

CITY OF ROME PLANNING BOARD

CARE OF: DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
ROME CITY HALL, 198 N. WASHINGTON STREET
ROME, NEW YORK 13440-5815
Telephone: (315) 339-7643 Fax: (315) 838-1167
www.RomeNewYork.com



Application for Planning Board Review

Property Address: _____

County Tax ID #: _____

Type of Action Requested

- Site Plan Review Site Plan Revision Minor Subdivision (less than 5 lots)
- Major Subdivision (5 lots or more)
 - Preliminary Plat Final Plat

Please fill out all the application forms completely and ensure that you are submitting all required supporting documentation. Review and complete the application checklist form prior to submission to confirm that your application is complete.

A complete application must include, at minimum:

- *Completed Application Form*
- *Application Fee*
- *All Required Submittals*
- *Digital Copy of All Documents*
- *10 Paper Copies of All Documents Printed to Full Original Scale*

*A **complete** application package must be submitted to the City's Department of Community and Economic Development at least sixteen (16) calendar days in advance of the upcoming meeting to be placed on an agenda. **Please note that for review items which require a State Environmental Quality Review (SEQR), by law, each agency that is part of the project review has up to thirty (30) days for comment.** With this in mind, if an item subject to SEQR is submitted at the deadline (16 days prior to the meeting), it is unlikely that the review item will be able to be acted on at the following regular meeting of the planning board.*

The Planning Board generally meets on the first Tuesday of each month, but consult the publicly posted schedule as this can vary as a result of public holidays.

Office Use	Date Received:	Fee Recieved: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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City of Rome, New York
Application for Planning Board Review

Applicant Information

Name: _____

Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

Property Owner Information (Check if same as applicant)

Name: _____

Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

Agent Information

Name: _____

Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

City of Rome, New York
Application for Planning Board Review

Brief Project Summary/Description:

Property Zoning: _____ **Property Size:** _____

Current Land Use: _____

Are there any easements or rights-of-way on the property? Yes No
 Utility Right-of-Way Access Other

Are there any known archaeological or historically significant features on the property? Yes No
If yes, please explain: _____

Are there any federal or state wetlands located on the property? Yes No
 Federal Wetlands New York State Wetlands

Is the property located within a floodplain? Yes No
 100-Year 500-Year

Site Plan Review Supplement

Please complete this section if you are applying for site plan review

Proposed Building Square Footage: _____

Proposed Building Height: _____

Proposed Lot Coverage: _____ 4.2% of overall parcel

Proposed Impervious Surface Coverage: _____

Proposed Building Setbacks: _____ (Front, Side, Side, Rear)

Breakdown of Proposed Uses by Square Footage: _____

Proposed Number of Residential Units: _____ (If Applicable)

Does the proposed project involve the construction of wireless telecommunication facilities or infrastructure?

Yes No

Does the proposed project involve the construction of a Tier 2 or Tier 3 Solar Energy Project as defined in the City of Rome Zoning Code?

No Yes, Tier 2 Yes, Tier 3

Additional information is required for projects involving wireless telecommunication facilities and infrastructure, as well as Tier 2 and 3 solar arrays. For these types of project, please contact the Department of Community and Economic Development for assistance.

City of Rome, New York
Application for Planning Board Review

Application Submittals Checklist (Site Plan Review)

*This checklist **must** be completed if you are applying for Site Plan Review in order for your application to be considered complete.*

- Completed Application for Planning Board Review
- Application Fee (\$50 Minor Site Plan, \$250 Major Site Plan) (Make Checks Payable to City of Rome)
- Completed Short or Long Form Environmental Assessment Form, Part 1, As Applicable
- Project Drawings including the following and scaled to no more than 1"=100':
 - Project Title (cover page)
 - Name and address of applicant (all drawings)
 - Name and address of person/firm who prepared the drawings (all drawings)
 - North Arrow and scale (all drawings)
 - Date of drafting and most recent revision (all drawings)
 - Boundaries of property (all drawings)
 - Grading and drainage plan, including both existing and proposed contours
 - Location, type of construction, and exterior dimensions of all buildings
 - Elevations and design of all proposed buildings
 - Location, design, and type of construction of all parking and loading areas
 - Access and egress for all buildings and parking and loading areas
 - Location, design, and construction details for all existing and proposed site improvements
 - Pedestrian access and circulation
 - Emergency vehicle access and circulation
 - Location, design, and construction details for all utilities provisioning and connection
 - Location, design, and construction details for all proposed signs
 - Landscaping plan and planting schedule, including proposed buffer areas and vegetative cover
 - Outdoor lighting plan, including photometrics
 - Estimated project construction schedule
 - List of all state and county permits required for the project and their status

Please note that the Planning Board or City departments may, at their discretion, require the submission of additional information beyond what is listed above.

City of Rome, New York
Application for Planning Board Review

General Information and Certification

The City of Rome's Planning Board regularly meets the first Tuesday of every month. To be placed on an agenda, a complete application must be submitted to the City's Department of Community and Economic Development at least sixteen (16) calendar days in advance of the upcoming meeting.


Please note that you *must* have a representative in attendance at the meeting in order for your application to be considered.

All required supporting documentation including the required number of copies of plans, documents, drawings and/or other illustrative materials must be submitted in an application packet in order for it to be considered complete. Please refer to the relevant application checklist to confirm that you are submitting all necessary information.

Failure to provide complete information may result in unnecessary delays or revocation of approvals.

I do hereby state that the information submitted is an accurate representation of my request and complete to the best of my knowledge:

Applicant Signature: _____

Owner Signature:  _____

Date: _____

Date: 12/18/24

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

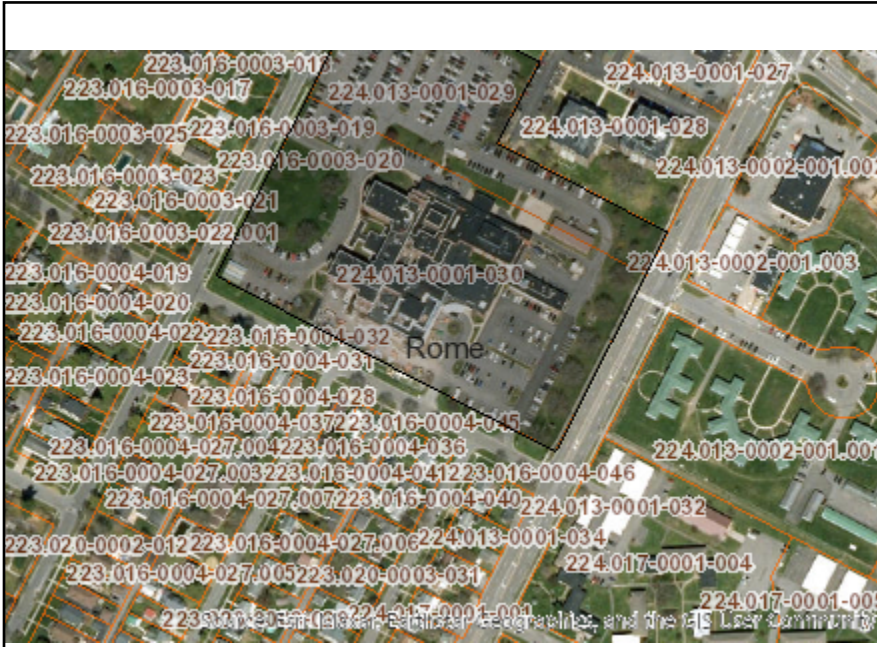
Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
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 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 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:			
5. Urban Rural (non-agriculture) Industrial Commercial Residential (suburban)			
<input type="checkbox"/> Forest Agriculture Aquatic 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 <input type="checkbox"/>	YES <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input 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? 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?	NO <input type="checkbox"/> <input type="checkbox"/>	YES <input 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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	NO <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>	

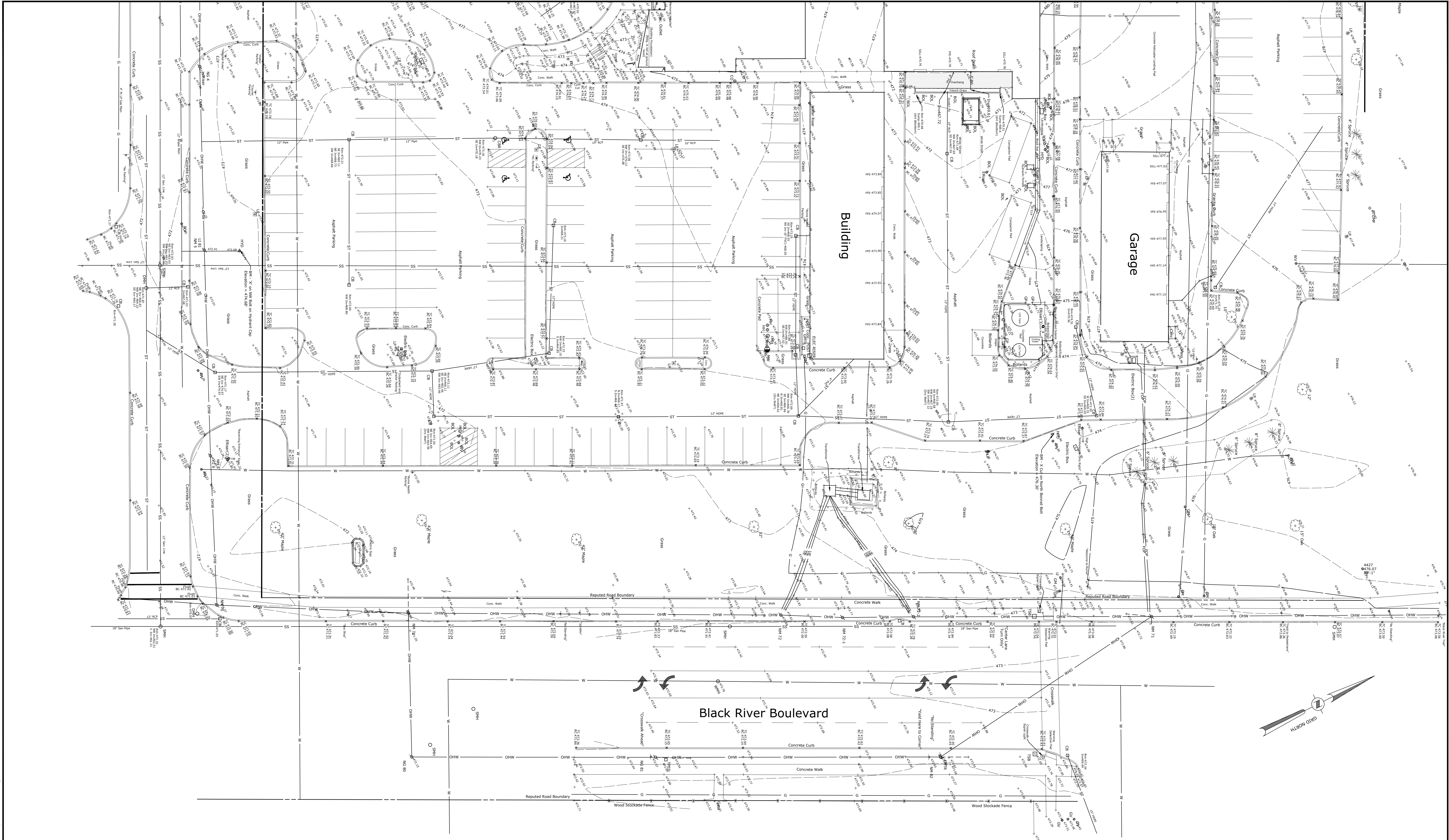
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest Agricultural/grasslands Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban 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
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? 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: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
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)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO	YES
	<input 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? If Yes, describe: _____ _____	NO	YES
	<input 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? If Yes, describe: _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: <u>Nathan Johnson</u> Title: _____		



Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	No
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No



- MAP NOTES**
- 1.) NORTH ORIENTATION IS BASED ON GRID NORTH FROM RTK GPS OBSERVATIONS.
 - 2.) VERTICAL DATUM IS BASED ON NAVD 1988 DATUM FROM RTK GPS OBSERVATIONS.
 - 3.) THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF AN ABSTRACT OR UP TO DATE TITLE REPORT AND IS THEREFORE SUBJECT TO ANY EASEMENTS, RESTRICTIONS, COVENANTS OR ANY STATEMENT OF FACTS THAT SUCH DOCUMENTS MAY DISCLOSE.
 - 4.) UNDERGROUND FACILITIES, STRUCTURES AND UTILITIES HAVE BEEN PLOTTED FROM DATA OBTAINED BY FIELD SURVEY, PREVIOUS MAPS AND RECORDS, (AND PAROLE TESTIMONY). THEREFORE THEIR LOCATIONS MUST BE CONSIDERED APPROXIMATE ONLY. THERE MAY BE OTHER UNDERGROUND UTILITIES, THE EXISTENCE OF WHICH ARE NOT KNOWN TO THE UNDERSIGNED. SIZE AND LOCATION OF ALL UNDERGROUND UTILITIES AND STRUCTURES MUST BE VERIFIED BY THE APPROPRIATE AUTHORITIES PRIOR TO ANY CONSTRUCTION.
 - 5.) ORIGINAL FIELD WORK PERFORMED FROM JANUARY 12, 2021 - DECEMBER 27, 2024. EASTERN PORTION OF SITE FIELD WORK PERFORMED JULY-AUGUST 2024.



