



Schoharie County Planning Commission

276 Main Street, Suite 2
PO Box 396
Schoharie, New York 12157
(518) 295-8770 / Fax (518) 295-8788

Fred Risse
Chair

This case documentation constitutes an official referral to the Schoharie County Planning Commission under New York State General Municipal Law, Sections 239-l,-m and-n. Please note that failure to provide complete information may delay the County's Planning Commissions ability to render a decision on the referral. Please contact the Schoharie County Planning and Development Agency at (518) 295-8770 for additional information.

Referring Municipality: Village of Schoharie

Referring Agency (please circle one): Legislative Board Planning Board Zoning Board of Appeals

Project Name: Schoharie Dental - Application to Expand Existing Waiting Room

Applicant: Dr. Hazem Elbially

Project Location: 229 Main St. Schoharie, NY 12157

County Tax Parcel Number: Section 72.17 Block 1 Lot 6

Parcel Size: 1.51 acres Current Zoning: Residential with mixed use overlay

Square footage of existing building (if applicable): 8,390 sq ft

Square footage after building expansion (if applicable): 8,702 sq ft

Project Description: (attach additional pages if necessary) _____

One floor addition to the first floor of the original historic home known as Mainbridge to serve as additional patient waiting room area for Schoharie Dental. See attached narratives, elevations and plans.

Type of Action (please circle all that apply):

Site Plan Review Subdivision Review

Area Variance Use Variance

Rezoning Special Use Permit

Adoption/Amendment of Zoning Ordinance or Local Law

Adoption/Amendment of Comprehensive Plan

Other authorization under provisions of zoning ordinance or local law (please specify) _____

Jurisdictional Determinant (project located within 500 feet of any of the following existing or proposed facilities)
(please circle all that apply):

- Municipal Boundary
- State or County Road
- State or County Park
- Farm in a designated Agricultural District
- State or County Property
- State or County Facility
- County-owned stream or drainage channel
- Other Recreation Area (please specify) _____

State Environmental Quality Review (SEQR) Status (please circle one):

- Type I
- Type II
- Unlisted Action

Determination of Significance (please circle one):

- Positive Declaration
- Negative Declaration
- Not Issued

Status of Local Approval:

Public Hearing Scheduled: YES NO If yes, hearing date: February 12, 2024

Supporting Documentation Included With This Referral (please circle all that apply):

- Location Map
- Municipal Application Form
- Project Narrative
- Environmental Impact Statement
- Subdivision Plat
- Environmental Assessment Form
- SEQR Determination of Significance
- Other Survey, Site Plan, Floor plan, Elevation, Letters of 12/30/23 and 1/11/24 by the applicant providing project narrative and analyzing special use and parking

Submitted by:

Name: Thomas Hitter Title: Chair

Department/Agency: Village of Schoharie Planning Board

Address: 300 Main St. Schoharie, NY 12157

Phone Number: 518 421 6654 Fax Number: 518-295-8501

E-mail Address: Thitter54@Gmail.com

Date of Submission: 1/29/24

SUBMIT COMPLETED FORM AND SUPPORTING DOCUMENTATION TO:
Schoharie County Planning Commission
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