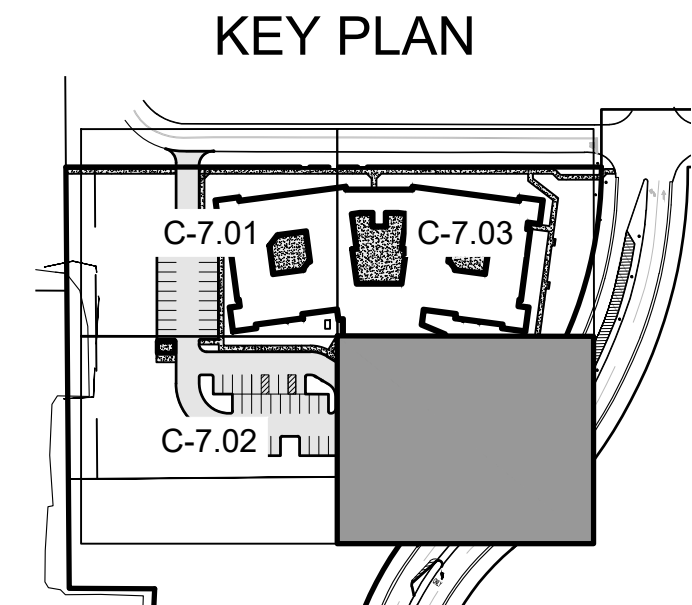
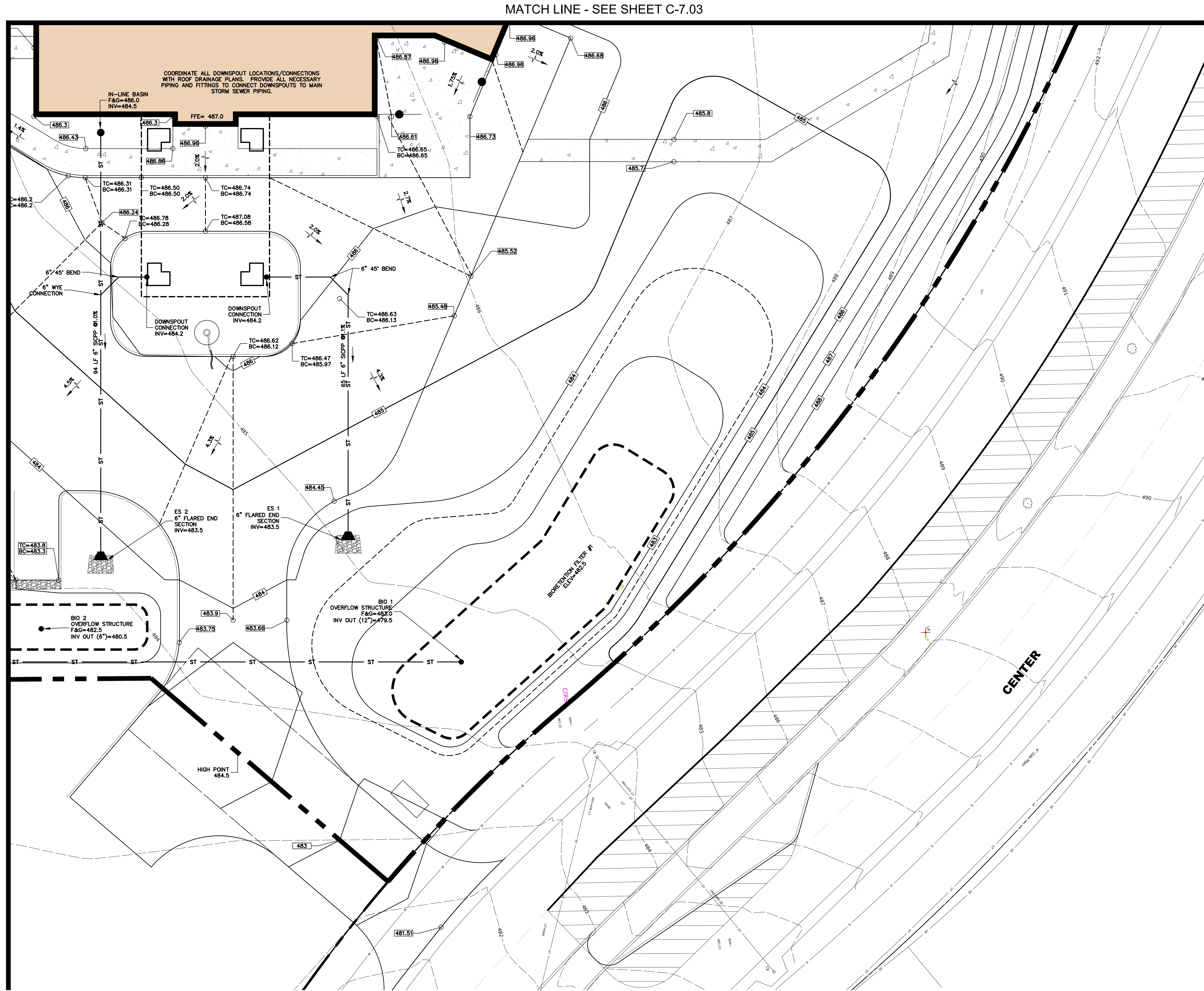
**PREPARED BY:** NAPIERALA CONSULTING  
PROFESSIONAL ENGINEER, P.C.  
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MANLIUS, NEW YORK 13104  
email: MNAP@NAPCON.COM  
PH: (315) 682-5580 FAX: (315) 682-5544

**PROJECT NO.** 22-2099  
**DATE** 25 AUG 2022  
**SCALE** 1" = 10'

**C-7.02**



MATCH LINE - SEE SHEET C-7.02



- GRADING LEGEND
- 458 — EXISTING CONTOUR GRADES
  - 459 — PROPOSED CONTOUR GRADES
  - 459.8 — PROPOSED FINISHED SPOT ELEVATION
  - TC=459.8  
BC=459.3 PROPOSED TOP OF CURB AND BOTTOM OF CURB ELEVATIONS
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  - PROPOSED CATCH BASIN
  - PROPOSED DRAINAGE MANHOLE

PROJECT TITLE: PEREGRINE SENIOR LIVING MEDICAL CENTER DRIVE

TOWN OF MANLIUS ONONDAGA COUNTY, NY

PREPARED FOR: PEREGRINE DEVELOPMENT, LLC.

217 MONTGOMERY STREET SYRACUSE, NY 13202

SHEET TITLE: GRADING AND DRAINAGE PLAN

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

PREPARED BY: NAPIERALA CONSULTING PROFESSIONAL ENGINEER, P.C.

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email: MNAP@NAPCON.COM

PH: (315) 682-5580 FAX: (315) 682-5544

PRELIMINARY NOT FOR CONSTRUCTION

PROJECT NO. 22-2099

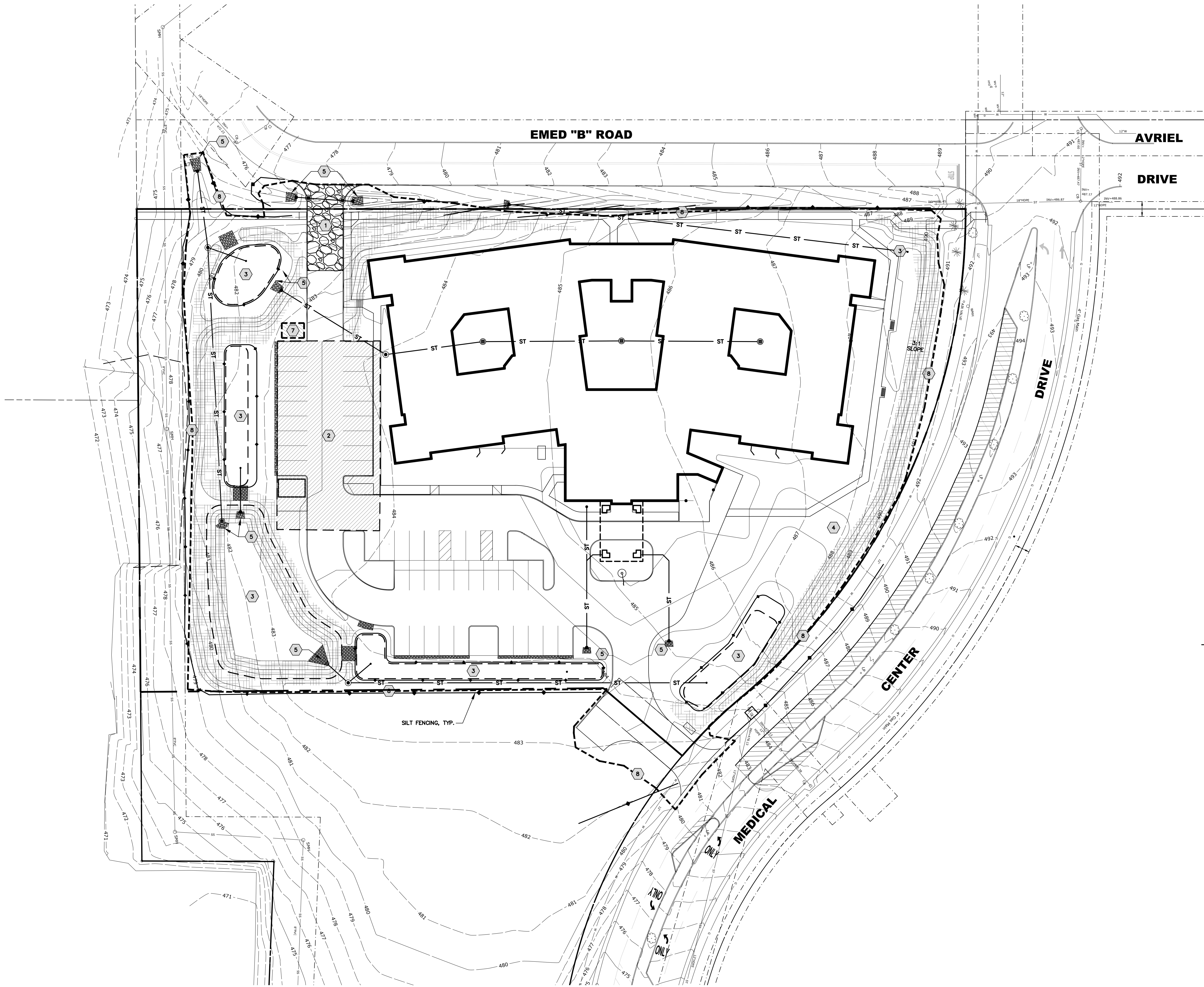
DATE 25 AUG 2022

SCALE 1" = 10'

PLAN SEAL BY: PROFESSIONAL ENGINEER, P.C.

NY'S REGISTRATION # 07842

SHEET C-7.04



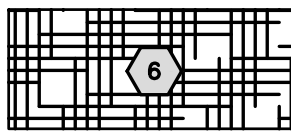
ESC PLAN  
KEYED NOTES:

- 1 STABILIZED CONSTRUCTION ACCESS
- 2 STABILIZED STAGING AREA
  - A. CONSTRUCTION TRAILERS
  - B. PORTABLE TOILETS
  - C. DUMPSTERS
  - D. PARKING
- 3 TEMPORARY SEDIMENT TRAP
- 4 GRASS-LINED CHANNEL (PERMANENT)
- 5 ROCK RIPRAP OUTLET PROTECTION
- 6 ANCHORED STABILIZATION MATTING
- 7 CONCRETE TRUCK WASHOUT
- 8 LIMIT OF DISTURBANCE

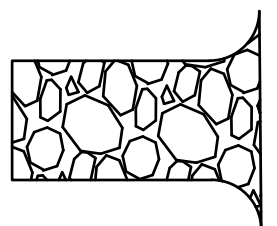
SEQUENCE OF MAJOR SITE WORK ACTIVITIES

1. INSTALL STABILIZED CONSTRUCTION ACCESS
2. INSTALL SILT FENCE
3. INSTALL STABILIZED STAGING AREA
4. EXCAVATE TEMPORARY SEDIMENT TRAPS
5. MASS GRADING (CUT AND FILL)
6. BUILDING FOUNDATION EXCAVATION
7. PARKING LOT GRADING AND STABILIZATION
8. UTILITY INSTALLATIONS
9. CONCRETE SITE WORK
10. PAVING
11. FINAL GRADING, TOPSOILING, AND SEEDING
12. SEDIMENT AND DEBRIS WITHIN TEMPORARY SEDIMENT TRAPS TO BE REMOVED PRIOR TO INSTALLATION OF BIORETENTION
13. CONSTRUCTION OF BIORETENTION FILTERS
14. REMOVAL OF ALL SILT FENCE, INCLUDING SILT FENCE SURROUNDING BIORETENTION AREAS, TO OCCUR ONLY AFTER STABILIZATION HAS BEEN ACHIEVED

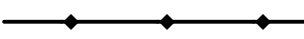
BIORETENTION FILTERS ARE TO BE ROUGH GRADED/EXCAVATED AND USED AS TEMPORARY SEDIMENT TRAPS. FINAL CONSTRUCTION (IE, PLACEMENT OF DRAINAGE LAYER, PLANTING SOIL MEDIA, MULCH, AND PLANTINGS) TO BE COMPLETED ONLY UPON STABILIZATION OF UPSTREAM AREAS.