2	3
1	



DATE	REVISIONS RECORD/DESCRIPTION	DRAFTER	CHECK	APPR.	UNAUTHORIZED ALTERATION OR ADDITION TO THIS DOCUMENT IS A VIOLATION OF THE NEW YORK STATE EDUCATION LAW.
02/01/21	△ Add addt utilities	dms	dms	dms	© 2024 C.T. MALE ASSOCIATES APPROVED: DRAFTED : TFS/DMS CHECKED : DMS PROJ. NO : 20.0807 SCALE : 1" = 20 FEET DATE : JAN. 27, 2021
03/22/21	△ Update Inverts	dms	dms	dms	
11/19/21	△ Add't Location	dms	dms	dms	
1/27/22	△ Add't Location	tfs	dms	dms	
02/06/22	△ Add MH inverts	dms	dms	dms	
10/17/22	△ Add location on the north end of parking lot	dms	dms	dms	
08/22/24	△ Add remain area of hospital on east side	dms	dms	dms	
	△				

TOPOGRAPHIC SURVEY MAP
FOR A PORTION OF
ROME MEMORIAL HOSPITAL
1500 NORTH JAMES STREET

ONEIDA COUNTY, NEW YORK

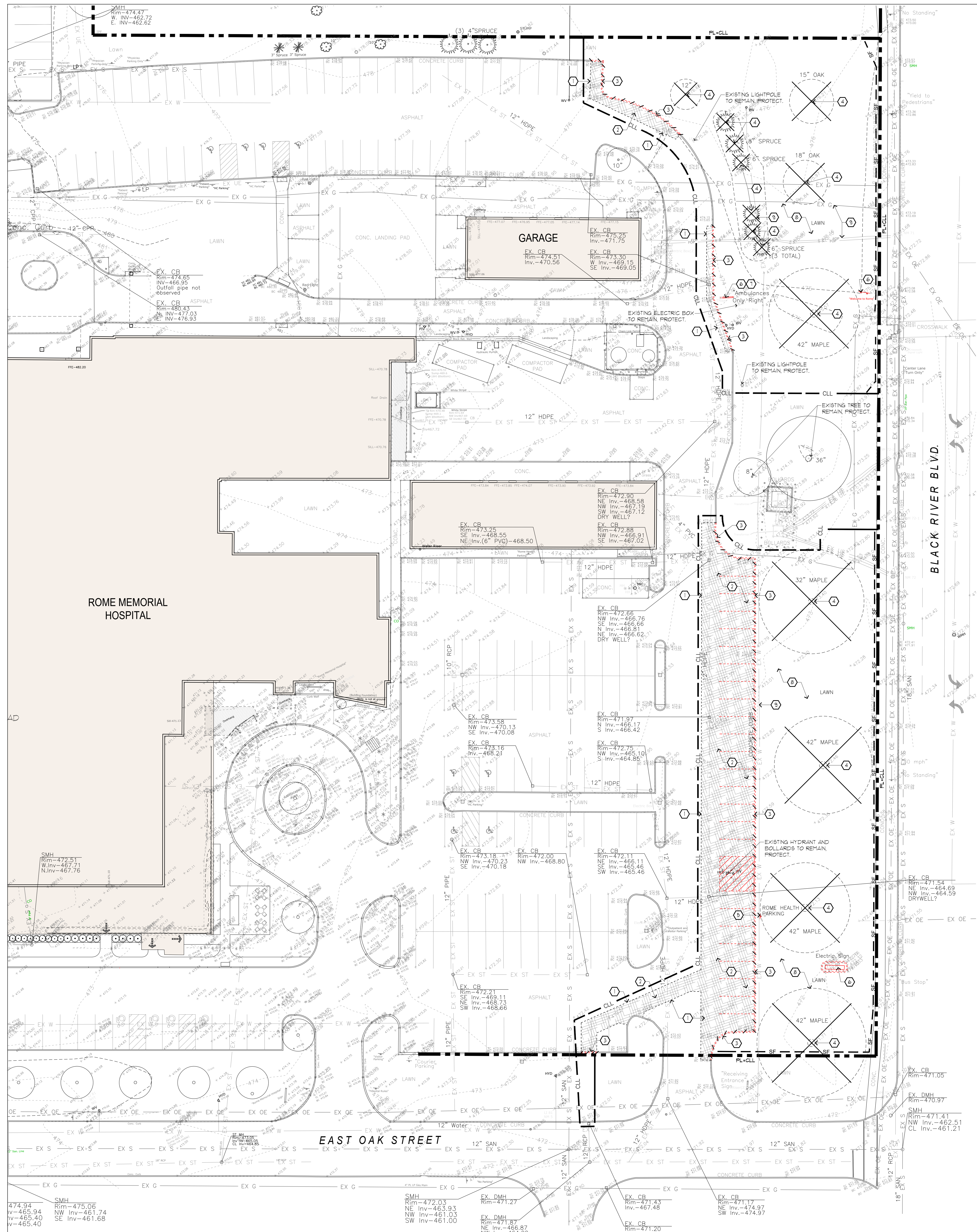
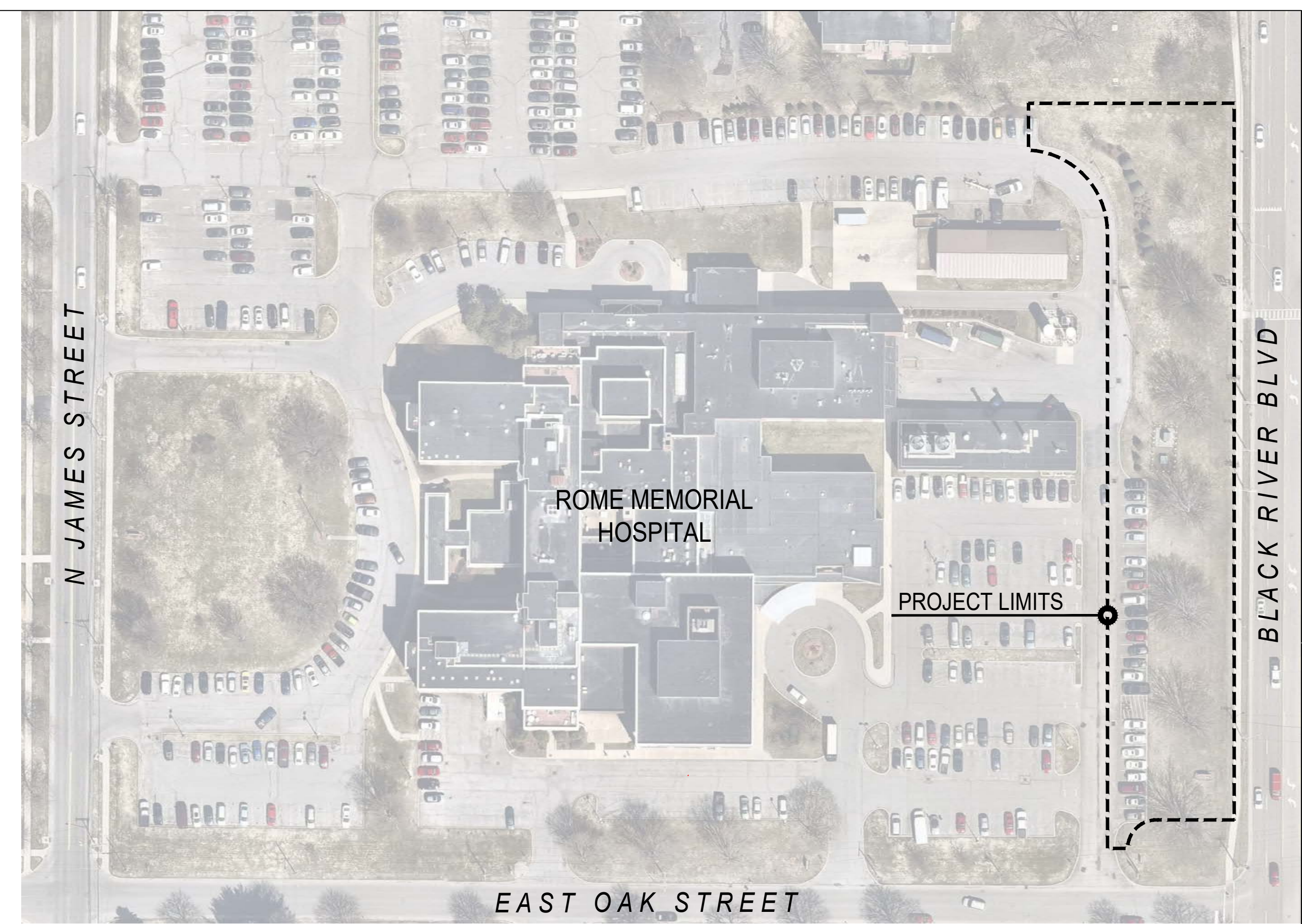
C.T. MALE ASSOCIATES
Engineering, Surveying, Architecture, Landscape Architecture & Geology, D.P.C.
50 CENTURY HILL DRIVE, LATHAM, NY 518.786.7400
COBLESKILL, NY • GLENS FALLS, NY • POUGHKEEPSIE, NY • JOHNSTOWN, NY
LITTLE FALLS, NY • RED HOOK, NY • SYRACUSE, NY
www.ctmale.com

SHEET 3 OF 3
DWG. NO: 22-0101

"ONLY COPIES OF THIS MAP SIGNED IN RED INK AND EMBOSSED WITH THE SEAL OF AN OFFICER OF C. T. MALE ASSOCIATES OR A DESIGNATED REPRESENTATIVE SHALL BE CONSIDERED TO BE A VALID TRUE COPY".

ROME HEALTH PARKING EXPANSION

1500 N JAMES STREET
ROME, NY 13440



- ### EXISTING CONDITIONS & REMOVAL/DEMOLITION NOTES
- 1. ASPHALT PAVEMENT REMOVAL
 - 2. SAUCUT ASPHALT OR CONCRETE PAVEMENT. SAUCUT ASPHALT IN NEAT STRAIGHT LINE AND SAUCUT CONCRETE PAVEMENT AT NEAREST SCORE JOINT.
 - 3. REMOVE EXISTING ASPHALT PAVEMENT INCLUDING SUBBASE MATERIAL.
 - 4. REMOVE EXISTING CURBING IN ITS ENTIRETY AND DISPOSE OF OFF SITE.
 - 5. REMOVE EXISTING TREE AND SHRUB IN ITS ENTIRETY, INCLUDING STUMP AND ROOTS. DISPOSE OF OFF SITE.
 - 6. REMOVE EXISTING PARKING SIGN AND STOCKPILE FOR REUSE.
 - 7. REMOVE EXISTING SIGN AND STOCKPILE FOR REINSTALLATION. DISCONNECTION AND WIRING REMOVAL PER LICENSED ELECTRICIAN. REINSTALL IN LOCATION APPROVED BY HOSPITAL.
 - 8. EXISTING RISER REMOVAL AND RELOCATION PER LICENSED ELECTRICIAN.
 - 9. STRIP EXISTING TOPSOIL AND STOCKPILE FOR REUSE IN LOCATION APPROVED BY CONSTRUCTION MANAGER.
 - 10. SITEWORK CONTRACTOR SHALL VERIFY WATER, GAS AND FIBER OPTIC LINE ELEVATIONS PRIOR TO CONSTRUCTION. NOTIFY LANDSCAPE ARCHITECT OF FINDINGS.

