

ALL CONSTRUCTION TO BE IN COMPLIANCE WITH "NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE" AND "VILLAGE OF BALLSTON SPA ZONING ORDINANCE"

1. GENERAL INFORMATION

PDD/ Subdivision Name: _____
Tax Map No: 216.32-2-51 Historic District: Yes No Ownership: Private Public

2. APPLICANT

Name Waleed S. Alakkawi Position _____ Email Alakkawi@gmail.com
Address 3 Wood Dale Dr City Ballston Lake State NY Zip Code 12019
Telephone (518) 258-5923 Ext. _____

3. PROPERTY OWNER

Name _____ Position _____ Email _____
Address _____ City _____ State _____ Zip Code _____
Telephone _____ Ext. _____ Liability Carrier: _____ Policy # _____

4. PROPOSED CONSTRUCTION LOCATION

Street Number 32792 Street Name: MILTON AVE
Apt. Number: _____ Zoning District: _____

5. USE

Existing Use _____ Proposed Use Kebab Pizza Restaurant

6. TYPE OF WORK

New Addition Change of Tenant Other
Brief Description of proposed work: Interior Renovation
Incluy Elect, Plumb, Gas Temp, Hood & System

	SETBACKS (in feet)
FRONT	_____
BACK	_____
LEFT SIDE	_____
RIGHT SIDE	_____

7. PROPOSED BUILDING

Height _____ Actual Stories _____ Total Size: _____ square feet Style _____
Type of Frame _____ Type of Foundation _____ Number of Rooms (excl. bathrooms) _____ Number of Bathrooms _____
Number of Bedrooms _____ Primary Heat System _____ Type of Fuel _____ Number of Fireplaces _____ Number of Wood Stoves _____
Sprinklers Yes No Central Air Conditioning Yes No Garage: Attached - No. of Cars _____ Detached - No. of Cars _____

8. ARCHITECT / ENGINEER

Name _____ Position _____ Organization _____
Address _____ City _____ State _____ Zip Code _____
Telephone _____ Ext. _____ Professional License No. _____ State _____

9. CONTRACTOR

Name IMRAN SELCUE Position MANAGER Organization PRO EXPERT LLC
Address 105 NYROU DR City TROY State NY Zip Code 12180
Telephone 518 567 1144 Ext. _____ Liability Carrier NOR GUARD Policy No. PRW6434106

10. NAMES, ADDRESSES AND TELEPHONE NUMBERS OF ALL SUBCONTRACTORS:

11. COST AND FEES

Estimated Project Cost \$ _____ Building Permit Fee \$ 200

12. PROVIDED WITH THIS APPLICATION

Two (2) Complete Sets of Plans Plot Plan Energy Audit Materials List Electrical Layout Plumbing Layout

13. AFFIDAVIT

I swear to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE, the ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature Waleed Alakkawi DATE 12/27/2023
(Owner or Owner's Agent)

BELOW THIS LINE TO BE COMPLETED BY THE BUILDING DEPARTMENT

ACTION ON APPLICATION

Permit Granted Date: _____ Signed _____
Permit Denied Date: _____ Signed _____
Reason for Denial: _____
Variance/ Special Permit Granted By: _____ Date: _____
Certificate of Occupancy Granted By: _____ Date: _____
Certificate of Compliance Granted By: _____ Date: _____

SIGN APPLICATION
CODE 16 SQ. FT. MAX SIZE

Village of Ballston Spa Rory O'Conner
CODE/SIGNS 518-857-6400

Village of Ballston Spa
PLANNING BOARD

66 Front Street
Ballston Spa, NY 12020
(518)885-5711

(3/2023)

SITE PLAN REVIEW SUBMITTAL CHECKLIST

Project Name: Adooma Pizza

Listed below are the minimum submittal requirements for site plan review as set forth in Village of Ballston Spa code. The Planning Board reserves the right to request additional information, as necessary, to support an application. The Board also reserves the right to reject the application if these minimum requirements are not met. Please complete the checklist below and provide with your submission.

REQUIRED ITEMS: *10 hard copies and 1 digital (USB flash drive) copy of ALL materials are required.

CHECK EACH ITEM ****HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED****

- 1. Completed Site Plan Application and Fee
- 2. SEQR Environmental Assessment For-short or long form as required by action.
- 3. Set of plans including: (5) large scale plans and 5 smaller versions. One digital version of all submittal items (pdf) shall be provided.
- 4. Project narrative.