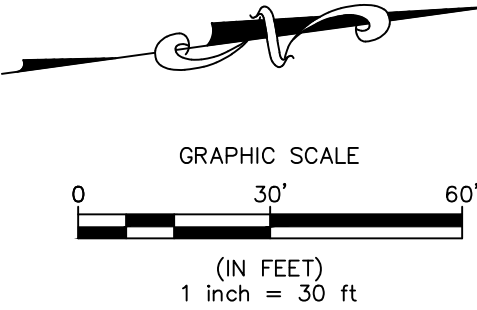
ANCHORED STABILIZATION MATTING



STABILIZED CONSTRUCTION ENTRANCE/EXIT



SILT FENCE



PRELIMINARY  
NOT FOR CONSTRUCTION

PLAN SEAL BY:  
PROFESSIONAL ENGINEER P.C.  
NYS REGISTRATION # 07842

PROJECT TITLE:  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**  
TOWN OF MANLIUS  
ONONDAGA COUNTY, NY  
PREPARED FOR:  
PEREGRINE DEVELOPMENT, LLC.  
217 MONTGOMERY STREET  
SYRACUSE, NY 13202

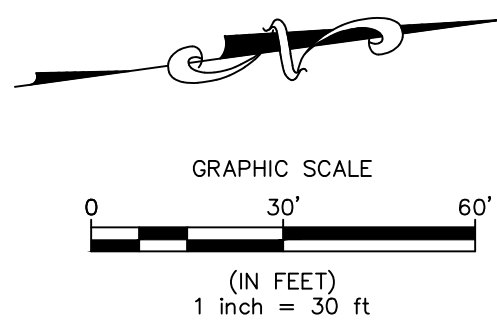
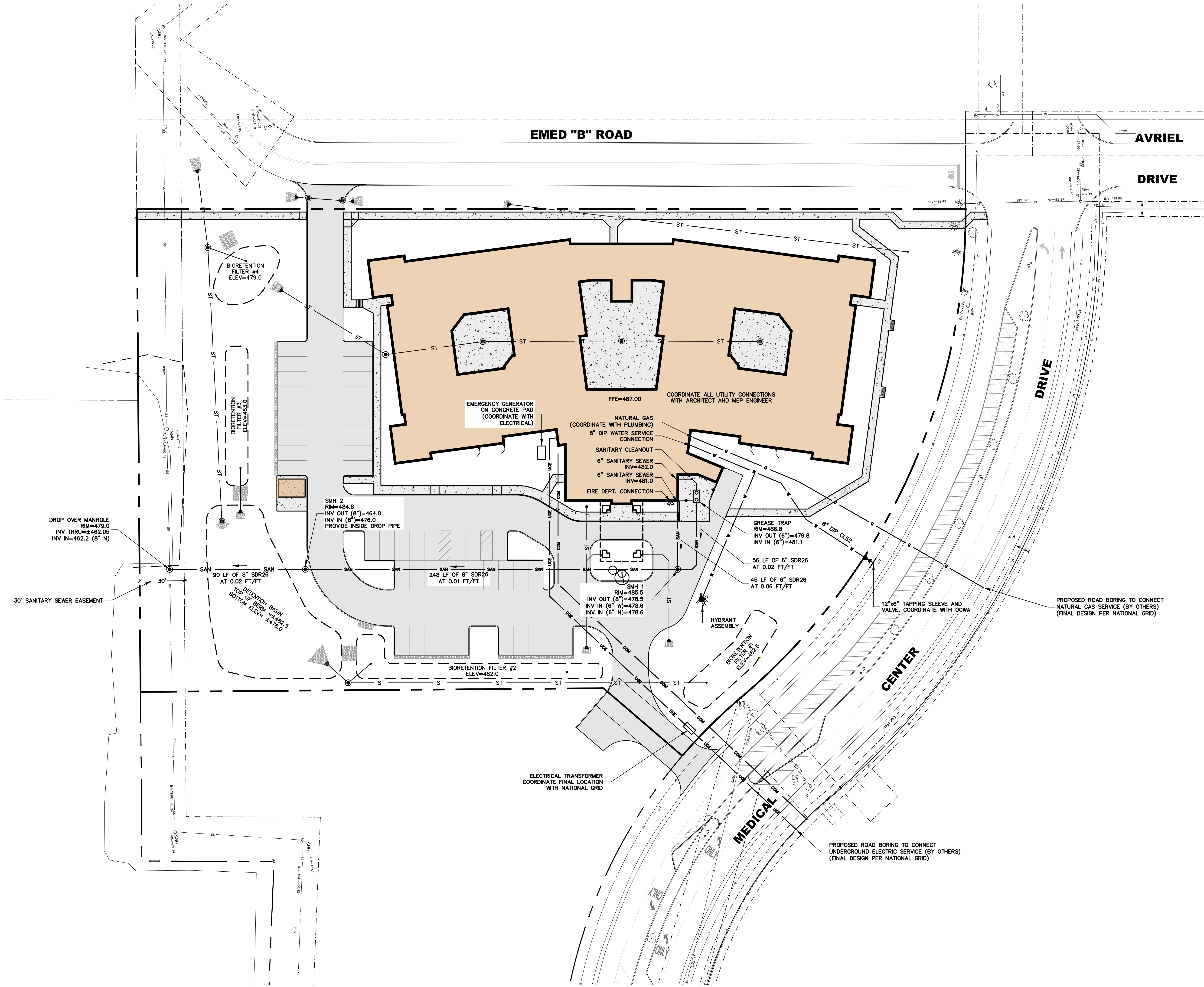
SHEET TITLE:  
**EROSION AND SEDIMENT  
CONTROL PLAN**

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

PREPARED BY:  
**NAPIERALA  
CONSULTING**  
PROFESSIONAL ENGINEER P.C.  
SOUTH • DESIGN • ENGINEERING  
110 FAYETTE STREET  
MANLIUS, NEW YORK 13104  
email: MNAP@NAPCON.COM  
PH: (315) 682-5580 FAX: (315) 682-5544

PROJECT NO.  
**22-2099**  
DATE  
**25 AUG 2022**  
SCALE  
**1" = 30'**

SHEET  
**C-8**



**PRELIMINARY  
NOT FOR CONSTRUCTION**

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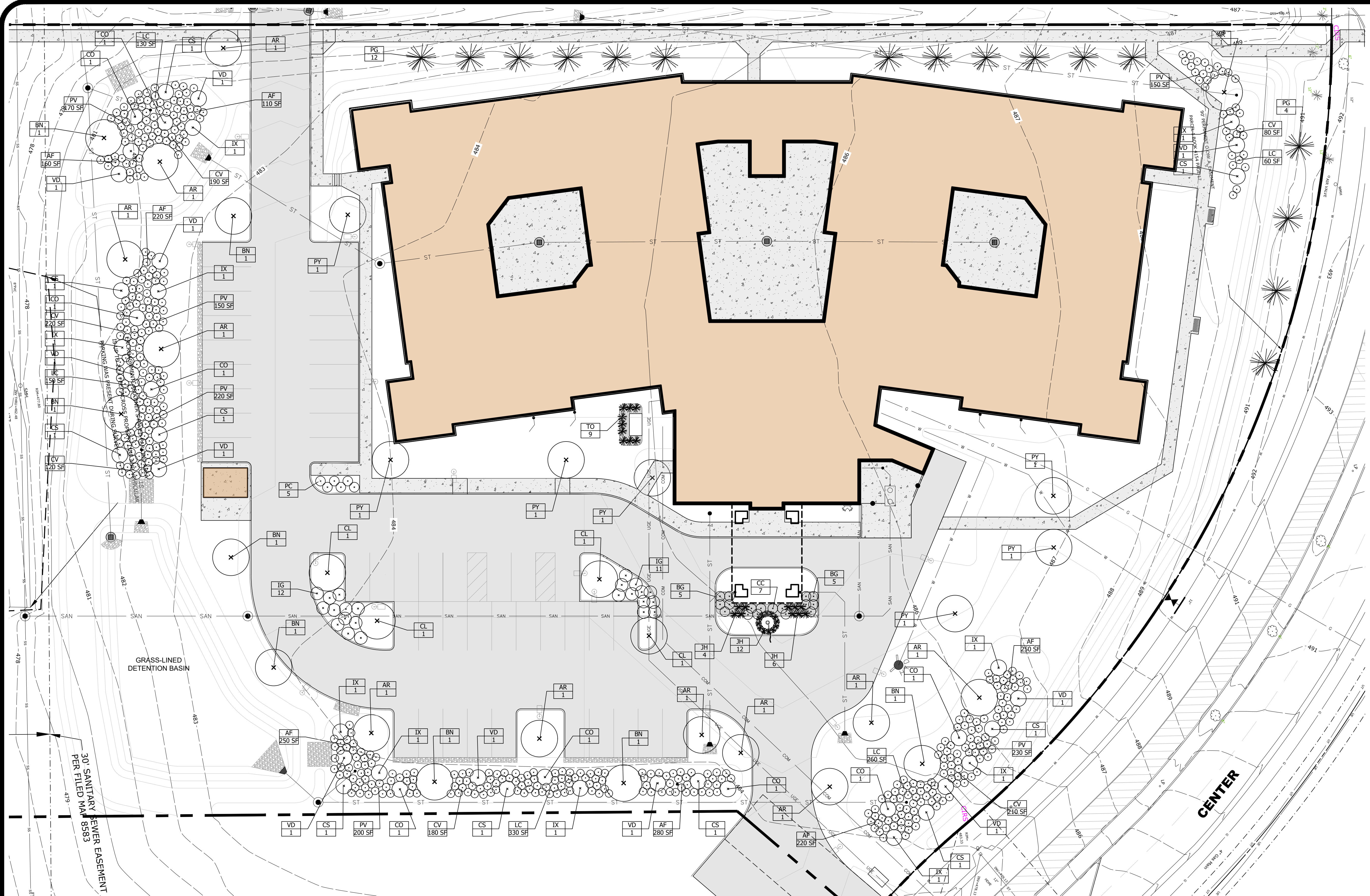
|       |             |
|-------|-------------|
| SHEET | 22-2099     |
| DATE  | 25 AUG 2022 |
| SCALE | 1" = 30'    |

**NAPIERALA CONSULTING ENGINEERING, P.C.**  
PROFESSIONAL ENGINEER, P.C.  
SOUTH • DESIGN • ENGINEERING  
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| NO. | REVISION/ISSUE                | DATE     |
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| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
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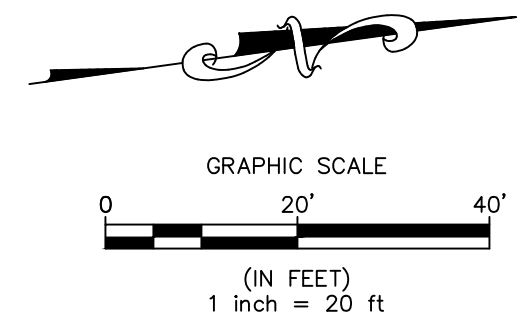
SHEET TITLE:  
**UTILITY PLAN**