- ### GENERAL NOTES
1. TOPOGRAPHIC AND BOUNDARY SURVEY PREPARED BY C.T. MALE ASSOCIATES DATED JANUARY 21, 2021.
 2. OWNER AND ARCHITECT DO NOT CONFIRM THE COMPLETENESS OR ACCURACY OF SUCH INFORMATION. CONTRACTOR IS RESPONSIBLE FOR THOROUGH EXAMINATION AND VERIFICATION OF ALL EXISTING SURFACE AND SUBSURFACE CONDITIONS AFFECTING THE NATURE, SCOPE, COMPLEXITY AND COST OF THE CONTRACT WORK. ADDITIONAL INFORMATION ON EXISTING CONDITIONS HAS BEEN ADDED TO THE DRAWINGS BASED ON THE LANDSCAPE ARCHITECT'S OBSERVATIONS BUT IS NOT INTENDED TO ALTER THE SURVEY INFORMATION. REFER TO SURVEY NOTES FOR ADDITIONAL INFORMATION.
 3. SAW CUT FOR PAVING REMOVALS. EXTEND REMOVAL LINES TO INCLUDE ANY ADJOINING BROKEN OR DETERIORATING PAVING. CAREFULLY REMOVE, STOCKPILE AND PROTECT FOR REUSE. ANY ITEMS NOTED FOR SALVAGE. ALL DEMOLITION RUBBLE, DEBRIS AND EXCESS SOILS TO BE PROMPTLY REMOVED FROM SITE. STRIP AND STOCKPILE SUFFICIENT EXISTING ORGANIC TOPSOILS FOR RESEEDING AS REQUIRED ON DISTURBED AND REPAIRED AREAS TO BE ESTABLISHED AS LAWN AND FOR REPAIR OF DISTURBED EXISTING LAWNS TO REMAIN. STOCKPILE ALL MATERIALS IN APPROVED LOCATIONS WITHOUT INTERFERING WITH OTHER CONTRACTOR WORK, TRAFFIC OR DRAINAGE.
 4. PROTECT ALL FACILITIES AND IMPROVEMENTS ON AND ADJOINING THE PROPERTY WHICH ARE NOT SPECIFICALLY IDENTIFIED FOR REMOVAL. VERIFY LOCATIONS AND DEPTHS OF ALL SUBSURFACE UTILITIES TO REMAIN PRIOR TO ANY ADJACENT REMOVAL AND EXCAVATION WORK.
 5. ALL EXISTING FEATURES SHALL REMAIN UNLESS OTHERWISE NOTED. IF THE CONTRACTOR DAMAGES ANY OF THE EXISTING ON-SITE FACILITIES TO REMAIN (TREES, PAVEMENTS, UNDERGROUND UTILITIES, STRUCTURES, ETC.) WHETHER SHOWN ON THE PLANS OR NOT, THE CONTRACTOR SHALL REPAIR AND/OR REPLACE SUCH ITEMS AT HIS OWN EXPENSE AND ASSUME ALL RESPONSIBILITY FOR SUCH DAMAGE WITHOUT ANY ADDITIONAL COST TO THE OWNER. REPLACEMENT MATERIAL SHALL BE SAME QUALITY AND QUANTITY AS ORIGINAL.
 6. THE CONTRACTOR SHALL CONFIRM EXISTING GRADES AND LOCATIONS OF ALL EXISTING FEATURES WITHIN THE CONTRACT LIMIT LINE. THE CONTRACTOR SHALL CONTACT THE LANDSCAPE ARCHITECT IMMEDIATELY SHOULD ANY DISCREPANCIES BE FOUND AT (315) 445-1980.
 7. ADJUST RIMS OF UTILITY STRUCTURES TO REMAIN WITHIN AREAS OF GRADE CHANGES TO MEET PROPOSED LINES AND GRADES.
 8. ALL NON-PAVED AREAS ARE TO BE LAWN UNLESS OTHERWISE NOTED.
 9. CONTRACTOR SHALL BLEND NEW WORK SMOOTHLY AND EVENLY WITH EXISTING LINES AND GRADES.
 10. CONTRACTOR SHALL BE RESPONSIBLE FOR LAWN MAINTENANCE WITHIN THE CONTRACT LIMIT LINE. EXISTING LAWNS SHALL BE MOVED AS MUCH AS PRACTICAL TO KEEP AREA FROM LOOKING UNUSUAL. ALL TRASH AND DEBRIS SHALL BE PICKED UP AND DISPOSED OF PROPERLY.

LEGEND

EXISTING	PROPOSED	DESCRIPTION
---	---	CONTOUR
+	+	SPOT ELEVATION
---	---	CURB TAPER/END
---	---	TOP/BOTTOM OF CURB
---	---	TOP/BOTTOM OF WALL
---	---	EXISTING GRADE
---	---	HIGH / LOW POINT
---	---	GUSERAIL
---	---	FENCE
---	---	UTILITY POLE
---	---	WATER LINE
---	---	FIRE HYDRANT
---	---	FORCE MAIN SANITARY LINE
---	---	STORM PIPE
---	---	UNDERDRAN
---	---	SANITARY PIPE
---	---	OVERHEAD ELECTRIC
---	---	UNDERGROUND ELECTRIC
---	---	TELEPHONE
---	---	STORM STRUCTURE
---	---	DRIVEWELL
---	---	CATCH BASIN/MANHOLE
---	---	CLEAN OUT
---	---	SANITARY MANHOLE
---	---	ASPHALT PAVEMENT-PARKING
---	---	ASPHALT PAVEMENT-DRIVE
---	---	CONCRETE PAVEMENT
---	---	TRAFFIC SIGN
---	---	LIGHT POLE (SEE ELECTRICAL PLANS FOR WIRING)
---	---	CURB
---	---	SILT FENCE
---	---	TREE
---	---	SHRUB
---	---	PLANT KEY
---	---	VEGETATION

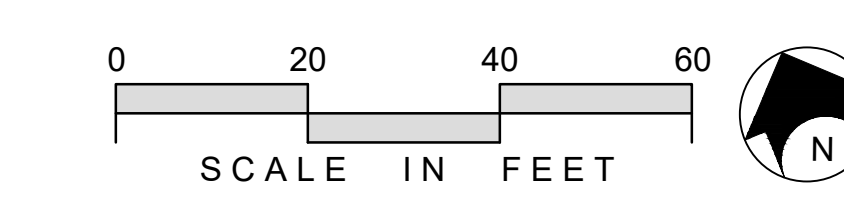
KING + KING PROJ. NO.: 24-22-8538
KEPLINGER FREEMAN ASSOCIATES
 LANDSCAPE ARCHITECTURE & LAND PLANNING
 APPLICANT: Rome Memorial Hospital
 1500 North James Street, Rome, NY 13440
 CONTACT: Allen Hurd (ahurd@romehospital.org)

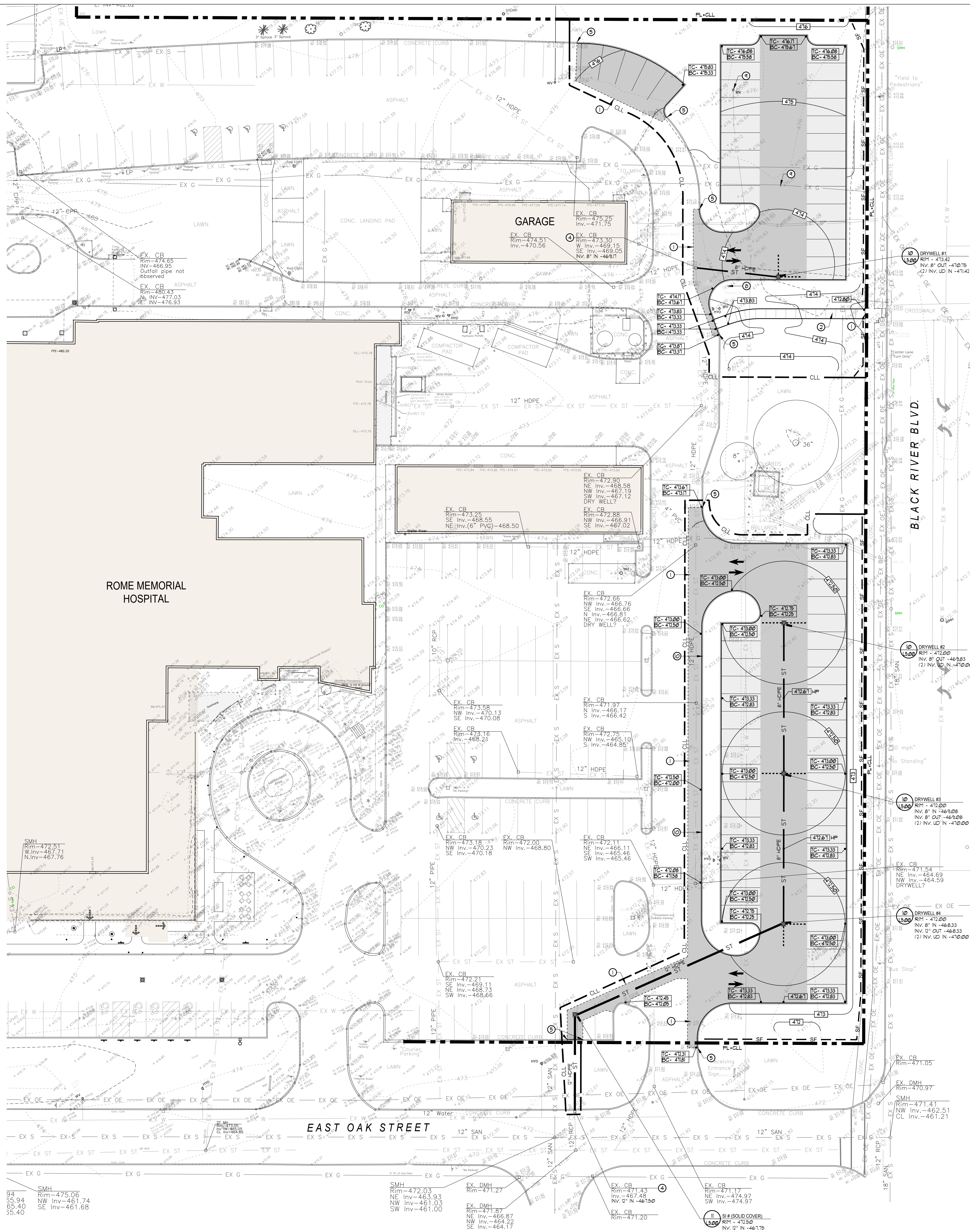
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MARK	DATE	DESCRIPTION

MUNICIPAL REVIEW
 DRAWING DATE: 12/19/2024
 DRAWN BY: NPL
 SCALE: As Noted
 DRAWING TITLE: **SITE PREPARATION PLAN**

1 SITE PREPARATION PLAN
1/100





- GRADING, DRAINAGE & UTILITY NOTES**
- 1 MEET EXISTING LINE AND GRADE.
 - 2 LONGITUDINAL SLOPE SHALL NOT EXCEED 5%. PROVIDE 2% CROSS SLOPE.
 - 3 INSTALL PERFORATED STORM UNDERDRAIN PER DETAIL PER DETAIL.
 - 4 CORE OPENING INTO EXISTING STRUCTURE AND PROVIDE WATERTIGHT CONNECTION.
 - 5 MEET TOP AND FACE OF EXISTING CONCRETE CURB.
 - 6 FIELD VERIFY EXISTING STORM PIPE INVERTS AND INSPECT EXISTING STORM PIPE/STORM STRUCTURE INTEGRITY. REPORT FINDINGS TO LANDSCAPE ARCHITECT AND REPLACE AS NECESSARY.
 - 7 CONTRACTOR TO CONFIRM ELEVATIONS OF EXISTING WATER, GAS AND FIBER OPTIC LINES IN RELATION TO ALL PROPOSED PAVEMENT ELEVATIONS AND UTILITY CROSSING POINTS. REPORT FINDINGS TO LANDSCAPE ARCHITECT.
 - 8 ELECTRIC LINE RELOCATION BY LICENSED ELECTRICIAN.
 - 9 LOWER WATER VALVE TO ELEVATION SHOWN ON PLAN.
 - 10 ADJUST BOTTOM OF CURB ELEVATIONS AS NECESSARY TO PROVIDE POSITIVE DRAINAGE TO EXISTING STORM STRUCTURES.