REQUIRED ITEMS ON SITE PLAN:

- 1. Property line survey prepared by a licensed land surveyor. Site plan must reference such survey with all corners set and marked on plan. A copy of the original property survey must also be included. (If you feel a property line survey is not necessary for your site plan, please submit that information in writing.)
- 2. North arrow and map scale
- 3. Parcel tax map number

TAX MAP

- 4. Site location map *TAX MAP* ✓
- 5. Site vicinity map (all features within 300 feet of property) ✓ *TAX MAP / PICTURES*
- 6. Identification of zoning district with corresponding area requirements
- 7. Building setback lines, either listed or shown on plans
- 8. Title block with project name; name and address of applicant; and name and address of property owner (if different) *OVER STREET* ✓
- 9. Topography data provided on site plan
- 10. Name of all adjacent property owners ✓
- 11. Parcel street address (existing and any proposed postal addresses) ✓

12. Identification of all existing or proposed easements, covenants, or legal rights-of-way on this property
 ___ Yes ___ No *✓* N/A

13. Identification of size, elevations, materials, and slopes of all existing and proposed utilities adjacent to project
 ___ Yes ___ No ___ N/A

14. Existing and proposed contours and spot grades (at 2-foot intervals)
 ___ Yes ___ No ___ N/A

15. Identification of all watercourses, designated State wetlands, buffers, Federal wetlands, floodplains, rock outcroppings, etc.
 ___ Yes ___ No ___ N/A

16. Location of proposed snow storage
 ___ Yes ___ No ___ N/A
There is a garden stored on business property ✓

17. Identification of all existing or proposed sidewalks or pedestrian path (show type, size and condition of existing sidewalks)
 Yes ___ No ___ N/A
Sidewalks in good condition and operate to standards ✓ *map*

18. Location, design specifications and construction material for all proposed site improvements (drains, culverts, retaining walls, berms, fences, etc)

Yes No N/A

19. Location, size, and material of all existing and proposed utility services

Yes No N/A

20. Parking lot layout plan and identification of all loading areas (number all spaces)

Yes No N/A *Street or parking lot*

21. Parking demand calculations

Yes No N/A

22. Identification of parking spaces and access points for physically impaired persons

Yes No N/A

HANDICAP

23. Location and screening plan for dumpster or recycling bins

Yes No N/A

East of the building on the property

24. Location, design, type of construction and materials, proposed use and exterior dimensions of all buildings (existing and proposed) on site

Yes No N/A

25. Identification of storage of any potentially hazardous materials

Yes No N/A

26. Planting plan identifying quantity, species, and size of all proposed new plant materials. Label existing plant material to be retained or removed.

Yes No N/A

27. Lighting plan showing type, location, and intensity of all existing and proposed exterior lighting fixtures

Yes No N/A

28. Erosion and sediment control plan including designated concrete truck washout area.

Yes No N/A

Checklist prepared by: _____ Date: _____



Village of Ballston Spa

Planning Board

66 FRONT STREET

Ballston Spa, NY 12020

518-885-5711

[For Office Use]

(Application #)

(Date Received)

Application for:
SITE PLAN REVIEW

** Application Checklist – All submissions **must** include completed application checklist and all required items. **

Project Name: ADOOMA PIZZA

Property Address/Location: 92 A Milton Ave Ballston Spa NY 12020

Tax Parcel # 216-32-2-51 Zoning District _____
(For example: 165.52-4-37)

Narrative Summary of Project (use attachment):

Date special use permit granted (if any): _____

Date zoning variance granted (if any): _____

Is property located within (check all that apply): Historic District
 500' of a Village boundary, or County/State Highway

	<u>Applicant(s)**</u>	<u>Owner(s) [if not applicant]</u>	<u>Attorney/Agent</u>
Name	<u>Waleed S. Alakawi</u>	<u>Dave Avenarius</u>	_____
Address	<u>3 Wood Dale Dr Ballston Lake NY 12019</u>	<u>9 Church Ave Ballston Spa, NY 12020</u>	_____
Phone	<u>518 258 5923</u>	<u>518 577 5870</u>	_____
Email	<u>Alakawi@gamil.com</u>	_____	_____

Identify primary contact person (check one): Applicant Owner Agent

** An applicant must be the property owner, lessee, or one with an option to lease or purchase the property in question.

Application Fee: A check payable to "Village of Ballston Spa" **MUST** accompany this application.

Fees noted on Village website at www.villageofballstonspa.org - *Rates and Forms Municipal*

NOTE: In accordance with the Village Code – *Chapter 178, Article III, Section 178-8*, the Village may elect to use expert consultation in reviewing this application. In such an event, an estimate of those initial fees will be provided before the review proceeds and the applicant must post those funds in escrow with the Village Clerk. If the estimated fees are expended before the review is complete, the escrow must be replenished before review can continue.