PROJECT TITLE:  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**  
TOWN OF MANLIUS  
ONONDAGA COUNTY, NY  
PREPARED FOR:  
PEREGRINE DEVELOPMENT, LLC.  
217 MONTGOMERY STREET  
SYRACUSE, NY 13202



| LANDSCAPE LEGEND |          |                                |                          |         |          |        |
|------------------|----------|--------------------------------|--------------------------|---------|----------|--------|
| KEY              | QUANTITY | LATIN NAME                     | COMMON NAME              | CONT    | SIZE/CAL | HEIGHT |
| DECIDUOUS TREES  |          |                                |                          |         |          |        |
| AR               | 12       | Acer rubrum                    | RED MAPLE                | B&B     | 2" CAL   |        |
| BN               | 8        | Betula nigra                   | RIVER BIRCH              | B&B     | 2" CAL   |        |
| CL               | 4        | Celtis occidentalis            | COMMON HACKBERRY         | B&B     | 2" CAL   |        |
| PY               | 7        | Pyrus calleryana 'aristocrata' | ARISTOCRAT PEAR          | B&B     | 2" CAL   |        |
| EVERGREEN TREES  |          |                                |                          |         |          |        |
| PG               | 16       | Picea glauca                   | WHITE SPRUCE             | B&B     |          | 6'     |
| TO               | 9        | Thuja occidentalis 'nigra'     | DARK AMERICAN ARBORVITAE | B&B     |          | 6'     |
| GRASSES/FERNS    |          |                                |                          |         |          |        |
| AF               | 1,490 SF | Athyrium filix-femina          | COMMON LADY-FERN #1      | CONT    | 24" OC   |        |
| CV               | 920 SF   | Carex vulpinoidea              | FOX SEDGE                | #1 CONT | 24" OC   |        |
| PV               | 970 SF   | Panicum virgatum               | SWITCH GRASS             | #1 CONT | 24" OC   |        |
| LC               | 870 SF   | Lotus corniculatus             | BIRDSFOOT TREFOIL        | SEED    |          |        |

| LANDSCAPE LEGEND |          |                                    |                            |      |          |        |
|------------------|----------|------------------------------------|----------------------------|------|----------|--------|
| KEY              | QUANTITY | LATIN NAME                         | COMMON NAME                | CONT | SIZE/CAL | HEIGHT |
| SHRUBS           |          |                                    |                            |      |          |        |
| BG               | 26       | Buxus 'wintergen'                  | WINTERGEM BOXWOOD          | CONT | #3       |        |
| CC               | 48       | Caryopteris x clandonensis         | BLUE MIST BLUEBEARD        | CONT | #3       |        |
| CO               | 14       | Cephalanthus Occidentalis          | BUTTONBUSH                 | CONT | #3       |        |
| CS               | 14       | Cornus sericea                     | REDOSIER DOGWOOD           | CONT | #3       |        |
| IG               | 13       | Ilex glabra compacta               | COMPACT INKBERRY           | CONT | #5       |        |
| IX               | 11       | Ilex verticillata                  | COMMON WINTERBERRY         | CONT | #3       |        |
| JH               | 13       | Juniperus horizontalis 'blue chip' | BLUE CHIP CREEPING JUNIPER | CONT | #2       |        |
| PC               | 18       | Prunus x cistena                   | RED LEAF SANDCHEERY        | CONT | #3       |        |
| VD               | 12       | Viburnum dentatum                  | ARROWWOOD VIBURNUM         | CONT | #5       |        |



PRELIMINARY  
NOT FOR CONSTRUCTION

PROJECT NO. 22-2099  
DATE 25 AUG 2022  
SCALE 1" = 20'

PROJECT TITLE:  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**

TOWN OF MANLIUS  
ONONDAGA COUNTY, NY

PREPARED FOR:  
**PEREGRINE DEVELOPMENT, LLC.**

217 MONTGOMERY STREET  
SYRACUSE, NY 13202

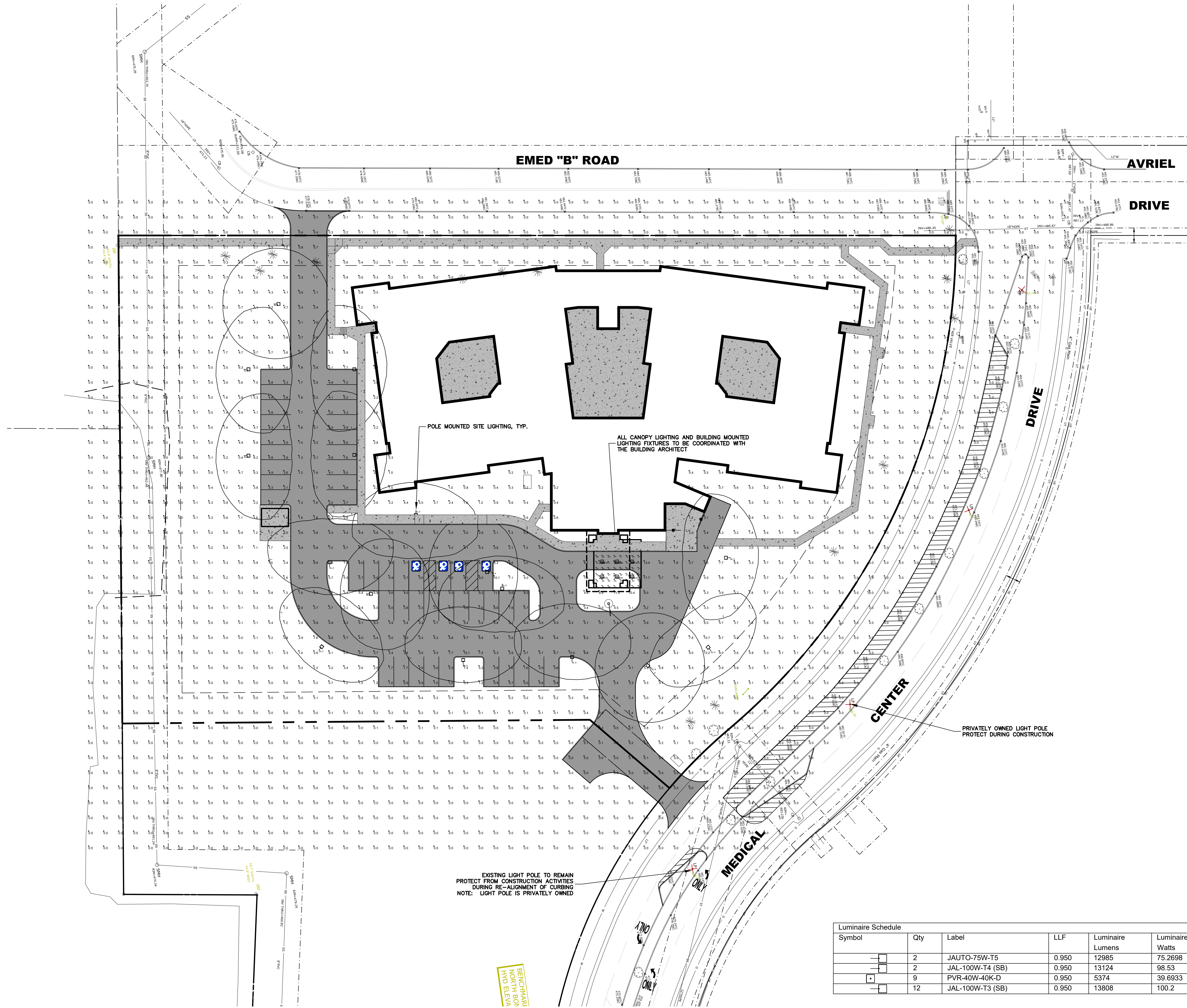
LANDSCAPE PLAN

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

PREPARED BY:  
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PROJECT NO. 22-2099  
DATE 25 AUG 2022  
SCALE 1" = 20'

**C-10**

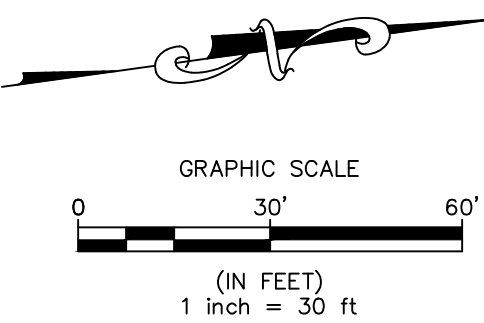


Under Main Entry Canopy  
Calc. Points at grade level  
Illuminance (Fc)  
Average = 23.51  
Maximum = 32.0  
Minimum = 11.0  
Avg/Min Ratio = 2.14  
Max/Min Ratio = 2.91

Parking Spaces and Drive Lanes  
Calc. Points at grade  
Illuminance (Fc)  
Average = 3.87  
Maximum = 13.4  
Minimum = 0.0  
Avg/Min Ratio = N.A.  
Max/Min Ratio = N.A.

Handicap Space  
Calc. Points at grade  
Illuminance (Fc)  
Average = 4.73  
Maximum = 9.2  
Minimum = 3.0  
Avg/Min Ratio = 1.58  
Max/Min Ratio = 3.07

| Luminaire Schedule |     |                  |       |                  |                 |             |       |
|--------------------|-----|------------------|-------|------------------|-----------------|-------------|-------|
| Symbol             | Qty | Label            | LLF   | Luminaire Lumens | Luminaire Watts | Total Watts | Tag   |
|                    | 2   | JAUTO-75W-T5     | 0.950 | 12985            | 75.2698         | 150.54      | SL-5  |
|                    | 2   | JAL-100W-T4 (SB) | 0.950 | 13124            | 98.53           | 197.06      | SL-4  |
|                    | 9   | PVR-40W-40K-D    | 0.950 | 5374             | 39.6933         | 357.24      | CP-40 |
|                    | 12  | JAL-100W-T3 (SB) | 0.950 | 13808            | 100.2           | 1202.4      | SL-3  |



PROJECT TITLE:  
**PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**

SHEET TITLE:  
**SITE LIGHTING PLAN  
PHOTOMETRIC**

PREPARED BY:  
**PEREGRINE DEVELOPMENT, LLC.**

DATE:  
**01/12/23**

NO.

REVISION/ISSUE

DATE

22-2099

25 AUG 2022

1" = 30'

DATE

SCALE

PROJECT NO.