ROME HEALTH PARKING EXPANSION

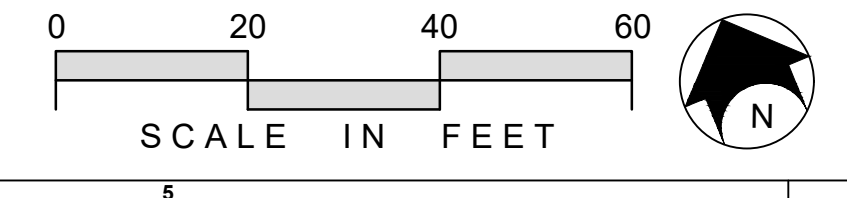
1500 N JAMES STREET
ROME, NY 13440

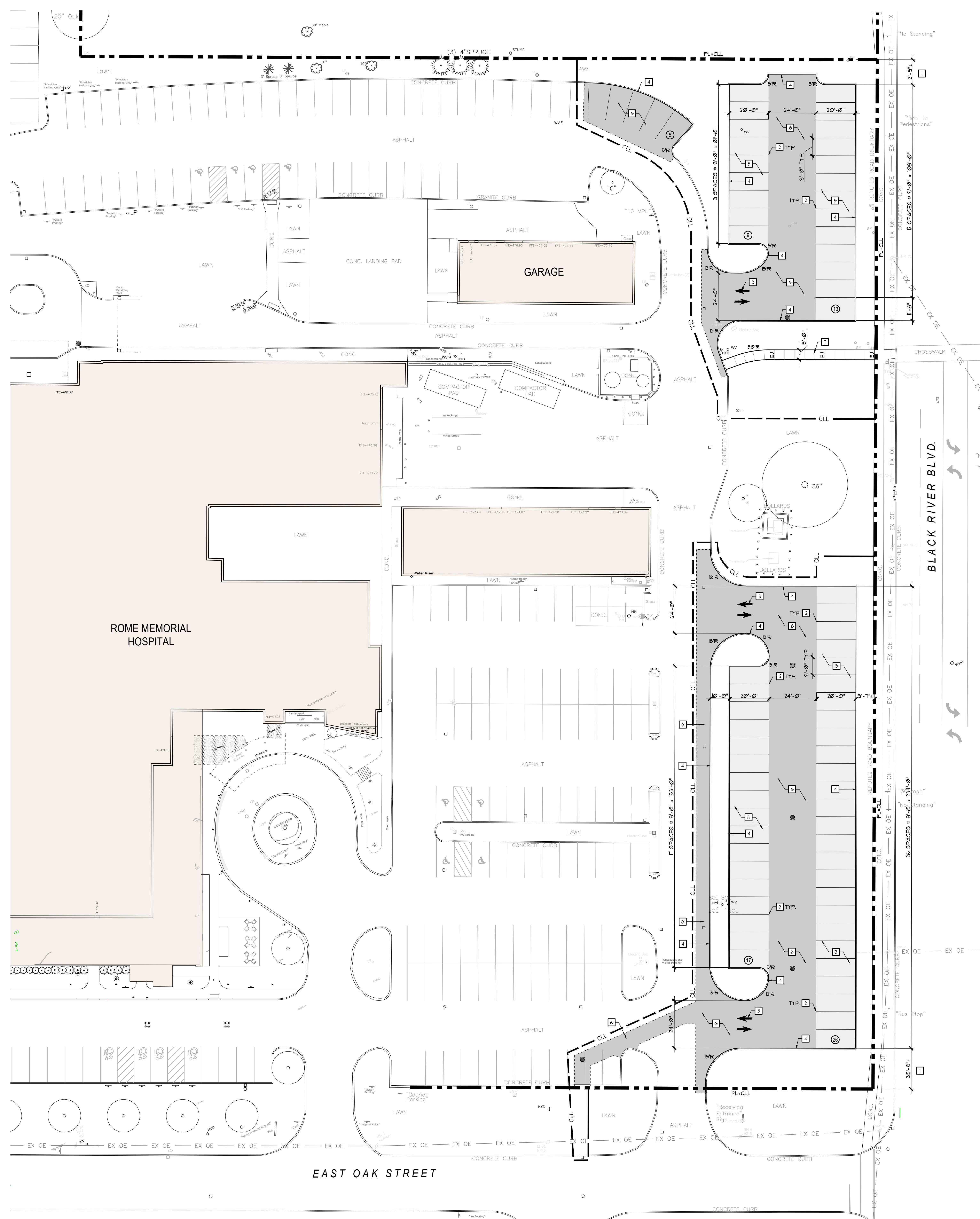
APPLICANT: Rome Memorial Hospital
1500 North James Street, Rome, NY 13440
CONTACT: Allen Hurd (ahurd@romehospital.org)

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MARK	DATE	DESCRIPTION
MUNICIPAL REVIEW		
DRAWING DATE: 12/19/2024		
DRAWN BY: NPL		
SCALE: As Noted		
DRAWING TITLE: GRADING, DRAINAGE and UTILITIES PLAN		

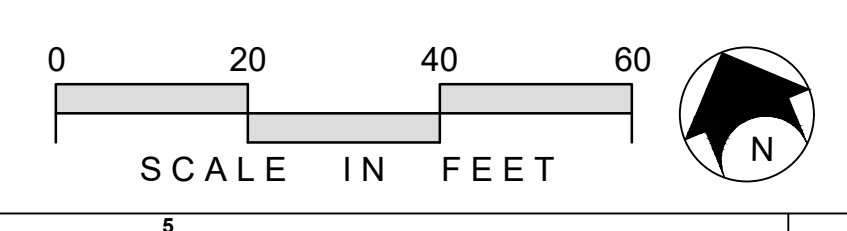
1 GRADING, DRAINAGE and UTILITIES PLAN





- LAYOUT CONSTRUCTION NOTES**
- 1 LAYOUT SHALL BE PARALLEL AND PERPENDICULAR TO PROPERTY LINE.
 - 2 4" WIDE PAINTED LINES (TYP.)
 - 3 PAINT THRU ARROW PER DETAIL 3/1.5.00.
 - 4 INSTALL CONCRETE CURB PER DETAIL 1/1.5.00.
 - 5 INSTALL ASPHALT PARKING PAVEMENT PER DETAIL 2/1.5.00.
 - 6 INSTALL ASPHALT DRIVE PAVEMENT PER DETAIL 3/1.5.00.
 - 7 INSTALL CONCRETE PAVEMENT PER DETAIL 4/1.5.00.

1 LAYOUT PLAN



ROME HEALTH PARKING EXPANSION

1500 N JAMES STREET
ROME, NY 13440

KING + KING PROJ. NO.: 24-22-8538

KEPLINGER
FREEMAN
ASSOCIATES
LANDSCAPE ARCHITECTURE & LAND PLANNING

APPLICANT: Rome Memorial Hospital
1500 North James Street, Rome, NY 13440
CONTACT: Allen Hurd (ahurd@romehospital.org)