Submission Deadline: All required documents must be provided *2 weeks in advance* of the meeting. See Village website for meeting dates. www.villageofballstonspa.org

Does any Village officer, employee or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? **Yes** **No**

If yes, a statement disclosing the name, residence, nature, and extent of this interest must be filed with this application.

I, the undersigned owner, lessee, or purchaser under contract for the property, hereby request a Site Plan Review by the Village of Ballston Spa Planning Board for the identified property above. I agree to meet all the requirements under Village zoning codes.

Furthermore, I hereby authorize members of the Village of Ballston Spa Planning Board and designated Village staff to enter the property associated with this application for purposes of conducting any necessary site inspections relating to this application.

Applicant Signature: Waleed Alalkawsi Date: 01/02/2024

If applicant is not current owner, owner must also sign below.

Owner Signature: [Signature] Date: 1/2/24

Site Plan Review Submittal Checklist

Project name: ADOOMA Pizza

- 1. Not necessary for the project.
- 2-5. Please check the Tax Map attached.
- 6. N/A
- 7. N/A
- 8.

ADOOMA Pizza and Kebab	Applicant Name: Waleed S. Alalkawi	Applicant Address: 3 Wood Dale Dr. Ballston Lake NY 12019
Property Owner Name: Dave Avenarius	Property Owner Address: 92 A Milton Ave Ballston Spa NY 12020	

- 9. N/A
- 10. Streever Agency, Inc.
- 11. 92 A Milton Ave, Ballston SPA NY 12020
- 12. N/A
- 13 – 15. N/A
- 16. Snow will be stored on business premises, there is a garden.
- 17. The sidewalks are all existing, in excellent condition, operate and meet standards.
- 18- 19. N/A
- 20. Four parking lots will be dedicated to the business, the loading area will be in the parking lot or street (there is a space).
- 21. N/A
- 22. No Handicap space available.
- 23. Dumpster or recycling bins will be in east of the building on the property premises.
- 24 – 28. N/A

Applicant
Waleed
01/02/2024

owner
JFK

ADOOMA Pizza and Kebab	Applicant Name: Waleed S. Alalkawi	Applicant Address: 3 Wood Dale Dr. Ballston Lake NY 12019
Property Owner Name: Dave Avenarius	Property Owner Address: 92 A Milton Ave Ballston Spa NY 12020	

Short Environmental Assessment Form

Part 1 - Project Information

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			
Name of Action or Project: <i>ADOOMA Pizza and Kebab</i>			
Project Location (describe, and attach a location map): <i>92 A Milton Ave Ballston SPA NY 12024 12020</i>			
Brief Description of Proposed Action: <i>Interior Renovation for Pizza and kebab restaurant</i>			
Name of Applicant or Sponsor: <i>Waleed S. Alalkawi</i>		Telephone: <i>(518) 258-5923</i>	
Address: <i>3 Wood Dale Dr.</i>		E-Mail: <i>Alalkawi@gmail.com</i>	
City/PO: <i>Ballston Lake</i>		State: <i>NY</i>	Zip Code: <i>12019</i>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

5. Is the proposed action,		NO	YES	N/A
a. A permitted use under the zoning regulations?		<input type="checkbox"/>	<input type="checkbox"/>	<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	YES	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES	
If Yes, identify: _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES	
b. Are public transportation services available at or near the site of the proposed action?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the 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?		NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?		NO	YES	
If No, describe method for providing potable water: _____ _____		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?		NO	YES	
If No, describe method for providing wastewater treatment: _____ _____		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?		NO	YES	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?		<input checked="" type="checkbox"/>	<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?		NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____		<input checked="" type="checkbox"/>	<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:

- Shoreline Forest Agricultural/grasslands Early mid-successional
 Wetland Urban 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 YES

16. Is the project site located in the 100-year flood plan?

NO YES

17. Will the proposed action create storm water discharge, either from point or non-point sources?

NO YES

If Yes,

a. Will storm water discharges flow to adjacent properties?

b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?

If Yes, briefly describe:

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?

NO YES

If Yes, explain the purpose and size of the impoundment:

19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?

NO YES

If Yes, describe:

20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?