22-2099

DATE

25 AUG 2022

SCALE

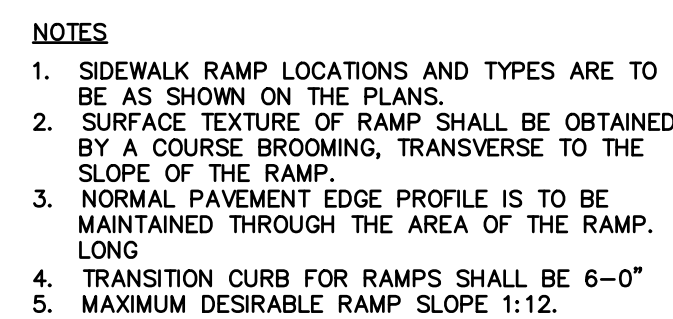
1" = 30'

PREPARED BY:  
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PH: (315) 682-5580 FAX: (315) 682-5544

**C-11**

PLAN SEAL BY:  
PROFESSIONAL ENGINEER, P.E.  
NYS REGISTRATION # 07842

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## SITE DETAILS

[illegible]

**PREPARED BY:**

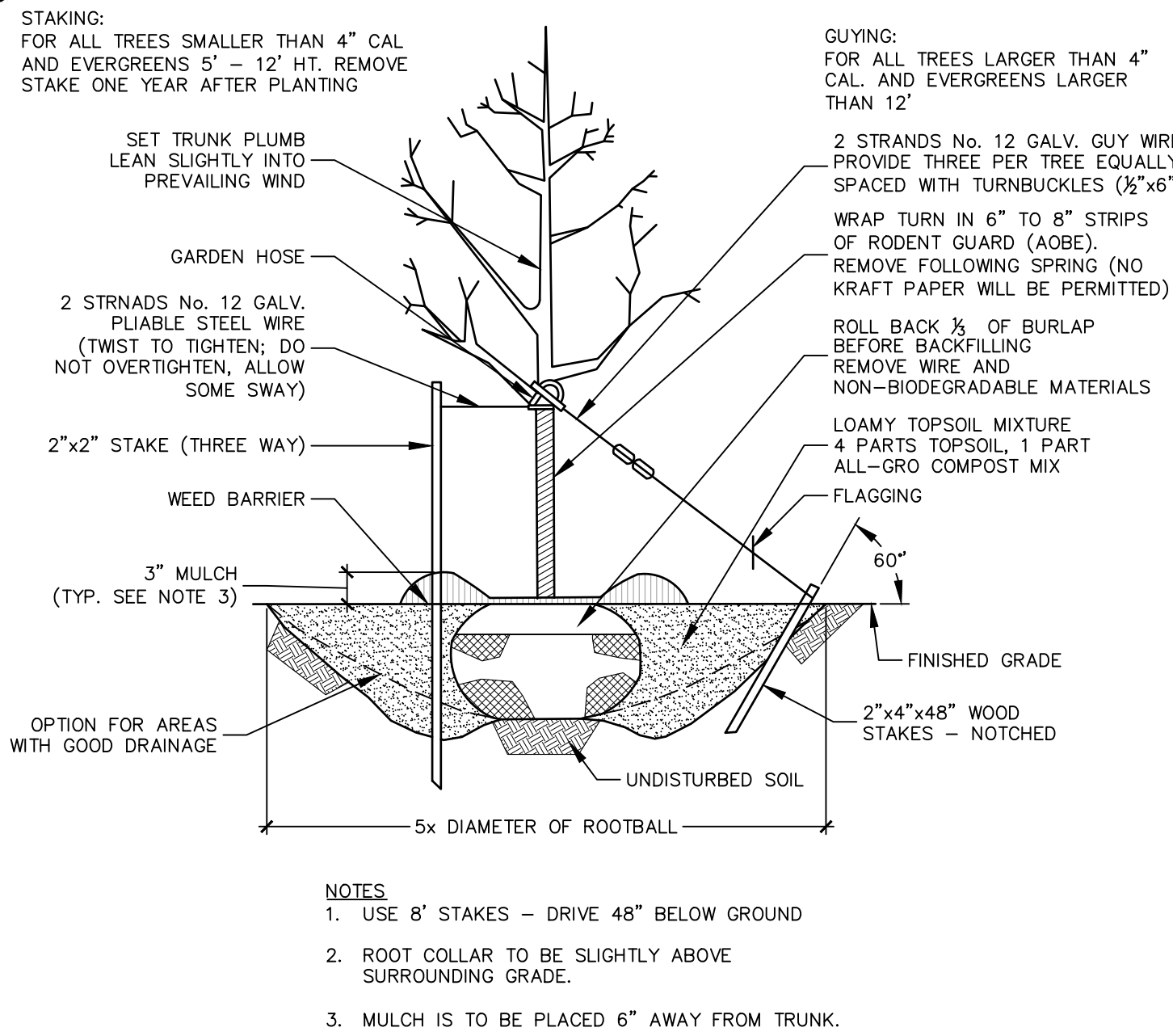
**NAPIERALA  
CONSULTING**  
PROFESSIONAL ENGINEER, P.C.  
**SITE • DESIGN • ENGINEERING**  
110 FAYETTE STREET  
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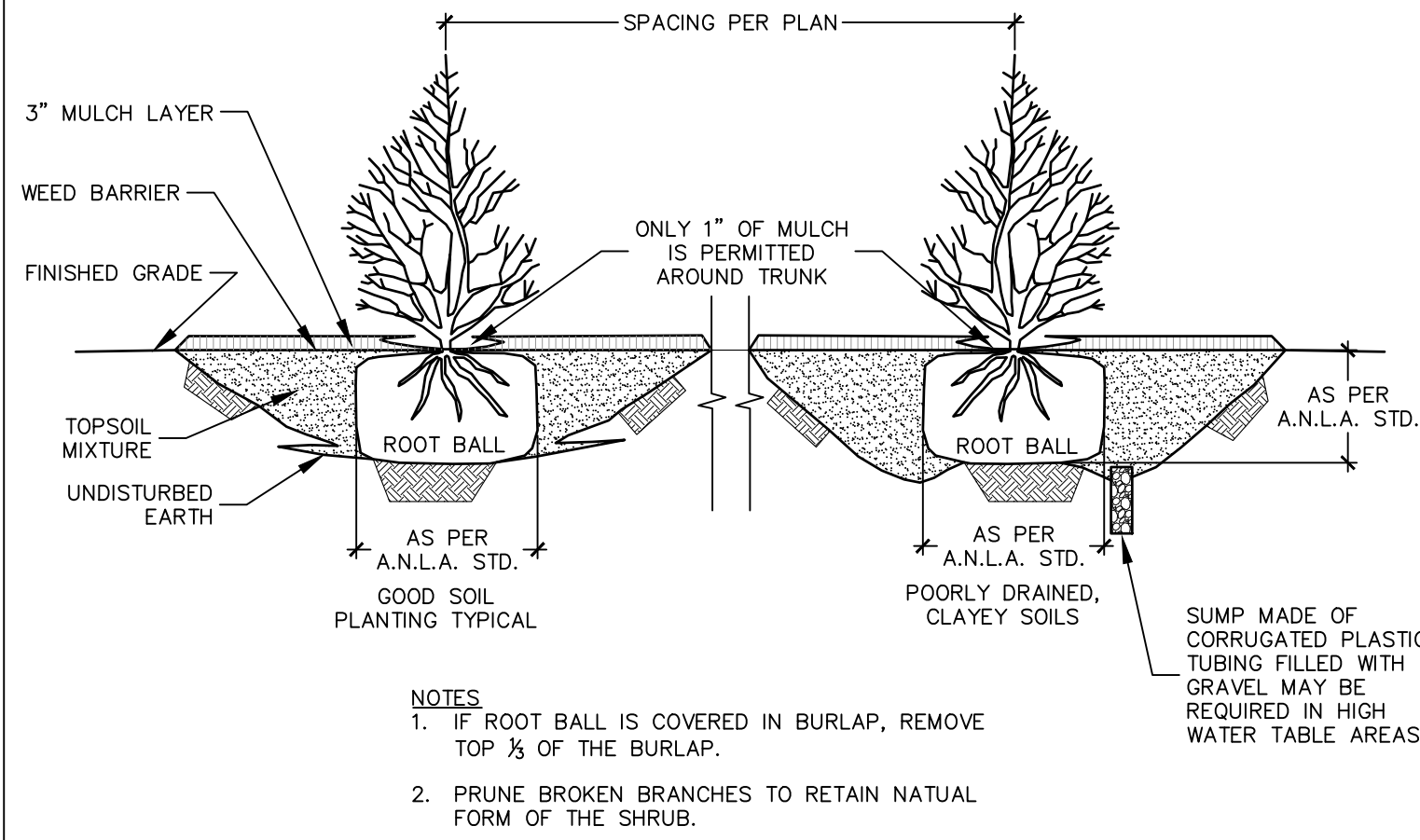
|             |             |
|-------------|-------------|
| PROJECT NO. | 22-2099     |
| DATE        | 25 AUG 2022 |
| SCALE       | AS SHOWN    |

## C-12.1

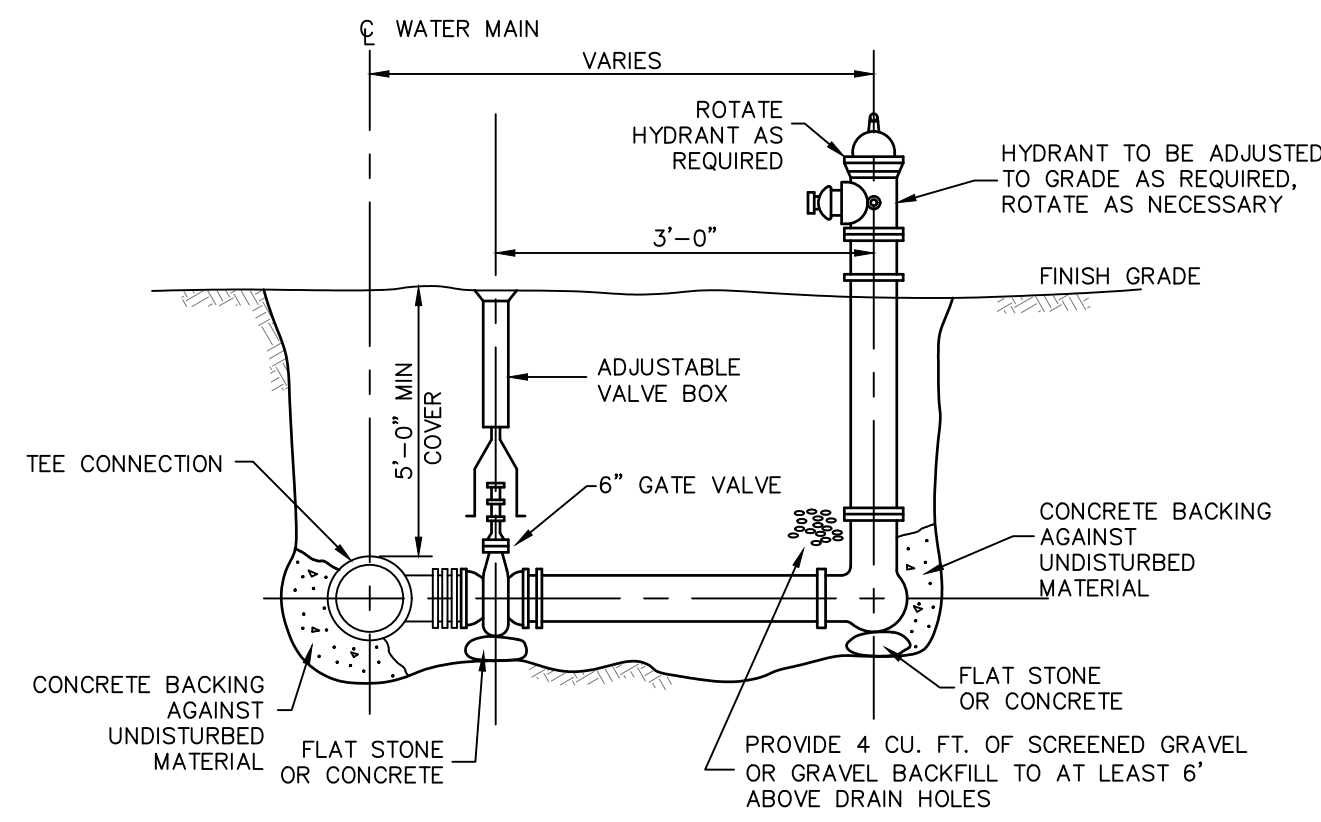
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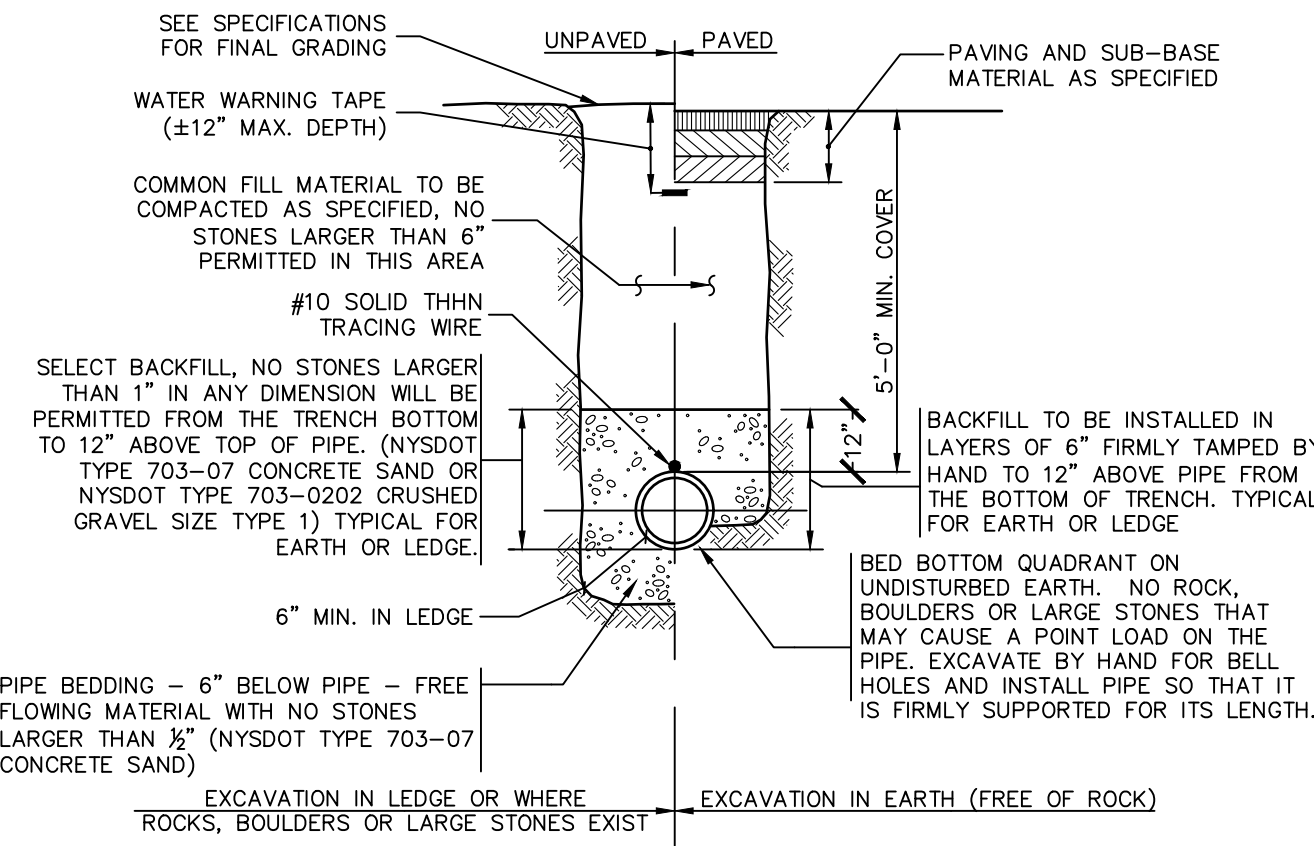
1 TREE PLANTING DETAIL  
C-12.2 SCALE: NTS