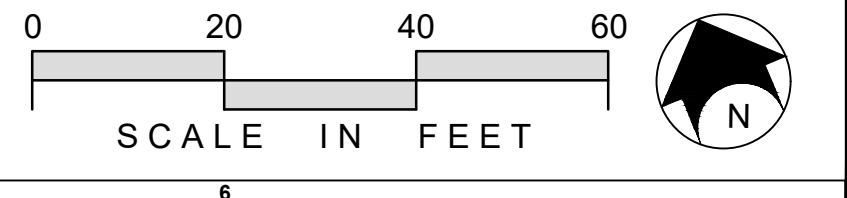
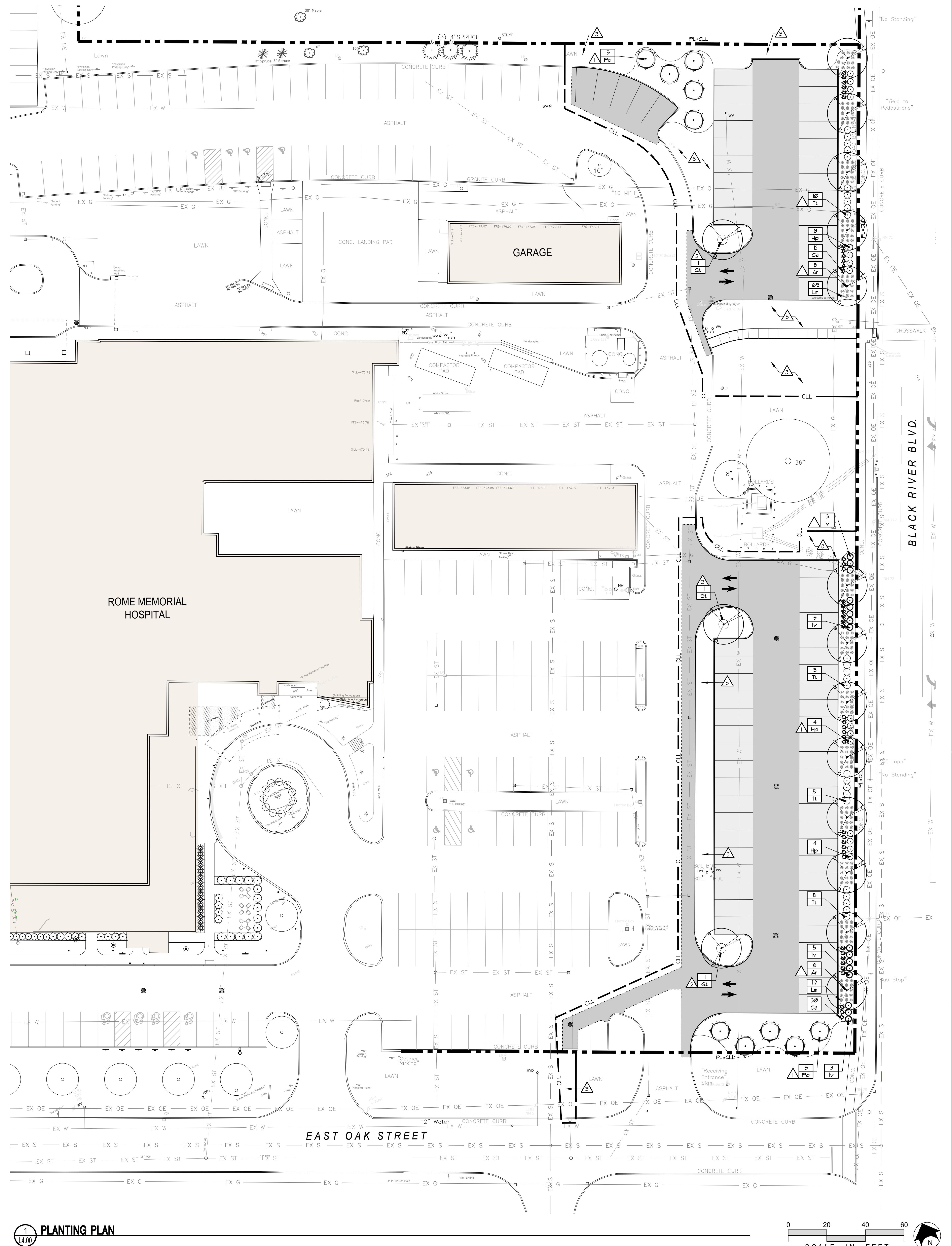
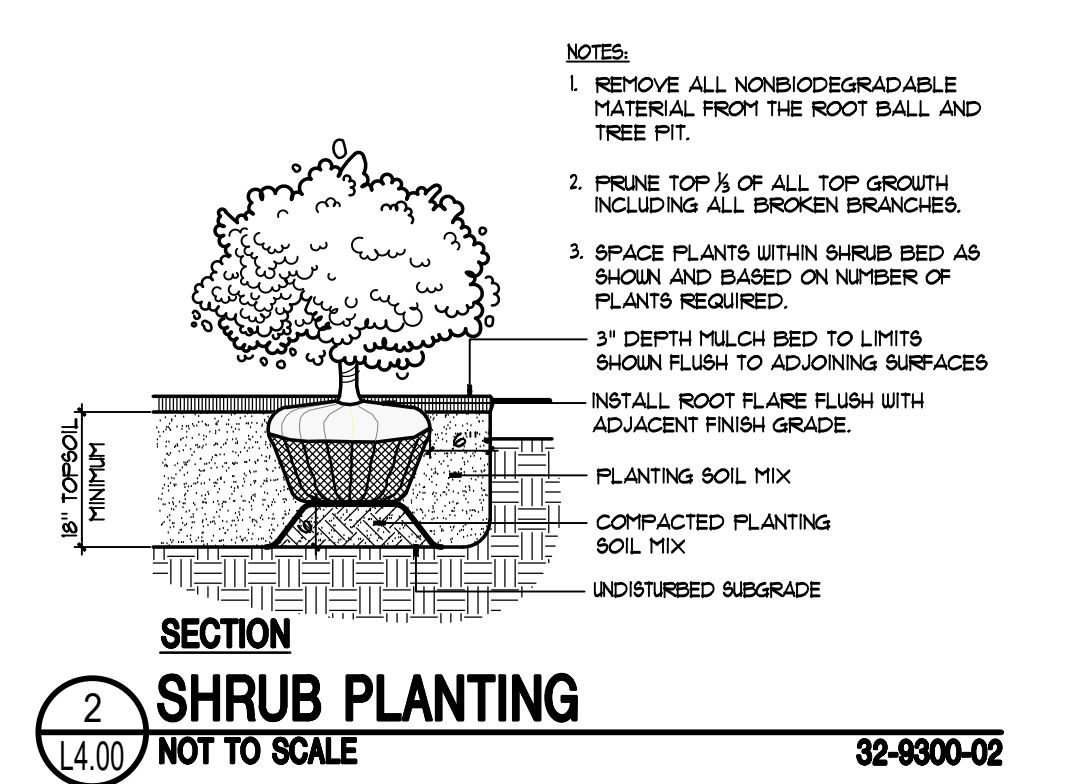
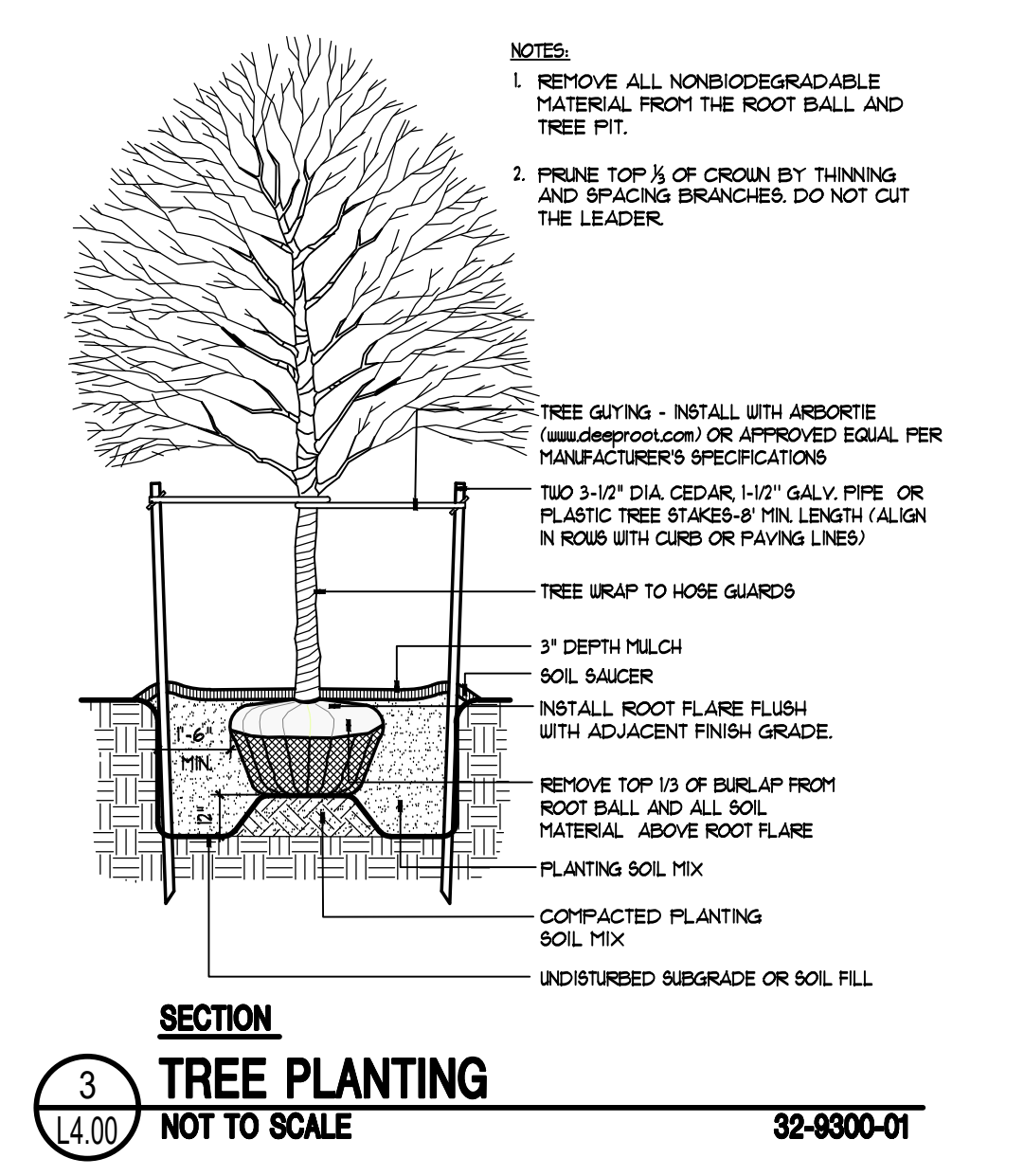
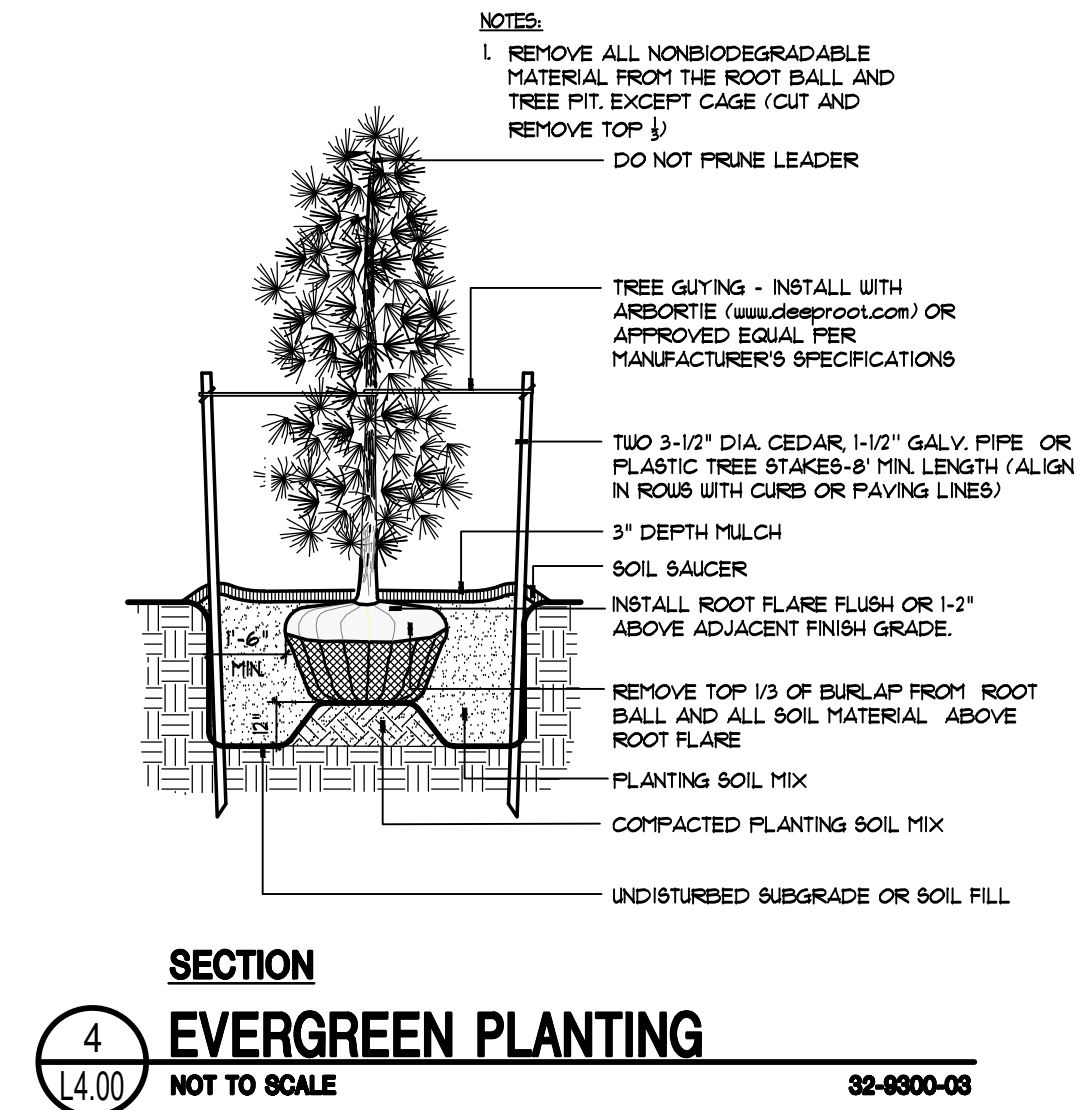
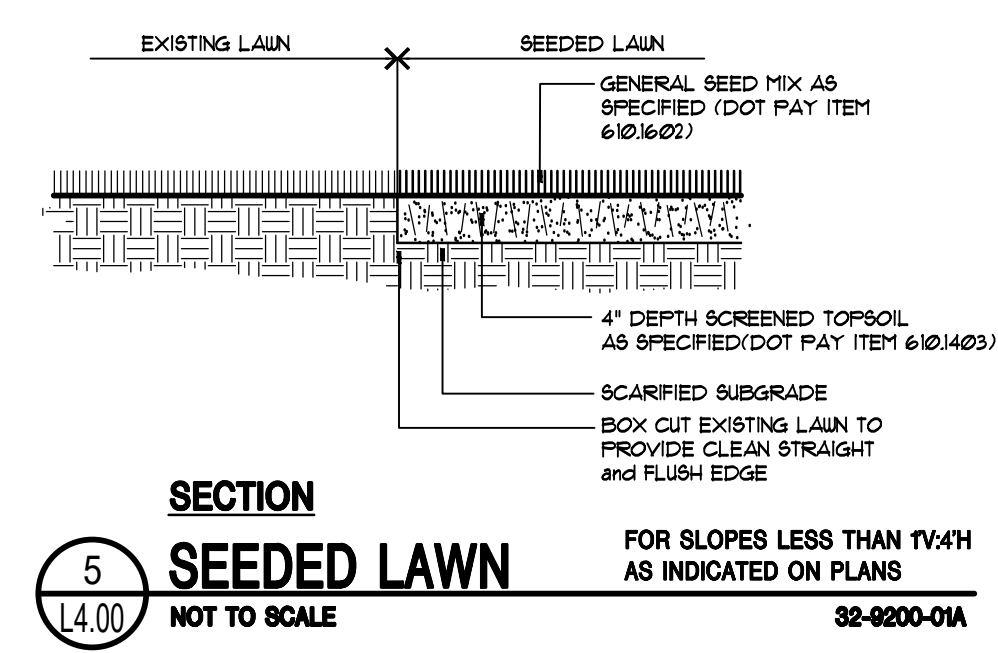
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MARK	DATE	DESCRIPTION
MUNICIPAL REVIEW		
DRAWING DATE: 12/19/2024		
DRAWN BY: NPL		
SCALE: As Noted		
DRAWING TITLE: LAYOUT PLAN		

KEY	COMMON NAME	BOTANICAL NAME	GALIFER	CONDITION	REMARKS
TREES					
A*	ACER RUBRUM 'FRANK JR'	ACER RUBRUM 'FRANKSRED' RED SUNSET	2.5' GAL.	B4B	GALIFER MEASURED 6' ABOVE TOP OF ROOT FLARE
Gt	STREET KEEPER HONEYLOCUST	GLEDITSIA TRIACANTHOS 'DRAVES'	2.5' GAL.	B4B	GALIFER MEASURED 6' ABOVE TOP OF ROOT FLARE
SHRUBS					
Pg	SERBIAN SPRUCE	PICEA OMORICA	-	B4B	6' HEIGHT
Hp	LITTLE QUICK FIRE HYDRANGEA	HYDRANGEA PANICULATA	--	9 GAL.	18" HT. MIN. AT TIME OF PLANTING
Tt	TAUNTON YEW	TAXUS TAUNTONI 'YEN'	--	9 GAL.	18" HT. MIN. AT TIME OF PLANTING
Iv	LITTLE HENRY SWEETSPICE	ITEA VIRGINICA	--	9 GAL.	18" HT. MIN. AT TIME OF PLANTING
PERENNIALS and GRASSES					
Gg	KARE FOENISTER GRASS	CALAMAGROSTIS ACUTIFLORA	2 GAL.	--	
Lm	LILYTURF	LIRIOPE MASCARI	2 GAL.	--	

PLANT NOTES

- 3" DEPTH SHREDDED BARK MULCH WITH 18" OF SCREENED TOPSOIL. SEEDED LAWN PER DETAIL 5L4.00.
- 5' DIAMETER MULCH CIRCLE WITH SPADE CUT EDGE.