NO YES

If Yes, describe:

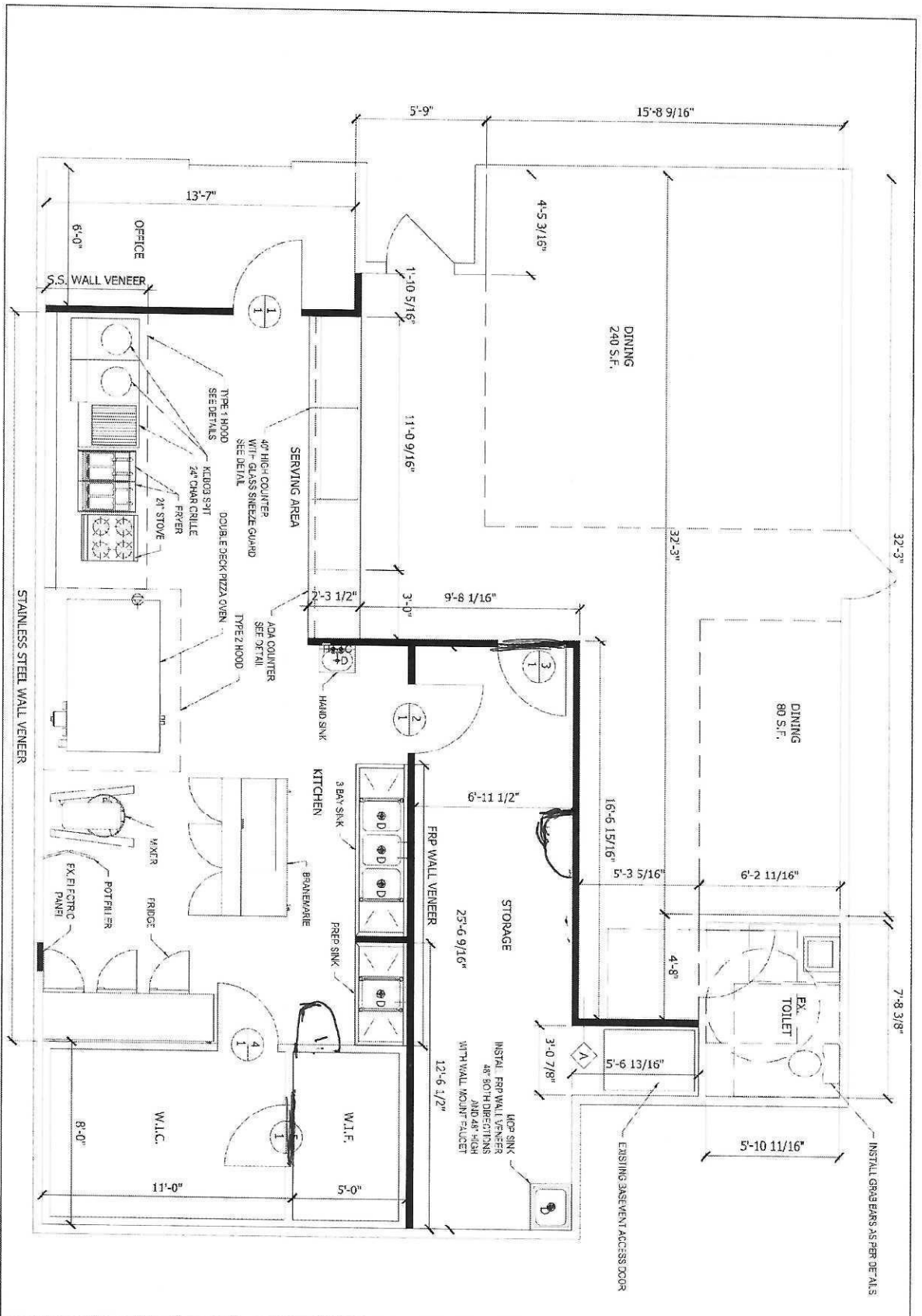
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor/name: Waleed S. Alalkawi

Date: 01/02/2024

Signature: Waleed Alalkawi

Title: _____



DATE: 1 DECEMBER 2023	PIZZERIA RESTAURANT		CAPITAL ARCHITECTURE 24 AVIATION ROAD COLONIE, NY 12205 518 253 1442 CELL capitalarchitecture@yahoo.com THIS WORK WAS PREPARED BY ME OR UNDER MY SUPERVISION AND CONSTRUCTION OF THIS PROJECT WILL BE UNDER MY OBSERVATION.
REV:	92A MILTON AVENUE BALLSTON SPA, NY		
<h1 style="margin: 0;">A100</h1> <h2 style="margin: 0;">FLOOR PLAN</h2>			



DATE : 1 DECEMBER 2023

PIZZERIA RESTAURANT

REV:

92A MILTON AVENUE
BALLSTON SPA, NY

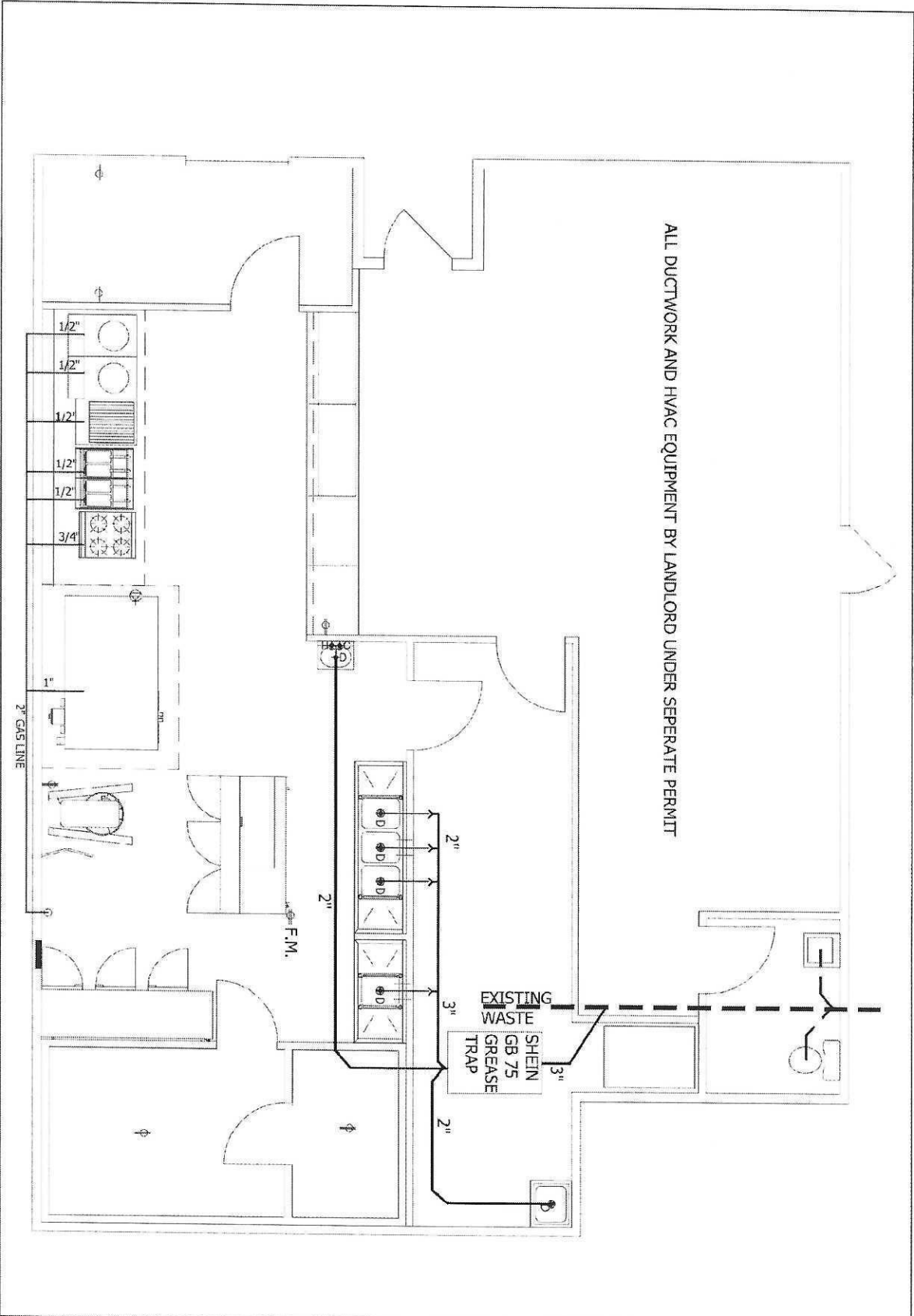
A101

CEILING PLAN



CAPITAL ARCHITECTURE
24 AVIATION ROAD
COLONIE, NY 12205
518 253 1442 CELL
capitalarchitecture@yahoo.com