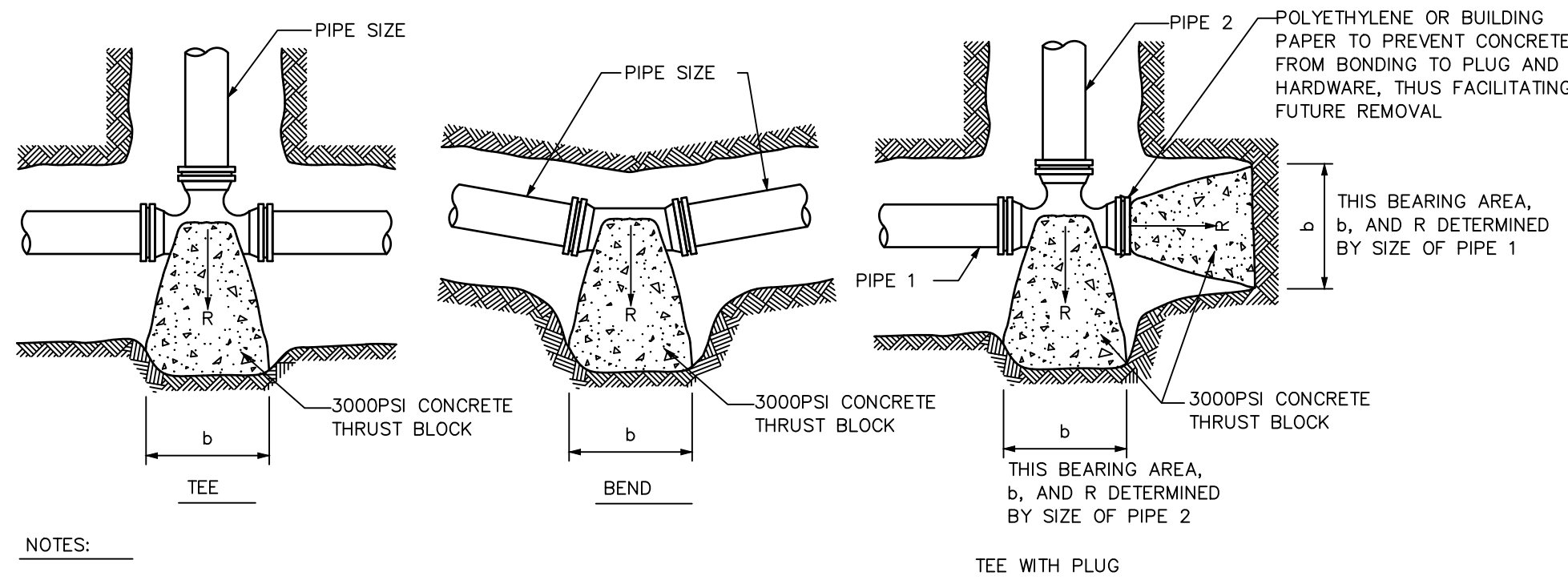
2 SHRUB PLANTING DETAIL  
C-12.2 SCALE: NTS



3 TYPICAL HYDRANT AND VALVE  
C-12.2 SCALE: NTS



5 TYPICAL WATER TRENCH DETAIL  
C-12.2 SCALE: NTS



| THRUST REACTIONS-R(LB)<br>PER 100PSI INTERNAL PRESSURE |             |             |             |                 |                 |
|--------------------------------------------------------|-------------|-------------|-------------|-----------------|-----------------|
| NOM PIPE<br>DIA IN.                                    | DEAD<br>END | 90°<br>BEND | 45°<br>BEND | 22 1/2°<br>BEND | 11 1/4°<br>BEND |
| 4                                                      | 1,810       | 2,559       | 1,385       | 706             | 355             |
| 6                                                      | 3,739       | 5,288       | 2,862       | 1,459           | 733             |
| 8                                                      | 6,433       | 9,097       | 4,923       | 2,510           | 1,261           |
| 10                                                     | 9,677       | 13,685      | 7,406       | 3,776           | 1,897           |
| 12                                                     | 13,685      | 19,353      | 10,474      | 5,340           | 2,683           |
| 14                                                     | 18,385      | 26,001      | 14,072      | 7,174           | 3,604           |
| 16                                                     | 23,779      | 33,628      | 18,199      | 9,278           | 4,661           |
| 18                                                     | 29,865      | 42,235      | 22,858      | 11,653          | 5,855           |
| 20                                                     | 36,644      | 51,822      | 28,046      | 14,298          | 7,183           |
| 24                                                     | 52,279      | 73,934      | 40,013      | 20,398          | 10,249          |
| 30                                                     | 80,425      | 113,738     | 61,554      | 31,380          | 15,766          |
| 36                                                     | 115,209     | 162,931     | 88,177      | 44,952          | 22,585          |

| REQUIRED BEARING AREAS -b (SQFT)<br>FOR BEARING BLOCKS* |       |             |             |                 |                 |
|---------------------------------------------------------|-------|-------------|-------------|-----------------|-----------------|
| PIPE SIZE<br>(INCHES)                                   | TEE   | 90°<br>BEND | 45°<br>BEND | 22 1/2°<br>BEND | 11 1/4°<br>BEND |
| 4                                                       | 2.0   | 2.8         | 1.5         | 0.8             | 0.4             |
| 6                                                       | 4.2   | 5.9         | 3.2         | 1.6             | 0.8             |
| 8                                                       | 7.2   | 10.1        | 5.5         | 2.8             | 1.4             |
| 10                                                      | 10.9  | 15.4        | 8.3         | 4.2             | 2.1             |
| 12                                                      | 15.4  | 21.8        | 11.8        | 6.0             | 3.0             |
| 14                                                      | 20.6  | 29.1        | 15.8        | 8.0             | 4.0             |
| 16                                                      | 26.8  | 37.9        | 20.5        | 10.4            | 5.2             |
| 18                                                      | 33.6  | 47.5        | 25.7        | 13.1            | 6.6             |
| 20                                                      | 41.2  | 58.2        | 31.5        | 16.1            | 8.1             |
| 24                                                      | 58.8  | 83.1        | 45.0        | 22.9            | 11.5            |
| 30                                                      | 90.5  | 128.0       | 69.2        | 35.3            | 17.7            |
| 36                                                      | 129.6 | 183.3       | 99.1        | 50.5            | 25.4            |

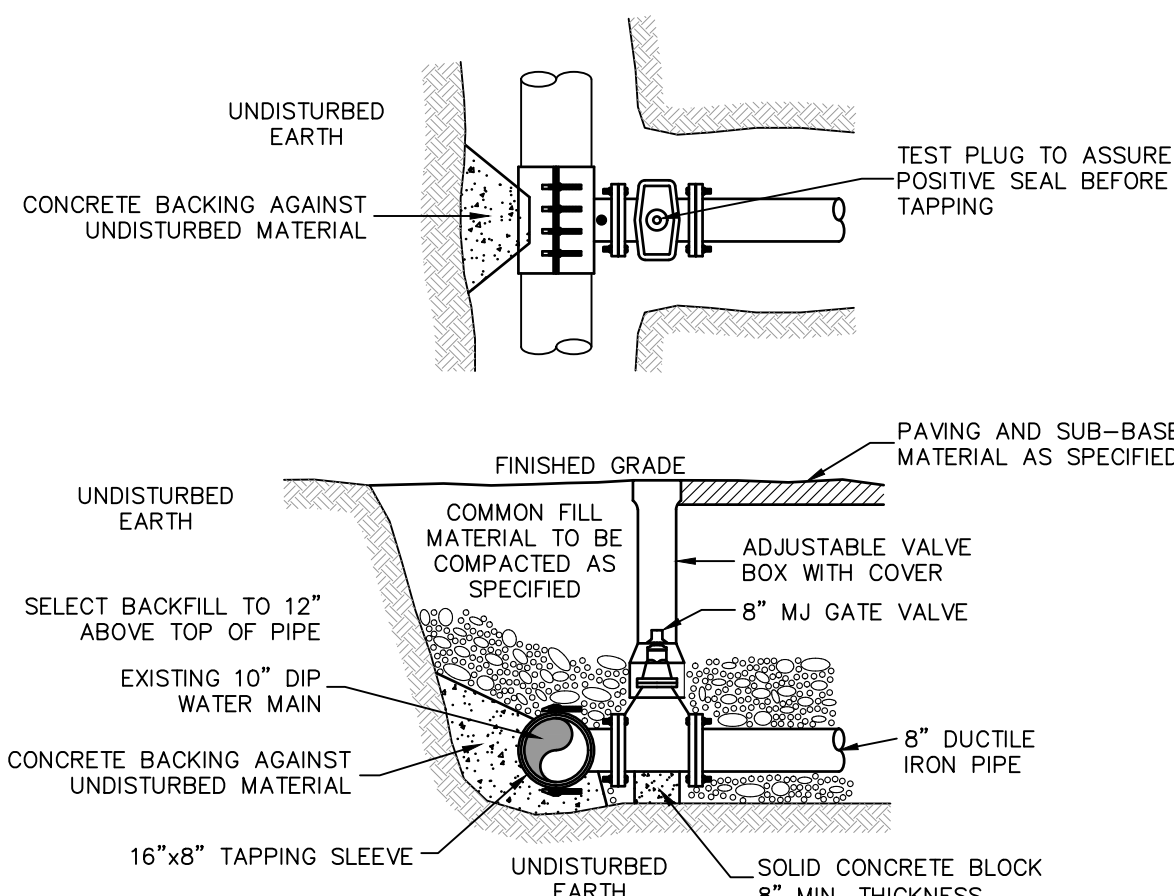
\*FACTOR OF SAFETY=1.5  
SOIL BEARING OF 3,000 PSF  
225 PSI DESIGN PRESSURE

NOTES:

- VALUES FOR TEE APPLY TO TEES, END PLUGS, CAPS, AND TAPPING SLEEVES.
- REQUIRED BEARING AREAS ARE DUE TO THRUSTS CAUSED BY 150PSI WORKING PRESSURE PLUS 50X(75 PSI) SURGE ALLOWANCE RESULTING IN 225 PSI TOTAL INTERNAL PRESSURE.
- REQUIRED BEARING AREAS ARE BASED ON ALLOWABLE SOIL BEARING CAPACITY OF 3,000 POUNDS PER SQUARE FOOT. DUE TO OTHER SOIL CONDITIONS ENCOUNTERED, BEARING AREAS MAY BE MODIFIED BY THE ENGINEER.
- IN MUCK, PEAT, OR RECENTLY PLACED FILL ALL THRUSTS SHALL BE RESISTED BY PILES OR TIE RODS TO SOLID FOUNDATIONS, OR BY REMOVAL OF SUCH UNSTABLE MATERIAL AND REPLACEMENT WITH BALLAST OF SUFFICIENT STABILITY TO RESIST THE THRUSTS, ALL AS REQUIRED BY THE ENGINEER.