ROME HEALTH PARKING EXPANSION

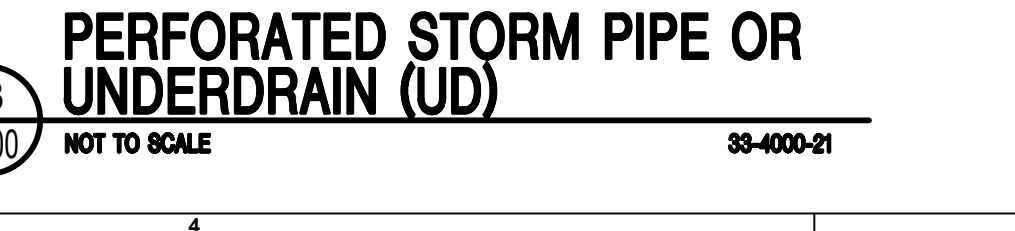
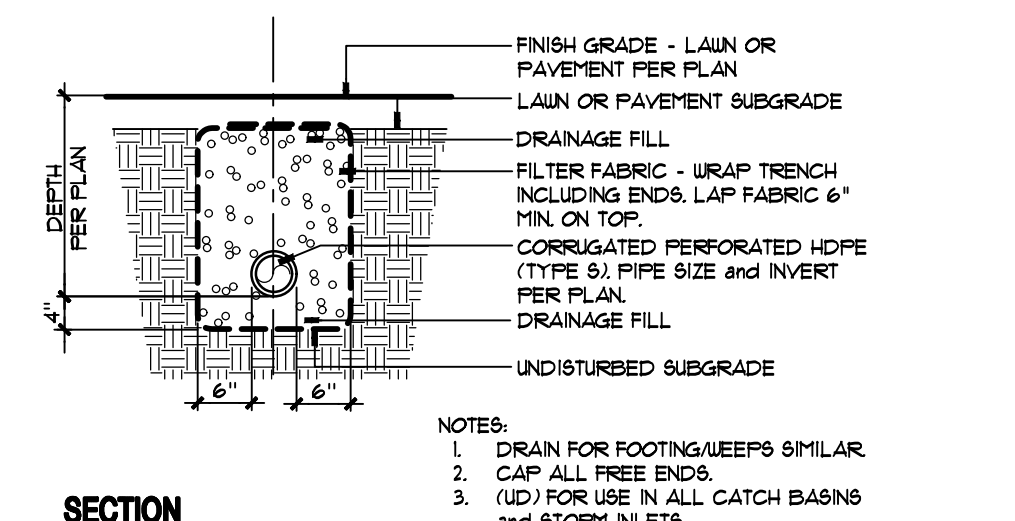
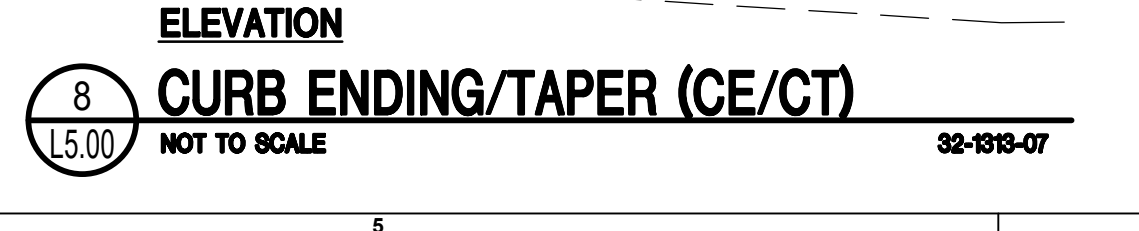
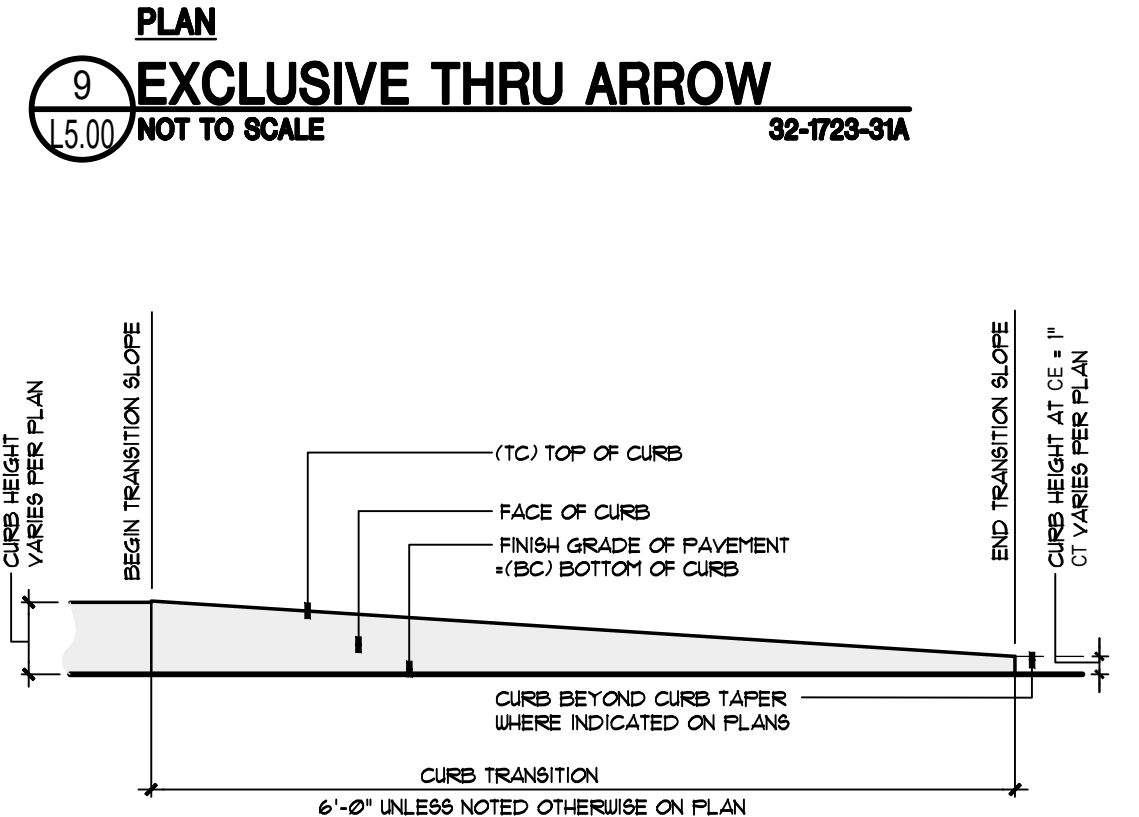
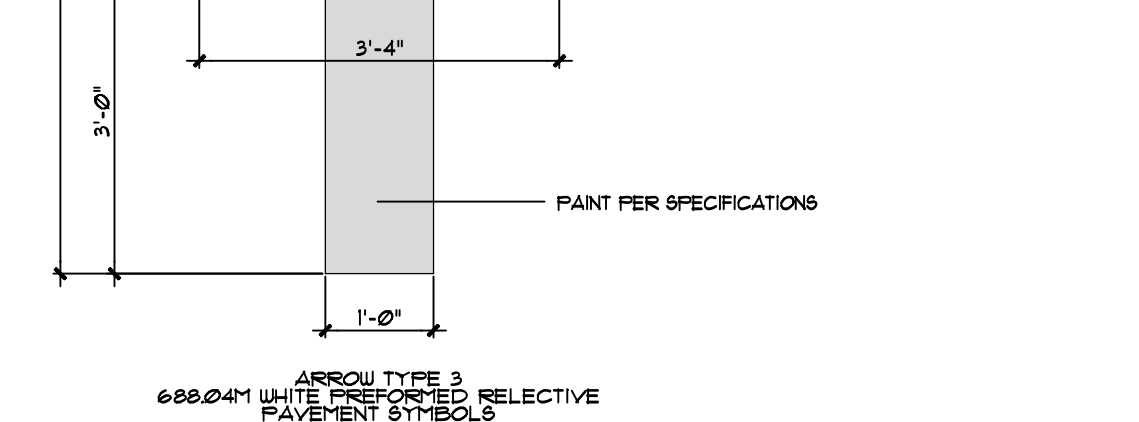
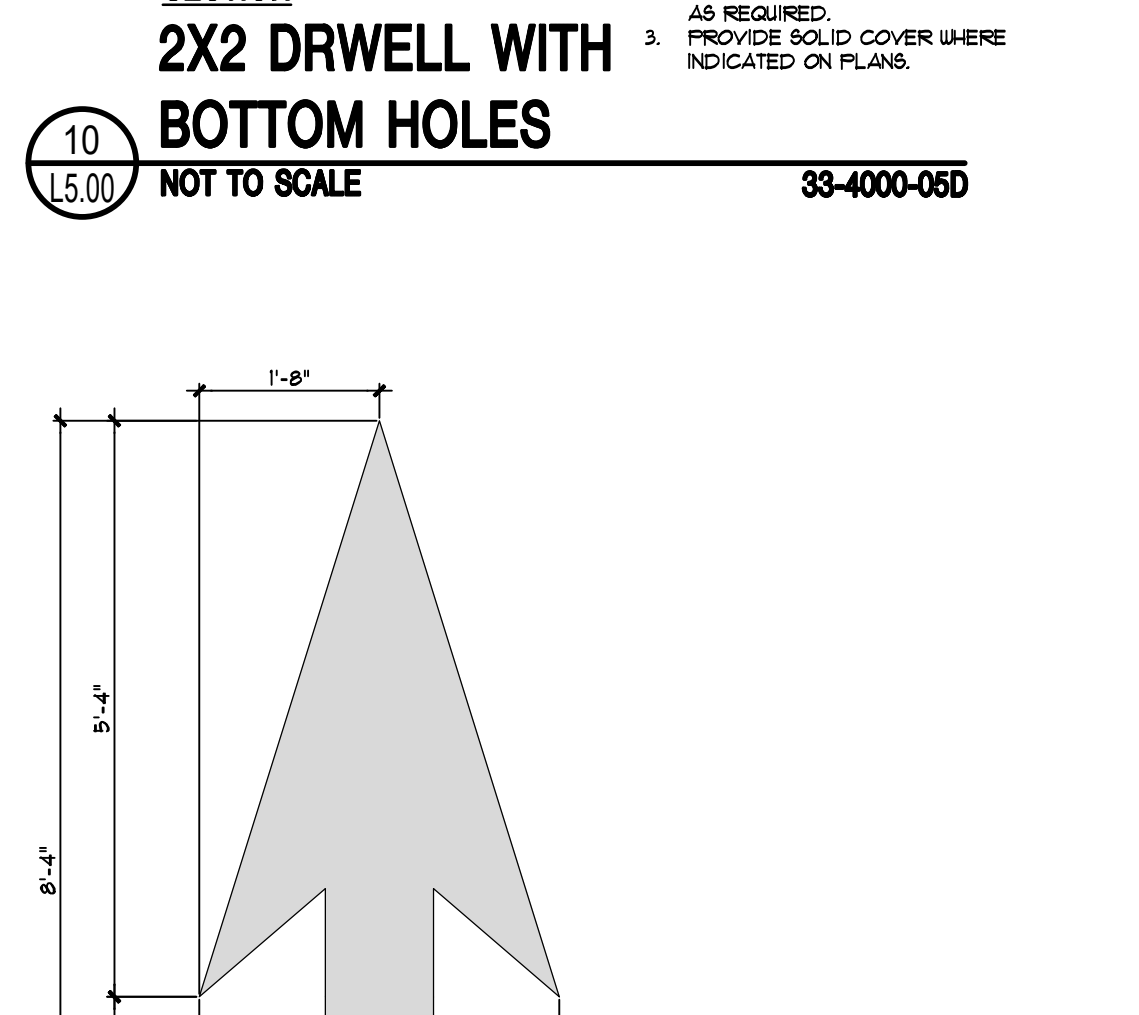
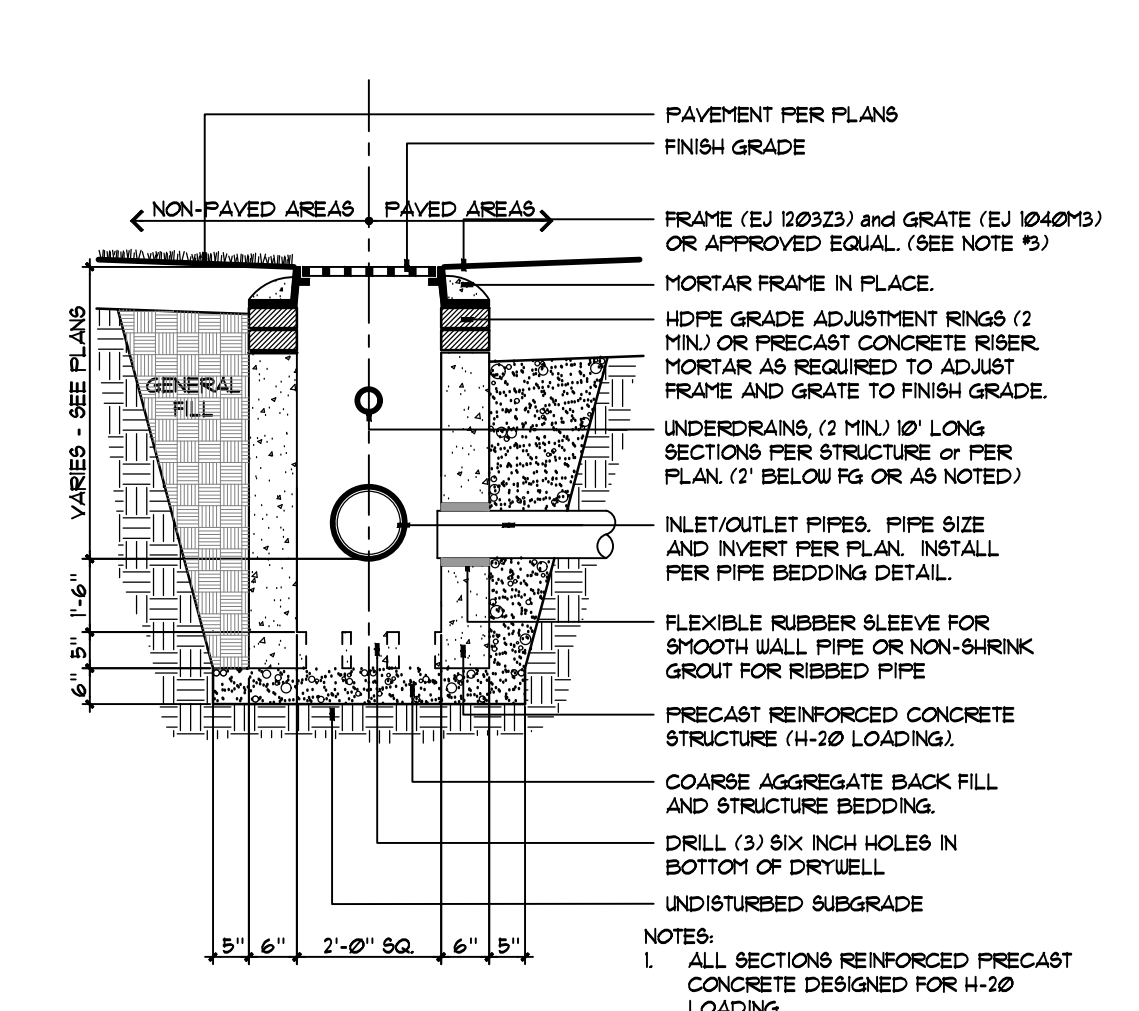