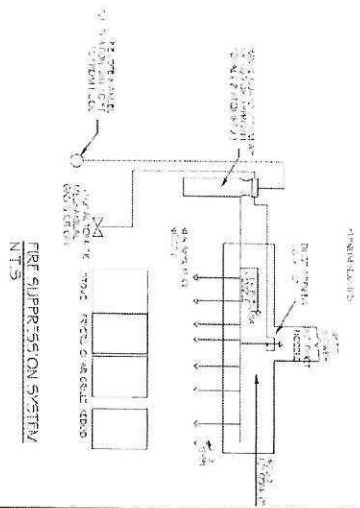
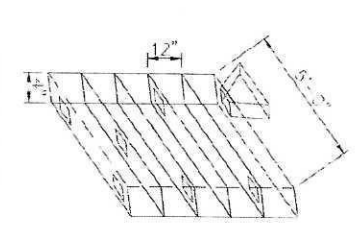
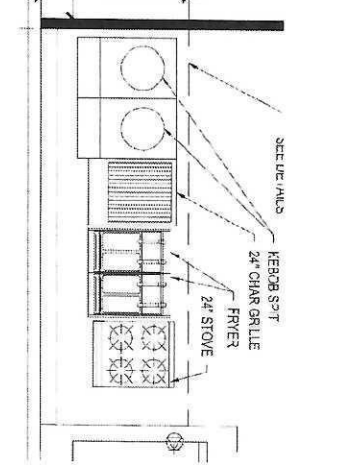
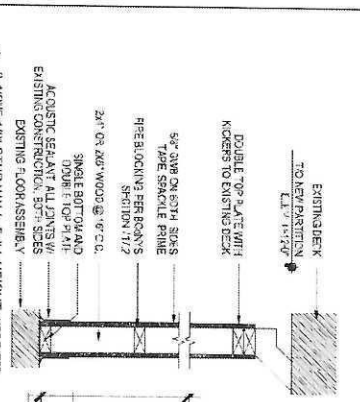
THIS WORK WAS PREPARED BY ME
OR UNDER MY SUPERVISION AND
CONSTRUCTION OF THIS PROJECT
WILL BE UNDER MY OBSERVATION.



ALL DUCTWORK AND HVAC EQUIPMENT BY LANDLORD UNDER SEPERATE PERMIT

DATE: 1 DECEMBER 2023	PIZZERIA RESTAURANT		CAPITAL ARCHITECTURE 24 AVIATION ROAD COLONIE, NY 12205 518 253 1442 CELL capitalarchitecture@yahoo.com THIS WORK WAS PREPARED BY ME OR UNDER MY SUPERVISION AND CONSTRUCTION OF THIS PROJECT WILL BE UNDER MY OBSERVATION.
REV:	92A MILTON AVENUE BALLSTON SPA, NY		
A102	MEP PLAN		

COPYRIGHT PROTECTED: THIS WORK IS PROTECTED UNDER THE 1990 ARCHITECTURAL WORKS COPYRIGHT PROTECTION ACT AND ANY REVISIONS THEREOF



3-1/2\"/>

REAR AIR CHAMBER
N.T.S.

FIRE SUPPRESSION SYSTEM
N.T.S.

1. THE SUPPRESSION SYSTEM SHALL BE INSTALLED BY LICENSED INSTALLER IN ACCORDANCE WITH THE HOOD MANUFACTURER'S INSTALLATION DRAWING AND ALL APPLICABLE LOCAL, STATE AND NATIONAL ELECTRICAL CODES.
2. THE HOOD SHALL BE INSTALLED AT THE BASE OF EACH APPLICABLE RANGE TOP AND HORIZONTAL DUCT EVERY 12\"/>

3. HOOD SHALL BE MANUFACTURED AS ACCORDING TO NFPA CODE 96 ALL SEALS, JOINTS AND PENETRATIONS SHALL BE MADE WITH 1/2\"/>

4. HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

5. HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

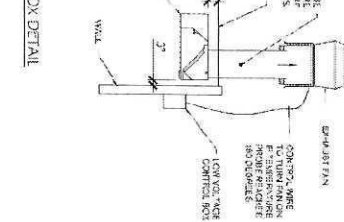
6. HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

7. HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

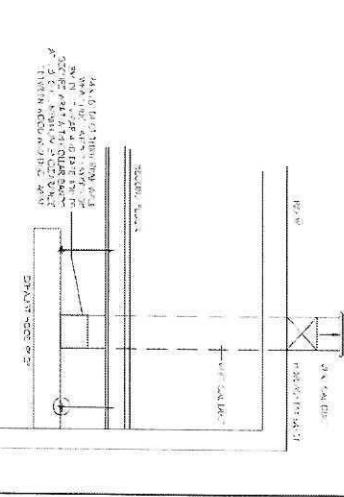
8. THE HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

9. HOOD SHALL BE MANUFACTURED WITH 1/4\"/>

10. A HOOD TEST WILL BE PERFORMED ON ALL HOODS IMMEDIATELY AFTER INSTALLATION TO ENSURE PROPER OPERATION. A NOTARIZED COPY OF REPORT SHALL BE SUBMITTED TO THE BUILDING DEPARTMENT AND BE COMPLETED TEST IS PASSED.



CONTROL BOX DETAIL
N.T.S.



FRONT VIEW
N.T.S.