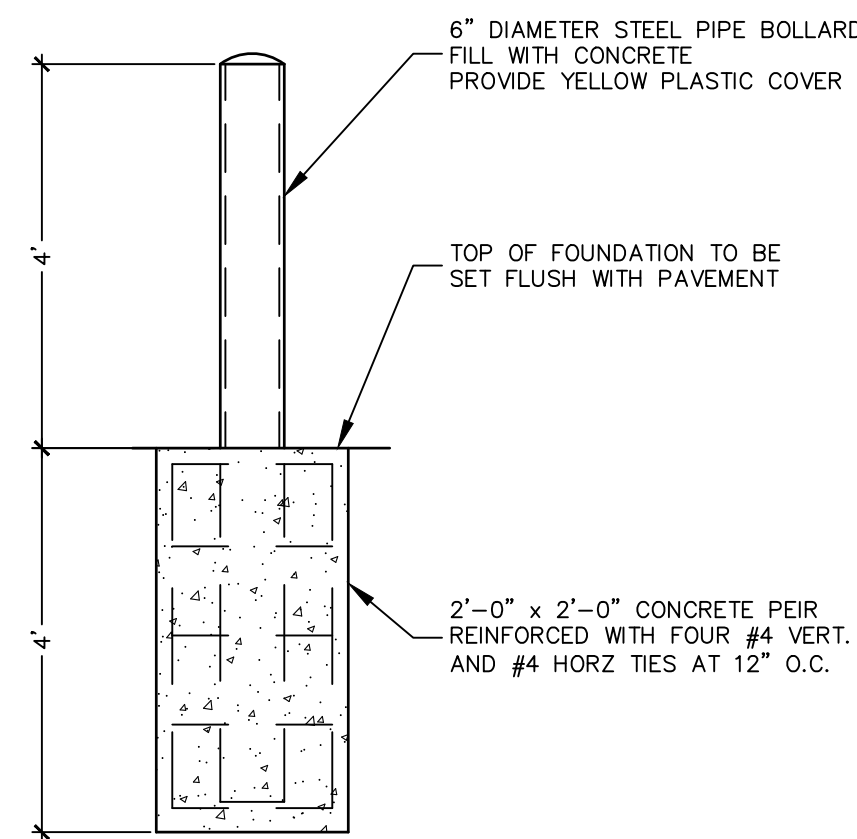
| SOIL       | BEARING STRENGTH<br>B (LB/SQ FT) |
|------------|----------------------------------|
| MUCK       | 0                                |
| SOFT CLAY  | 1,000                            |
| SILT       | 1,500                            |
| SANDY SILT | 3,000                            |
| SAND       | 4,000                            |
| SANDY CLAY | 6,000                            |
| HARD CLAY  | 9,000                            |

5 TYPICAL CONCRETE THRUST BLOCK DETAILS  
C-12.2 SCALE: NTS



6 TYPICAL TAPPING SLEEVE & VALVE  
C-12.2 SCALE: NTS

7 NOT USED  
C-12.2 SCALE: NTS



8 CONCRETE PIPE BOLLARD  
C-12.2 SCALE: NTS

PROJECT TITLE: **PEREGRINE SENIOR LIVING  
MEDICAL CENTER DRIVE**

TOWN OF MANLIUS

ONONDAGA COUNTY, NY

PREPARED FOR: **PEREGRINE DEVELOPMENT, LLC.**

217 MONTGOMERY STREET  
SYRACUSE, NY 13202

SHEET TITLE: **SITE DETAILS**

| NO. | REVISION/ISSUE                | DATE     |
|-----|-------------------------------|----------|
| B   | SITE PLAN AMENDMENT SUBMITTAL | 01/12/23 |
| A   | PLANNING BOARD SUBMITTAL      | 10/13/22 |

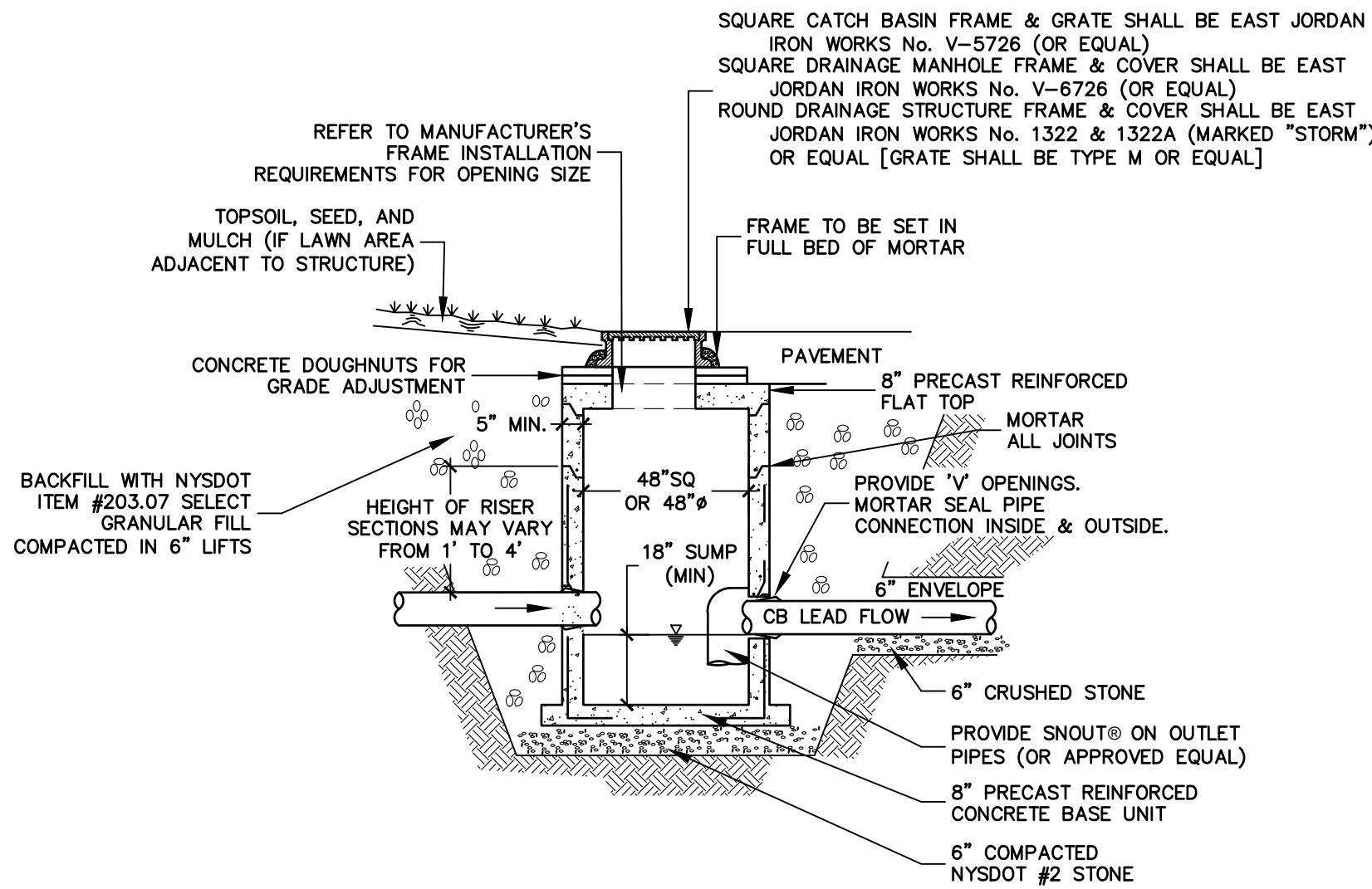
PREPARED BY: **NAPIERALA  
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|             |             |          |
|-------------|-------------|----------|
| 22-2099     | 25 AUG 2022 | AS SHOWN |
| PROJECT NO. | DATE        | SCALE    |