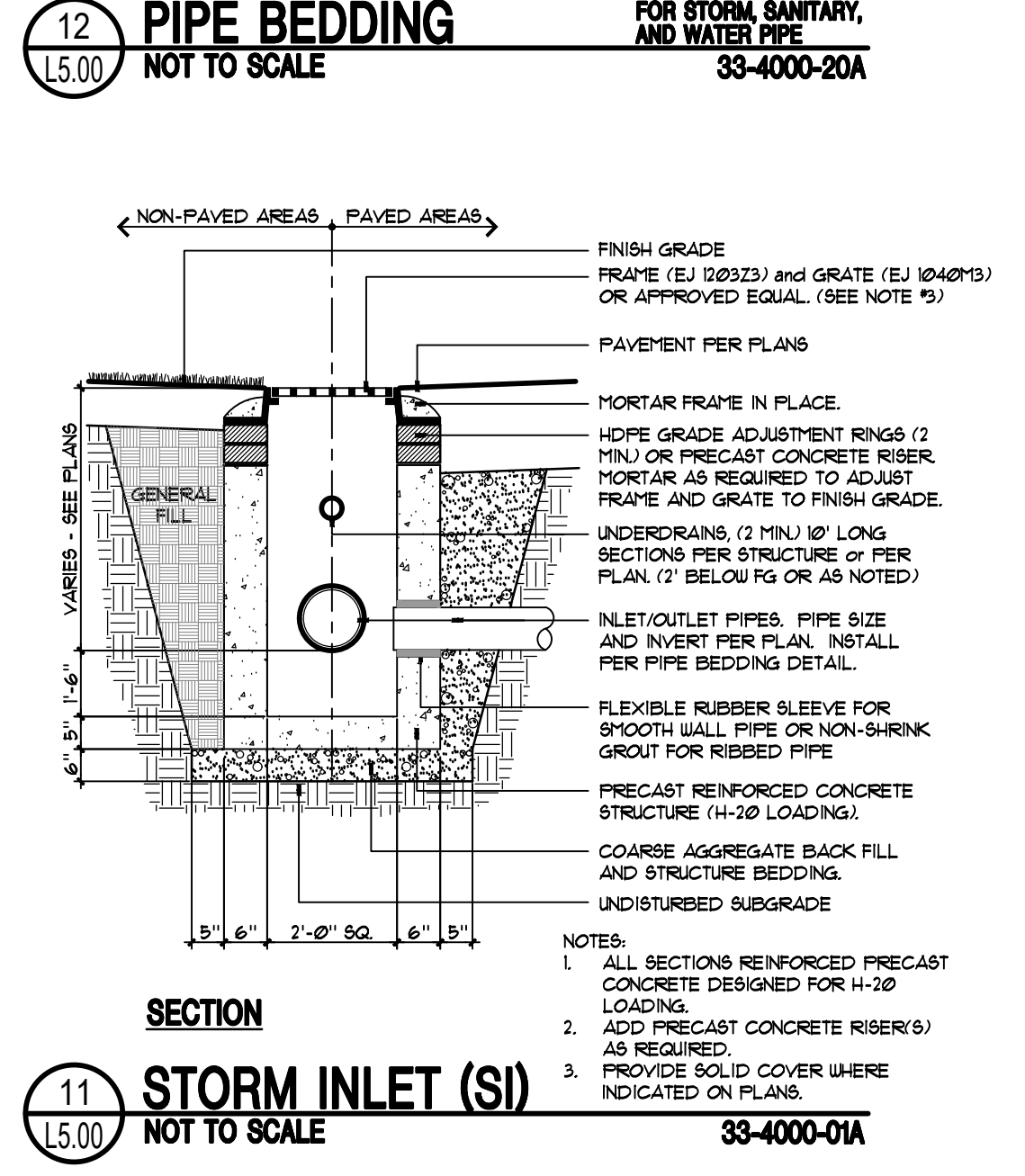
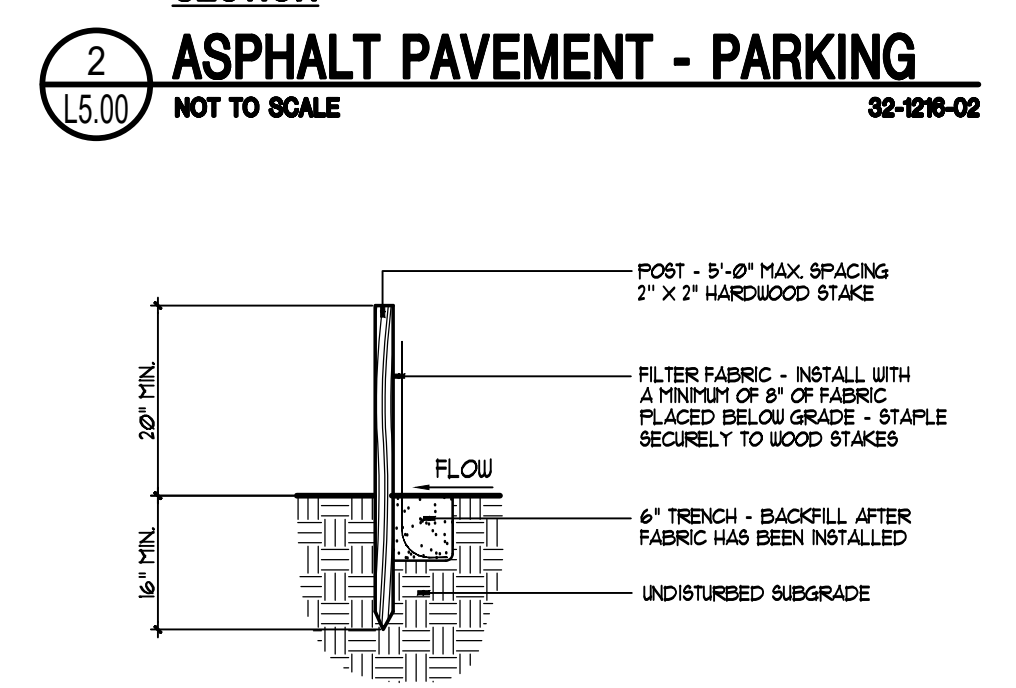
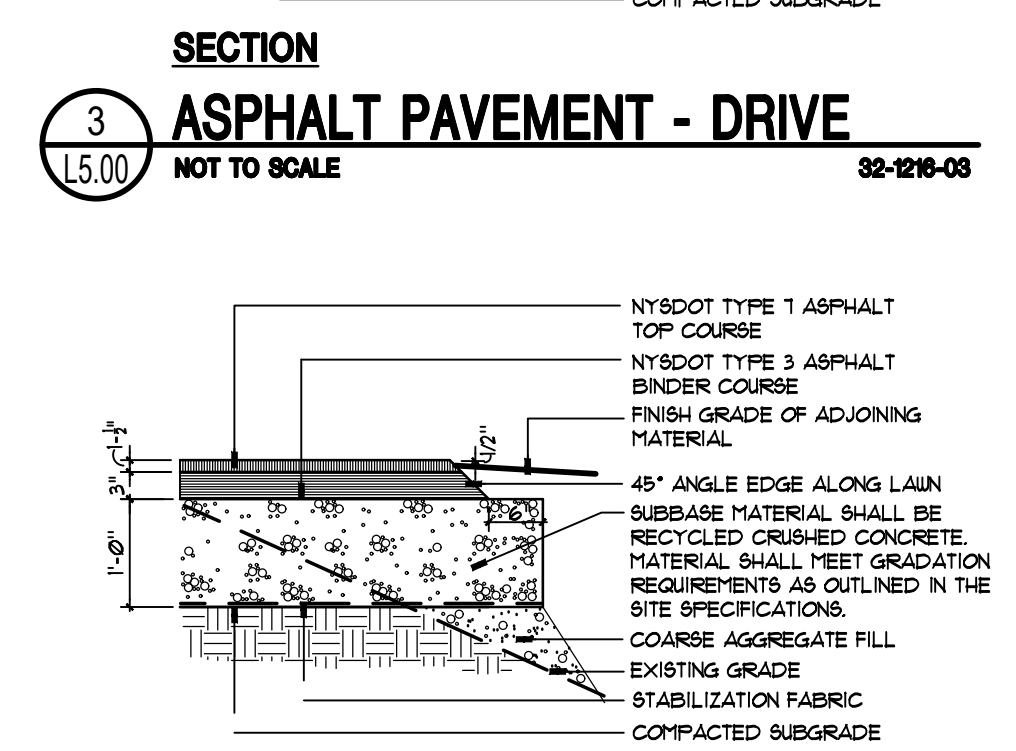
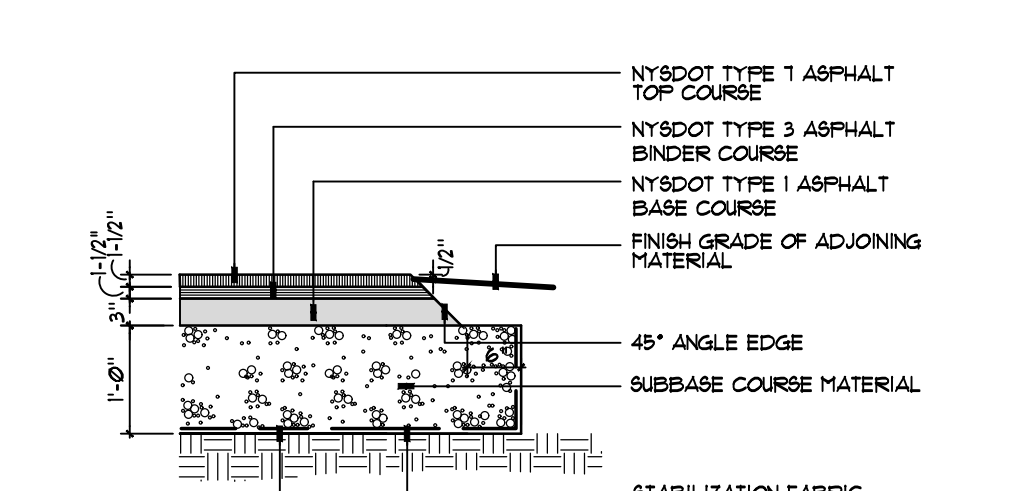
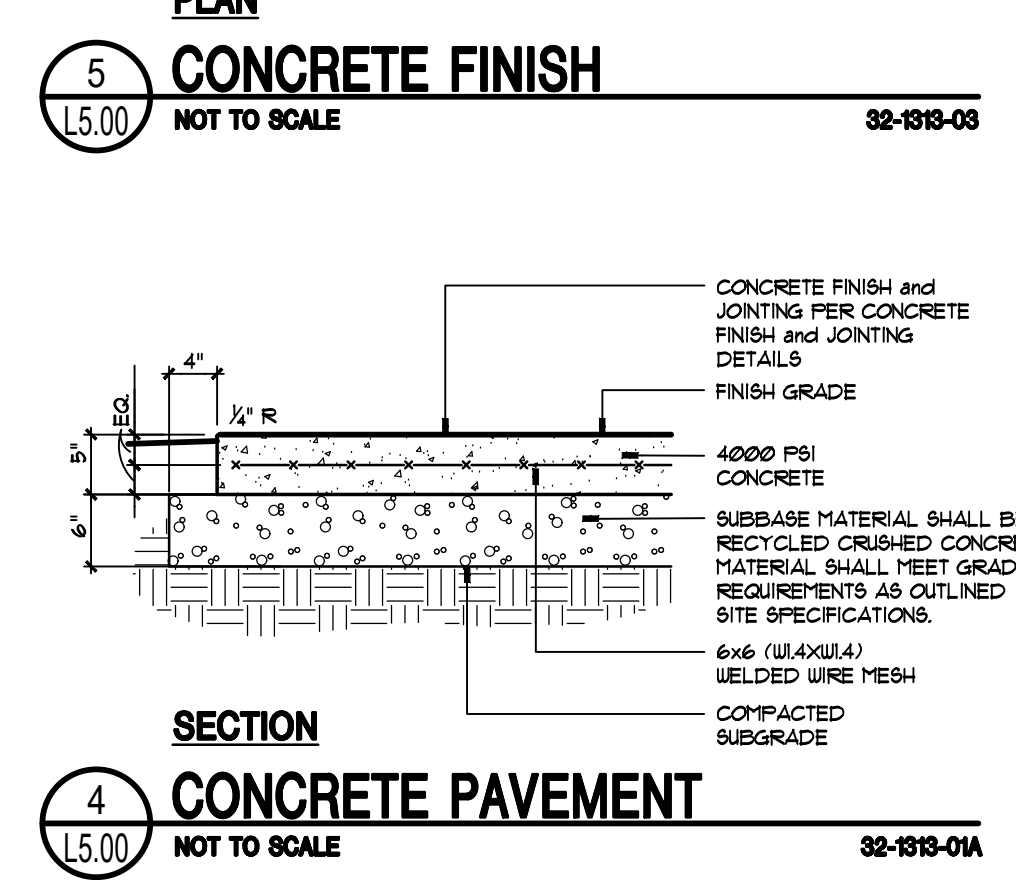
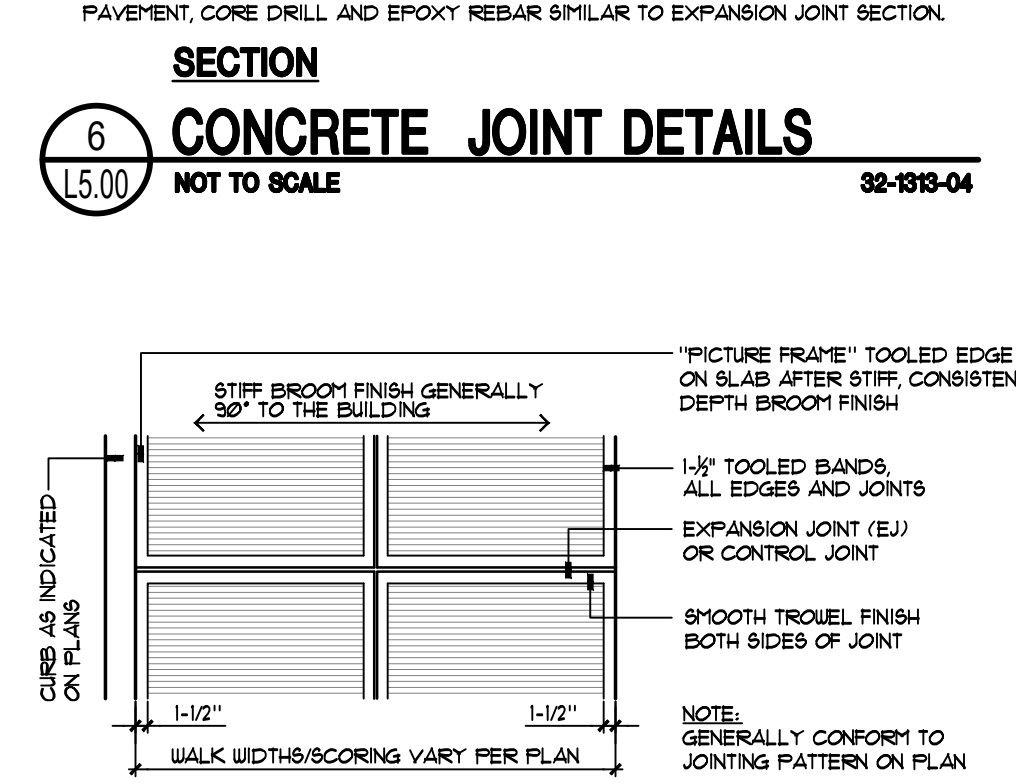
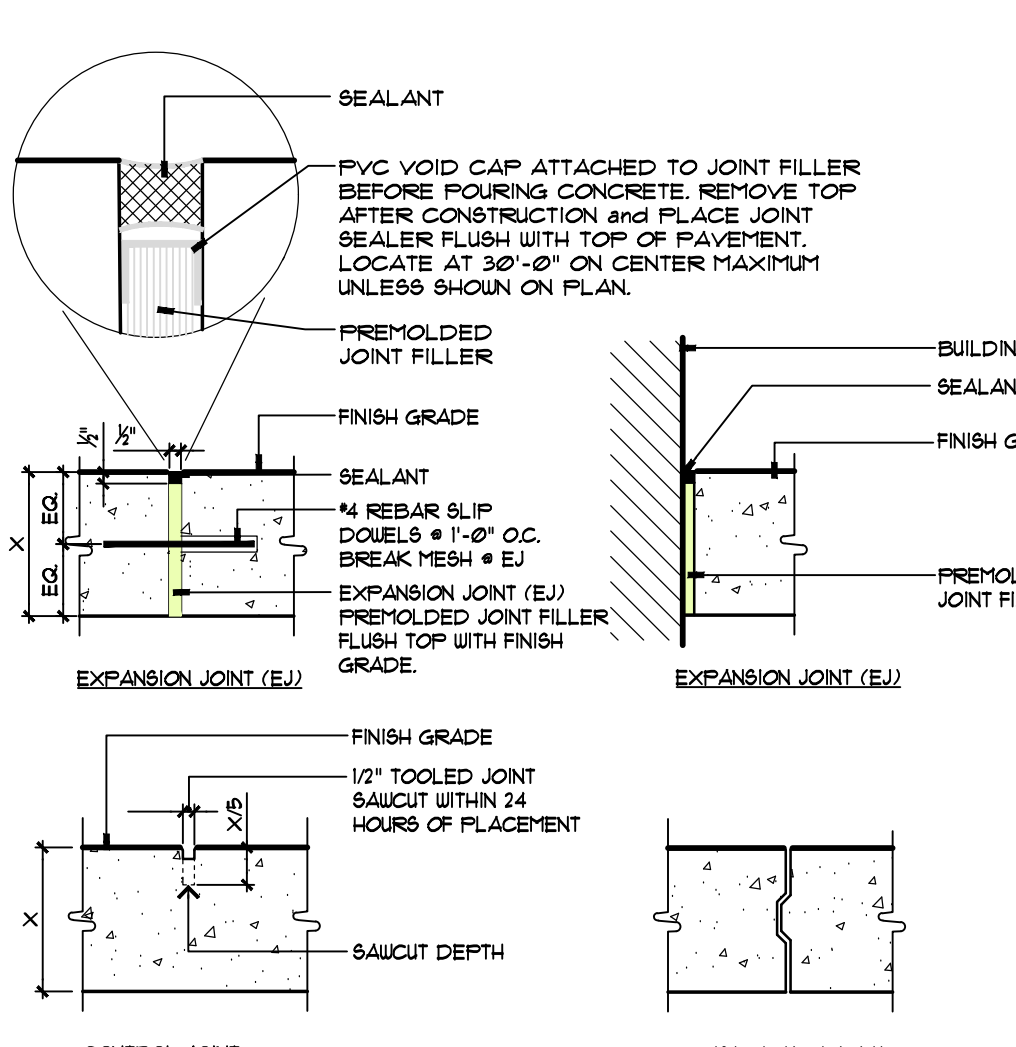
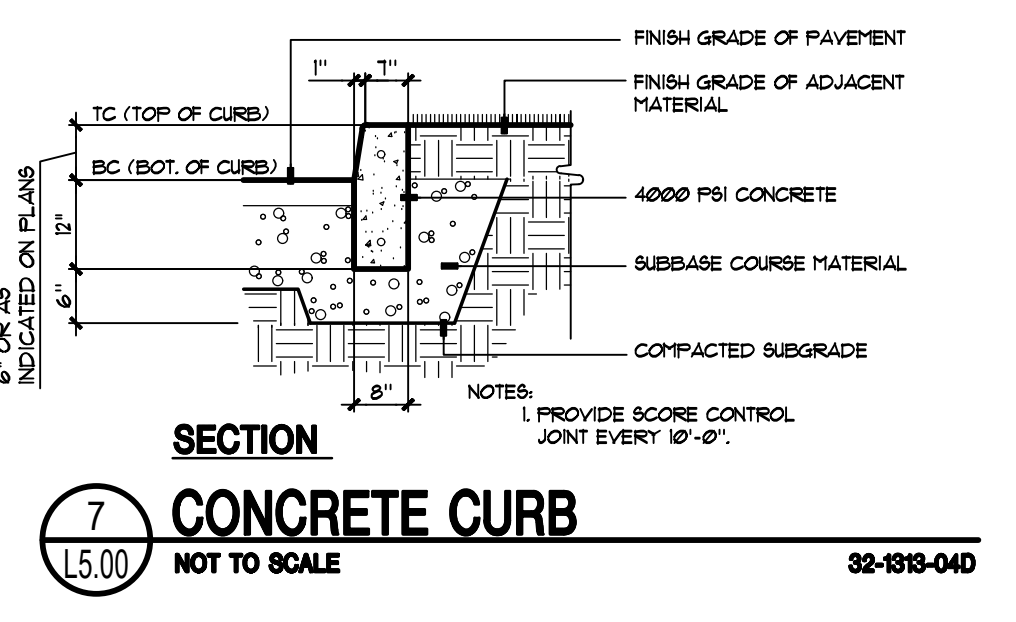