1. THE SUPPRESSION SYSTEM SHALL BE INSTALLED BY LICENSED CONTRACTOR. CONTRACTOR SHALL SUBMIT SHOP DRAWINGS FOR APPROVAL BEFORE INSTALLATION.
2. THE INSTALLATION SHALL BE IN ACCORDANCE WITH THE HOOD MANUFACTURER'S INSTALLATION DRAWING AND ALL APPLICABLE LOCAL, STATE AND NATIONAL ELECTRICAL CODES.
3. THE HOOD SHALL BE MANUFACTURED AS ACCORDING TO NFPA CODE 96 ALL SEALS, JOINTS AND PENETRATIONS SHALL BE MADE WITH 1/2\"/>

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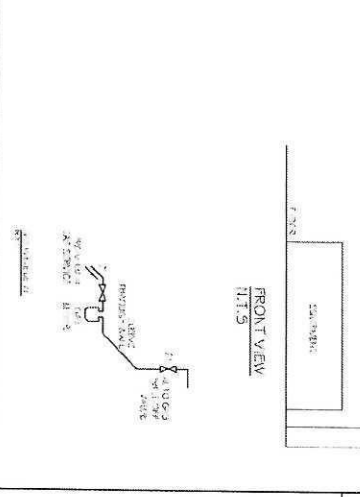
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FRONT VIEW
N.T.S.



FRONT VIEW
N.T.S.

DATE: 1 DECEMBER 2023
REV:
A103

PIZZERIA RESTAURANT
92A MILTON AVENUE
BALLSTON SPA, NY
DETAILS



CAPITAL ARCHITECTURE
24 AVIATION ROAD
COLONIE, NY 12205
518 253 1442 CELL
capitalarchitecture@yahoo.com
THIS WORK WAS PREPARED BY ME OR UNDER MY SUPERVISION AND CONSTRUCTION OF THIS PROJECT WILL BE UNDER MY OBSERVATION.

CONSTRUCTION NOTES:

1. THE INTENT OF THE DRAWINGS IS TO PRODUCE THE INTENDED RESULTS UNDER RECOGNIZED STANDARDS, EVEN IF NOT SHOWN, BUT REASONABLY INFERRABLE THEREFROM. THE CONTRACTOR SHALL CHECK ALL DRAWINGS FURNISHED TO HIM/HERS IMMEDIATELY UPON THEIR RECEIPT AND SHALL PROMPTLY NOTIFY THE DESIGNERS OF ANY DISCREPANCIES. LARGER SCALE DRAWINGS WILL TAKE PRECEDENCE OVER SMALLER SCALE DRAWINGS, AND DETAILS TAKE PRECEDENT OVER ALL. THE CONTRACTOR SHALL COMPARE ALL DRAWINGS AND VERIFY THE DETAILS BEFORE LAYING OUT THE WORK AND SHALL BE RESPONSIBLE FOR ANY ERRORS WHICH MIGHT HAVE BEEN AVOIDED THEREBY.
2. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH THE NEW YORK STATE 2020 AND LOCAL BUILDING CODES.
3. CONTRACTORS ARE TO NOTIFY ARCHITECT IMMEDIATELY IF ANY DISCREPANCIES OCCUR BEFORE PROCEEDING WITH THE RELATED WORK.
4. ALL WORK SHALL BE PERFORMED IN A MANNER THAT PROTECTS BUILDING OCCUPANTS, VISITORS AND THEIR POSSESSIONS. THE CONTRACTOR SHALL PROVIDE ADEQUATE VENTILATION DURING ALL WORK EMITTING FUMES AND ODORS SO AS NOT TO AFFECT ANY PERSON IN THE WORK AREA AND BUILDING IN GENERAL.
5. CONTRACTORS TO COORDINATE WITH OWNERS REPRESENTATIVE FOR SCHEDULING OF WORK CAUSING NOISE, DUST OR FUMES.
6. ALL EXISTING DIMENSIONS ARE TO FACE OF GYP. BD. (UNLESS OTHERWISE NOTED, ALL NEW DIMENSIONS ARE TO FACE OF STUD.)
7. CONTRACTORS ARE TO KEEP THE PREMISES FREE FROM ACCUMULATION OF WASTE MATERIALS, CONSTRUCTION DEBRIS AND RUBBISH AND DISPOSE OF LAWFULLY.
8. ALL WORK SHALL BE CONFINED TO THE DESIGNATED PROJECT LIMITS EXCEPT FOR ANY REMOTE ELECTRICAL OR MECHANICAL ITEMS. ANY DAMAGE CAUSED BY THE CONTRACTOR TO THE ADJOINING IMPROVEMENTS SHALL BE REPAIRED BY THE CONTRACTOR AT HIS OR HER OWN EXPENSE.
9. ALL ITEMS TO REMAIN SHALL BE PROTECTED DURING THE CONSTRUCTION PERIOD.
10. FIRE SAFETY DURING CONSTRUCTION ALTERATION OR REMOVAL SHALL BE IN ACCORDANCE WITH ART. 87, U.F.C., 1988 AS AMENDED.
11. CONTRACTOR SHALL COORDINATE ALL BLOCKING REQUIREMENTS FOR EQUIPMENT AND ACCESSORIES. ALL BLOCKING REQUIRED SHALL FOLLOW MANUFACTURERS RECOMMENDATIONS.
12. ALL PATCH WORK SHALL MATCH ADJACENT FINISHES, UNLESS OTHERWISE NOTED.
13. ALL CONCRETE IS 3000# FIBER-REINFORCED, UNLESS OTHERWISE NOTED.
14. ALL FASTENERS IN CONTACT WITH TREATED WOOD SHALL BE STAINLESS STEEL.
15. ALL WOOD IN CONTACT WITH CONCRETE OR EXPOSED TO THE WEATHER SHALL BE TREATED WOOD.
16. ALL WALLS PARALLEL TO FLOOR STRUCTURE SHALL HAVE DOUBLE JOISTS BELOW.
17. ALL SITE INFORMATION WAS GIVEN BY OWNER. OWNER IS RESPONSIBLE FOR BUILDING LOCATION. OWNER HAS BEEN ADVISED TO CONSULT A SURVEYOR FOR LOCATION OF ADDITIONS.
18. ALL FLOOR JOISTS AND ROOF RAFTERS TO BE SECURED WITH SIMPSON HANGERS.