C-12.2

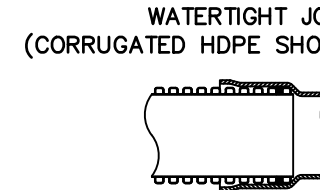


**1 PRECAST DRAINAGE STRUCTURE (CB AND DMH)**  
C-12.3 SCALE: NTS

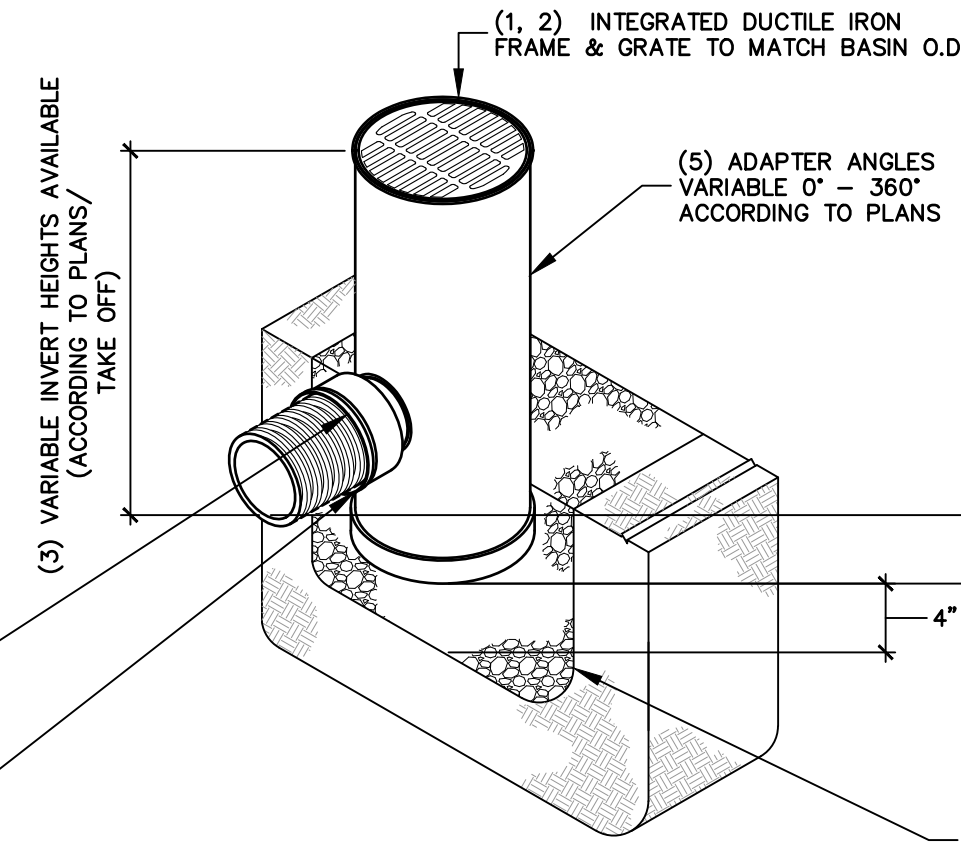
**DRAINAGE STRUCTURE GENERAL NOTES**

- REINFORCING FOR ALL SECTIONS SHALL BE AS FOLLOWS:  
TOP: #3 BARS SPACED AT 4" IN BOTH DIRECTIONS.  
BOTTOM: #3 BARS SPACED AT 4" IN BOTH DIRECTIONS.  
SIDES: #3 BARS SPACED AT 8" IN BOTH HORIZONTAL AND VERTICAL.
- ALL REINFORCEMENT SHALL BE PLACED SO IT WILL HAVE A MINIMUM COVER OF 2" AND BE LOCATED APPROXIMATELY WITHIN THE CENTER OF THE SECTION.
- TOP SLAB AND/OR FRAME ADJUSTMENT:  
FOR ALL DRAINAGE STRUCTURES A MAXIMUM OF 6 INCHES OF BRICK AND MORTAR OR A MAXIMUM OF 2 INCHES OF MORTAR ALONE SHALL BE USED FOR TOP SLAB AND/OR FRAME & GRATE ADJUSTMENT. FOR ADJUSTMENTS OVER 6 INCHES AND NOT TO EXCEED 12 INCHES, PRECAST CONCRETE ADJUSTMENT ELEMENT(S) MANUFACTURED IN ACCORDANCE WITH NYS-DOT STANDARD SPEC SUB-SECTION #708-04 SHALL BE USED; A MAXIMUM OF 2 INCHES OF MORTAR SHALL BE ALLOWED ON BOTH THE TOP AND BOTTOM OF THE PRECAST DEVICES. BRICK SHALL BE PRECAST PAVERS CONFORMING TO NYS-DOT STANDARD SPEC SUB-SECTION #704-13 AND MORTAR SHALL BE MORTAR FOR CONCRETE MASONRY CONFORMING TO NYS-DOT STANDARD SPEC SUB-SECTION #705-21.
- MANHOLE STEPS SHALL BE REQUIRED IN ALL DRAINAGE STRUCTURES DEEPER THAN 4 FEET. STEPS SHALL CONFORM TO NYS-DOT STANDARD SPEC SUB-SECTION #725-02.
- BASE OF PRECAST CATCH BASIN SHALL REST ON BASE MATERIAL COMPACTED IN PLACE WITH A VIBRATORY MECHANICAL TAMPER IN LIFTS NOT TO EXCEED 6" AT A TIME.
- TRENCH SIDES SHALL CONFORM TO NYS DEPT OF LABOR AND OSHA SAFETY REGULATIONS.

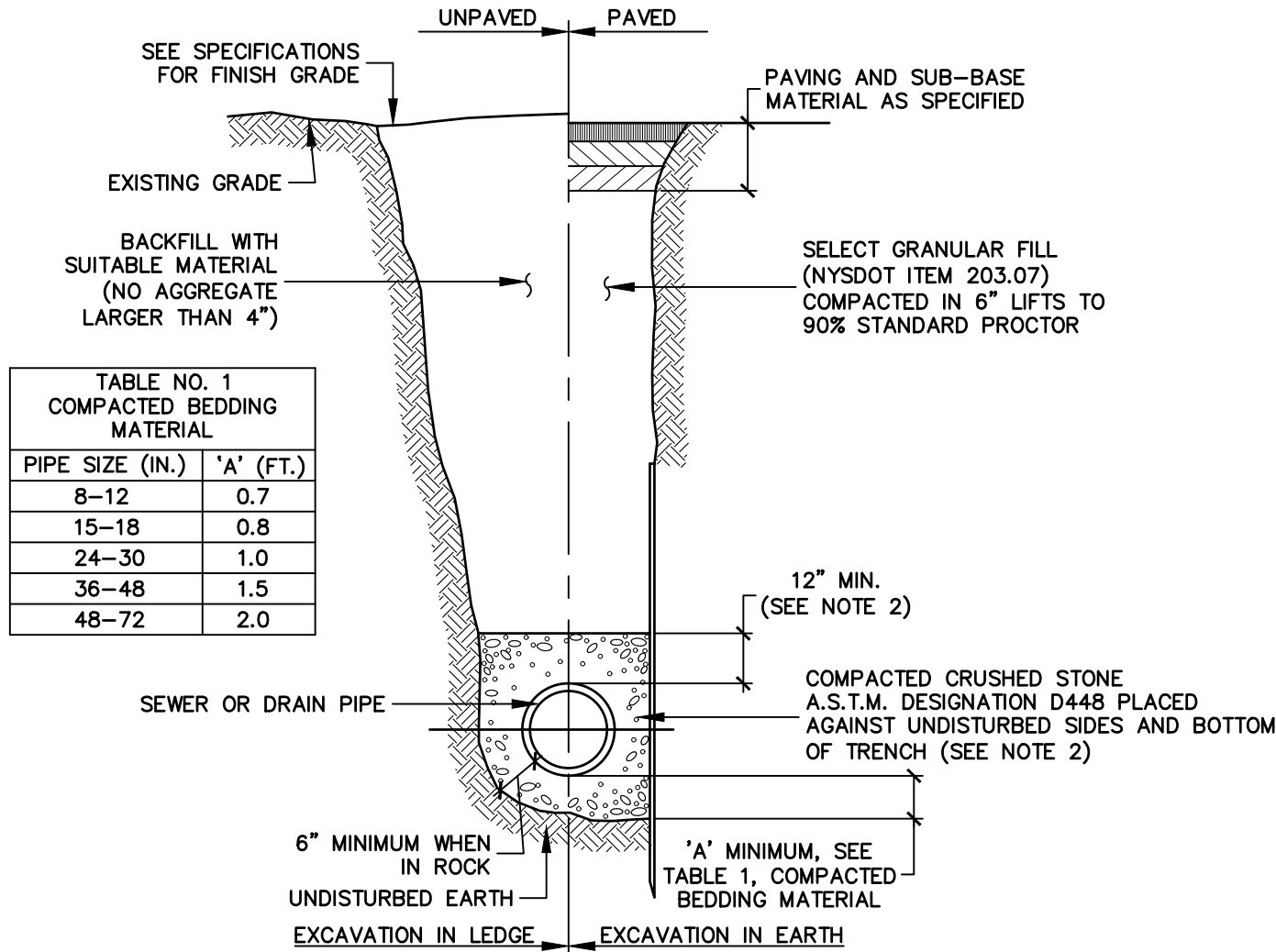
- (4) VARIOUS TYPES OF INLET & OUTLET ADAPTERS AVAILABLE:  
4" - 24" FOR CORRUGATED HDPE (ADS N-12/HANCOR DUAL WALL, ADS/HANCOR SINGLE WALL), N-12 HP, PVC SEWER (EX: SDR 35), PVC DWV (EX: SCH 40), PVC C900/C905, CORRUGATED & RIBBED PVC



**2 NYLOPLAST DRAINAGE STRUCTURE**  
C-12.3 SCALE: NTS



- GRATES/SOLID COVER SHALL BE DUCTILE IRON PER ASTM A536 GRADE 70-50-05.
- FRAMES SHALL BE DUCTILE IRON PER ASTM A536 GRADE 70-50-05.
- DRAIN BASIN TO BE CUSTOM MANUFACTURED ACCORDING TO PLAN DETAILS. ADAPTERS ARE NEEDED FOR BASINS OVER 84" DUE TO SHIPPING RESTRICTIONS. SEE NYLOPLAST DRAWING NO. 7001-110-065.
- DRAINAGE CONNECTION STUB JOINT TIGHTNESS SHALL CONFORM TO ASTM D3212 FOR CORRUGATED HDPE (ADS N-12/HANCOR DUAL WALL), N-12 HP & PVC SEWER.
- ADAPTERS CAN BE MOUNTED ON ANY ANGLE 0° TO 360° TO DETERMINE MINIMUM ANGLE BETWEEN ADAPTERS SEE DRAWING NO. 7001-110-012.

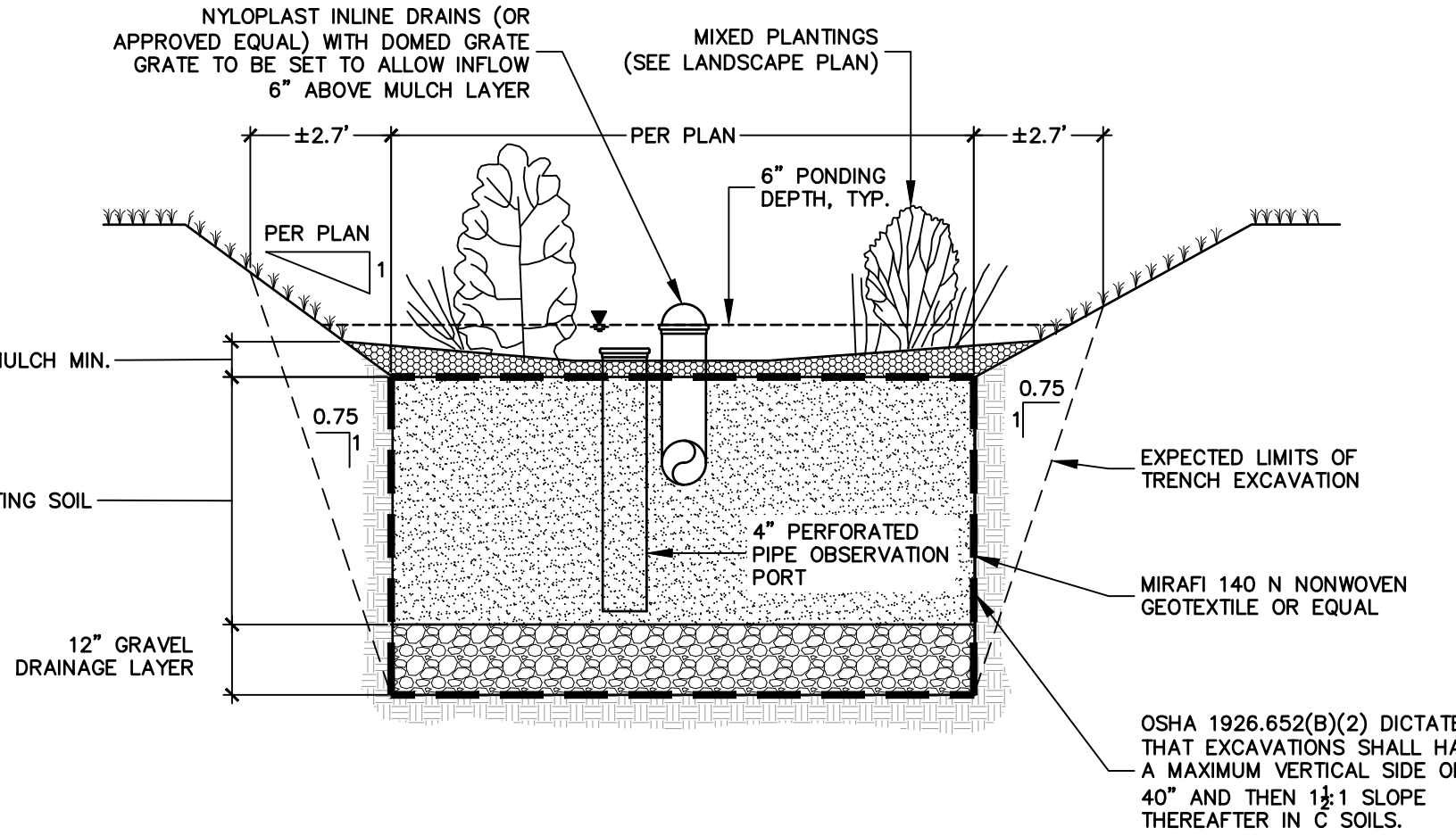


| PIPE SIZE (IN.) | 'A' (FT.) |
|-----------------|-----------|
| 8-12            | 0.7       |
| 15-18           | 0.8       |
| 24-30           | 1.0       |
| 36-48           | 1.5       |
| 48-72           | 2.0       |

**NOTES:**

- SHEETING, WHEN REQUIRED, TO BE CUT OFF AT LEAST 5 FEET BELOW STREET AND A MINIMUM OF 1 FOOT ABOVE TOP OF PIPE. WOOD SHEETING DRIVEN BELOW MID-DIAMETER OF THE PIPE SHALL BE LEFT IN PLACE. STEEL SHEETING DRIVEN BELOW MID-DIAMETER MAY BE WITHDRAWN IF APPROVED IN WRITING BY THE ENGINEER. FOR PVC PIPE ALL SHEETING DRIVEN BELOW MID-DIAMETER SHALL BE LEFT IN PLACE.
- WHEN APPROVED BY THE ENGINEER FOR PIPES OTHER THAN PVC SELECTED GRAVEL FILL MATERIAL MAY BE USED FROM MID-DIAMETER OF PIPE TO 12" ABOVE TOP OF PIPE. NO STONES LARGER THAN 2 INCHES IN ANY DIMENSION WILL BE PERMITTED IN THIS AREA.
- TRENCHES LOCATED ON THE ROAD SHOULDER SHALL BE TREATED THE SAME AS IF LOCATED UNDER PAVEMENT (EXCEPT FOR PAVEMENT SECTION).
- BEDDING MATERIAL FOR PVC PIPE SHALL MEET THE REQUIREMENTS OF ASTM D2321 CLASS I OR CLASS II EMBEDMENT MATERIALS.