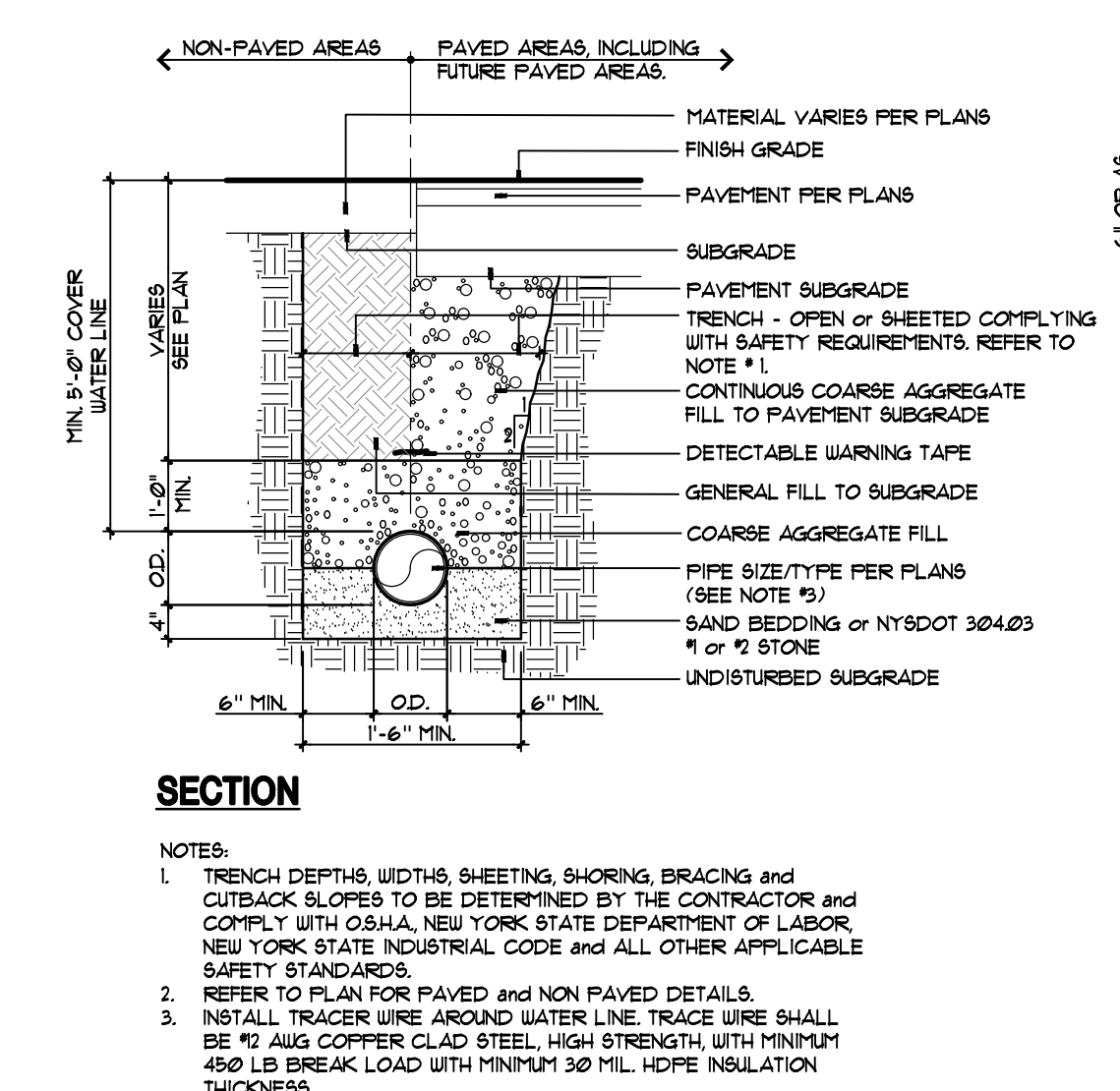
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 KEPLINGER FREEMAN ASSOCIATES
 LANDSCAPE ARCHITECTURE & LAND PLANNING
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 1500 North James Street, Rome, NY 13440
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