DRAWING SET INDEX

NO.	SHEET NAME
T100	COVER SHEET AND NOTES
A100	FLOOR PLAN
A101	CEILING PLAN
A102	MEP PLANS
A103	DETAILS

SCOPE OF WORK - RENOVATION OF OLD LAUNDRY TO A PIZZERIA RESTAURANT.

SYMBOL LEGEND

	NEW CONSTRUCTION NOTE / WALL TYPE REFERENCE		WINDOW REFERENCE
	PERMANENTLY WIRED CARBON MONOXIDE DETECTOR		DOOR REFERENCE
	EXHAUST FAN - VENTED TO EXTERIOR		KEY NOTE

CODE REVIEW

1. THE GOVERNING CODE IS THE 2020 NYS BUILDING CODE.
2. THIS PROJECT HAS BEEN DESIGNED TO THE BEST OF MY BELIEF, KNOWLEDGE AND PROFESSIONAL JUDGMENT TO BE IN COMPLIANCE WITH CHAPTER 11 ACCESSIBILITY OF THE BUILDING CODE OF NEW YORK STATE.
3. OCCUPANCY CLASSIFICATION: BUSINESS (B) - PREVIOUS OCCUPANCY WAS BUSINESS
4. CLASSIFICATION OF WORK: ALTERATION LEVEL 2
5. CONSTRUCTION CLASSIFICATION: TYPE 5B, NOT SPRINKLERED
6. ALLOWABLE HEIGHTS AND AREAS BASED ON TABLE 503: BUSINESS (B): ALLOWABLE AREA W/O SPRINKLERS: 9,000 SQFT ALLOWABLE HEIGHT W/O SPRINKLERS: 2 STORIES, 40 FT
7. ACTUAL HEIGHTS AND FIRE AREAS: ACTUAL AREA: 1,750 SQFT TENANT ACTUAL HEIGHT: 2 STORIES, 30 FT
8. OCCUPANT LOAD BY AREA: STAIRING AREAS @ 200 SQ/FT = 21 OCC. PLANTS KITCHEN AREAS @ 800 SQ/FT = 7 OCC. PLANTS TOTAL OCCUPANT LOAD = 28 OCC. PLANTS
10. PLUMBING REQUIREMENTS: 2 TYPE B SINKS REQUIRED 2 SINKS @ 1 1/2" W/C @ 24" X 24" = 1 W/C REQUIRED 2 SINKS @ 1 1/2" W/C @ 24" X 24" = 1 W/C REQUIRED TOTAL REQUIRED PLUMBING = 1 W/C = 1 W/C SINK, NEW TO BE PROVIDED. DRINKING FOUNTAIN NOT REQUIRED PER PCOVS 4-10.2

DATE: 1 DECEMBER 2023	PIZZERIA RESTAURANT		CAPITAL ARCHITECTURE 24 AVIATION ROAD COLONIE, NY 12205 518 253 1442 CELL capitalarchitecture@yahoo.com THIS WORK WAS PREPARED BY ME OR UNDER MY SUPERVISION AND CONSTRUCTION OF THIS PROJECT WILL BE UNDER MY OBSERVATION.
REV:			

T100