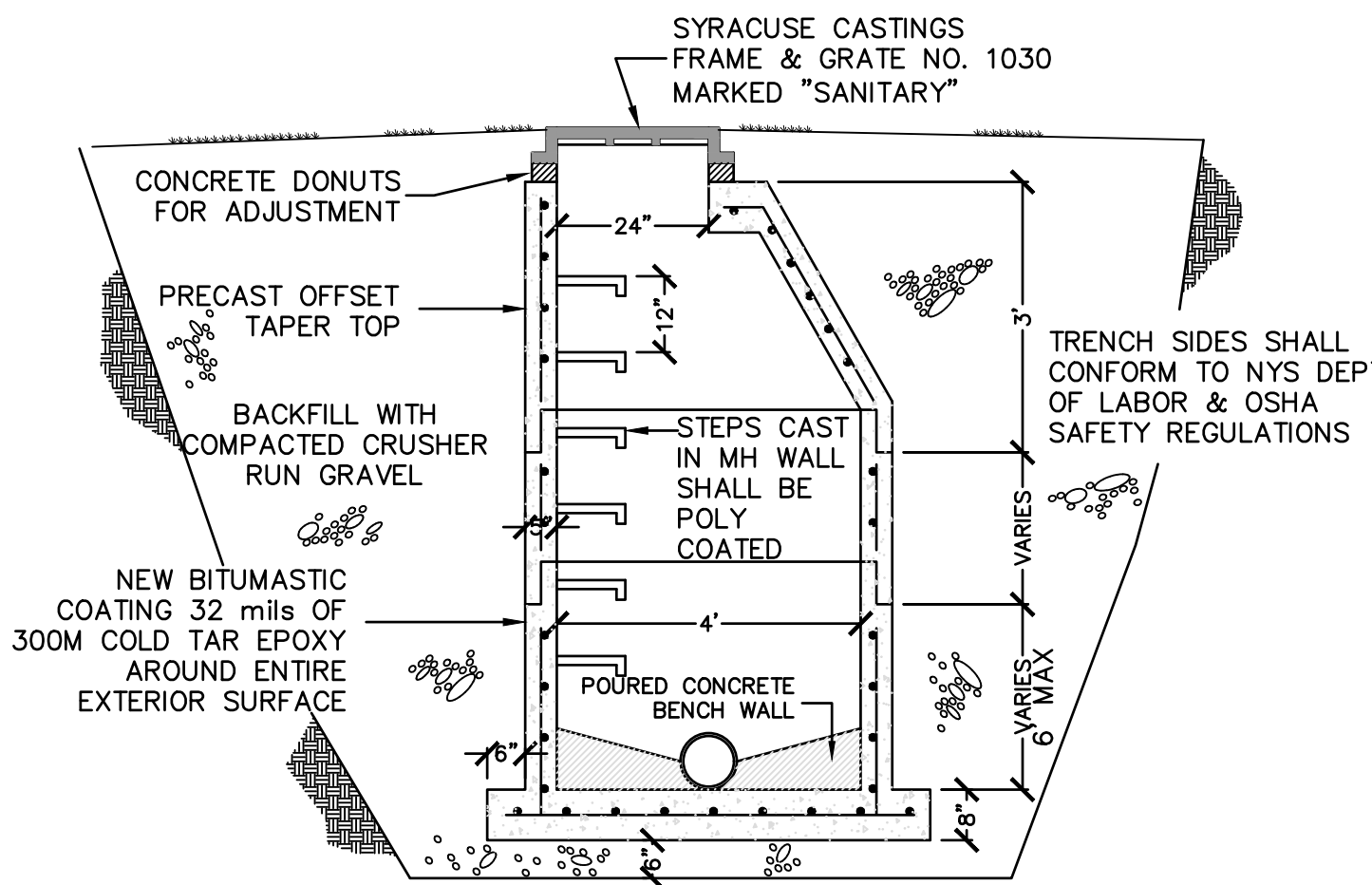
**3 TYPICAL SEWER AND DRAIN TRENCH**  
C-12.3 SCALE: NTS



**BIORETENTION NOTES:**

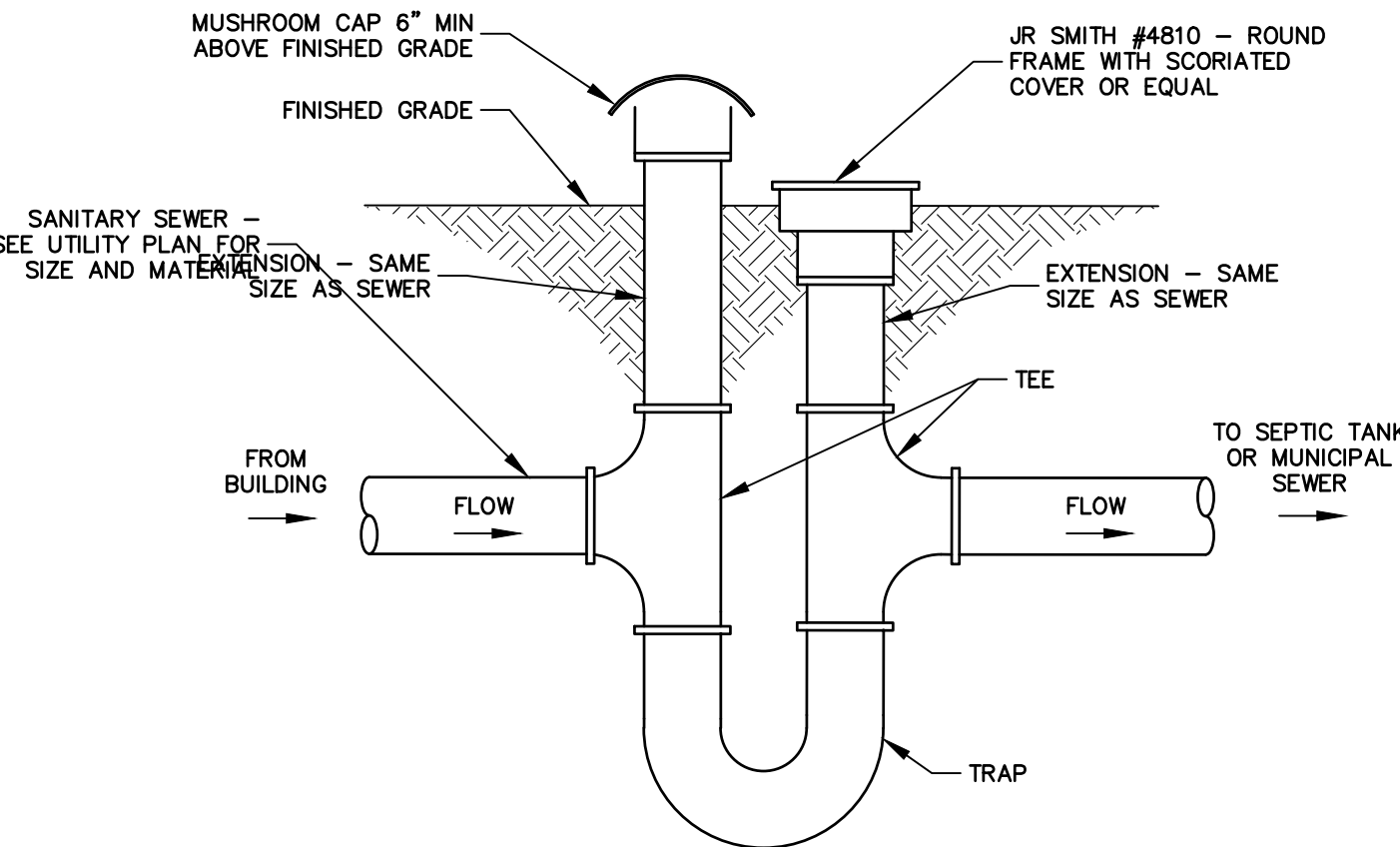
- PLANTING SOIL MEDIA SHALL BE:  
A.) 50% NYSDOT No 1 STONE  
B.) 25% TOPSOIL  
C.) 25% LEAF COMPOST
- COMPACT WITH WATER-FILLED HAND ROLLER. COMPACTION TO BE FIRM BUT EASY (UTILIZE PENCIL TEST).
- ENGINEER TO TEST IN PLACE COMPACTION AND INFILTRATION OF PLANTING SOIL.
- ENGINEER TO PERFORM INSPECTION OF BIORETENTION PLANTING SOIL IMMEDIATELY FOLLOWING PLACEMENT AND PERFORM AN IN PLACE PERCOLATION TEST TO CONFIRM THAT THE IN PLACE MATERIAL PERCOLATES AT A RATE FASTER THAN 10 MIN/INCH.

**4 BIORETENTION FILTER CROSS SECTION**  
C-12.3 SCALE: NTS



**SANITARY MANHOLE GENERAL NOTES**

- PRECAST REINFORCED CONCRETE OFFSET TAPER TOP TO BE MANUFACTURED IN ACCORDANCE WITH ASTM C-478. TOP SECTION IS TO BE 3' LONG.
- PRECAST REINFORCED CONCRETE MANHOLE RISER SECTIONS ARE TO BE MANUFACTURED IN ACCORDANCE WITH ASTM C-478. RISER SECTIONS ARE TO HAVE A 48" INSIDE DIAMETER x 5" WALL AVAILABLE IN 2', 3', OR 4' LENGTHS.
- PRECAST REINFORCED CONCRETE MANHOLE BASE IS TO MANUFACTURED IN ACCORDANCE WITH ASTM C-478. BASE IS TO HAVE A 48" INSIDE DIAMETER x 5" WALL WITH RUBBER BOOTS AS REQUIRED.
- REINFORCING FOR ALL SECTIONS SHALL BE 2X4, ¾ W.W. MESH.
- ALL REINFORCEMENT SHALL BE PLACED SO IT WILL HAVE A MINIMUM COVER OF 2" AND BE LOCATED APPROXIMATELY WITHIN THE CENTER OF THE SECTION.
- COURSES OF BRICK OR CONCRETE DONUTS ARE TO BE USED FOR RIM GRADE ADJUSTMENTS.
- BASE OF PRECAST MANHOLE SHALL REST ON UNDISTURBED UNIFORM VIRGIN SOIL OR COMPACTED GRAVEL, COMPACTED IN PLACE WITH VIBRATORY MECHANICAL TAMPERS IN LIFTS NOT TO EXCEED 6" AT A TIME.
- TRENCH SIDES SHALL CONFORM TO NYS LABOR DEPARTMENT SAFETY REGULATIONS.



**6 CAST IRON VENT AND TRAP**  
C-12.3 SCALE: NTS

**5 SANITARY SEWER MANHOLE**  
C-12.3 SCALE: NTS

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PROJECT NO. **22-2099**  
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SCALE **AS SHOWN**

SHEET **C-12.3**

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