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February 2, 2018

City of Utica Planning Board
c/o Department of Urban &
Economic Development
Mr. Fred Matrulli, Chairperson
1 Kennedy Plaza
Utica, New York 13502

Re: *SEQRA Lead Agency Coordination*

Dear Mr. Matrulli:

The Oneida County Local Development Corporation (“LDC”) has received an application from Mohawk Valley Health System (“MVHS”) requesting certain financial assistance including the issuance of tax-exempt bonds and an exemption from mortgage recording tax that may be imposed on mortgages securing the Bonds in connection with MVHS’s project to construct a new hospital in the City of Utica (the “Project”). Specifically, the Project consists of the construction of a ±672,000 square foot hospital building, together with related parking facilities and physician’s office building and all infrastructure to support the same situated on 25± acres of land located in the City of Utica, Oneida County, New York all for the purpose of creating an advanced and integrated health care delivery system that will benefit all residents in the Mohawk Valley.

MVHS prepared Part 1 of the full Environmental Assessment Form (“EAF”) for the Project pursuant to regulations implementing the State Environmental Quality Review Act (“SEQRA”). A copy of Part 1 of the full EAF, together with the LDC application and all exhibits thereto, is enclosed for review. The LDC has identified the proposed Project as a Type I action under SEQRA. SEQRA requires a coordinated review with all involved agencies for Type I actions. Therefore, a lead agency must be agreed upon.

Your agency has been identified as a potential involved agency in the SEQRA process due to your possible approval responsibilities in connection with the Project. Based on the scope and nature of the Project, as well as the staffing requirements and knowledge base required to complete a coordinated SEQRA review for the Project, the LDC believes that its jurisdiction with respect to the Project is not as broad as that of other involved agencies, such as the City of Utica Planning Board. Accordingly, the LDC will not serve as the lead agency for the Project and instead expresses its desire for the City of Utica Planning Board to assume the role of the lead agency.

As a potential Involved Agency, within 30-days of the date of this letter, we respectfully request your agency’s position with respect to lead agency designation and any preliminary comments your agency may have in connection with the Project. Your response and input should be returned to the attention of Ms. Shawna Papale, 584 Phoenix Drive, Rome, NY 13441, by the close of business on March 3, 2018. A failure

to respond by that date shall be construed as an indication that your agency does not desire to become the lead agency.

Thank you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Shaun Pgal". The signature is written in black ink and is positioned to the right of the word "Sincerely,".

Oneida County Local Development Corporation

**Full Environmental Assessment Form
Part 1 - Project and Setting**

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Sponsor Information.

| | | |
|--|-----------|---|
| Name of Action or Project: Mohawk Valley Health System (MVHS) Integrated Health Campus | | |
| Project Location (describe, and attach a general location map): City of Utica, NY (see Figure 1) | | |
| Brief Description of Proposed Action (include purpose or need): See Attachments 1 and 2 for a description of the Proposed Action and Site Layout, respectively. | | |
| Name of Applicant/Sponsor: MVHS (Attn: Mr. Robert C. Scholefield, RN, MS; Executive VP, Chief Operating Officer) | | Telephone: 1-315-801-4978 |
| | | E-Mail: bscholefield@mvhealthsystem.org |
| Address: 2209 Genesee Street | | |
| City/PO: Utica | State: NY | Zip Code: 13501 |
| Project Contact (if not same as sponsor; give name and title/role): | | Telephone: |
| | | E-Mail: |
| Address: | | |
| City/PO: | State: | Zip Code: |
| Property Owner (if not same as sponsor): Multiple property owners (see Attachment 3). These parcels will be acquired by MVHS. | | Telephone: |
| | | E-Mail: |
| Address: | | |
| City/PO: | State: | Zip Code: |

B. Government Approvals See Attachment 4 for a listing of permits and approvals.

| B. Government Approvals, Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.) | | |
|---|---|---|
| Government Entity | If Yes: Identify Agency and Approval(s) Required | Application Date (Actual or projected) |
| a. City Council, Town Board, <input type="checkbox"/> Yes <input type="checkbox"/> No or Village Board of Trustees | | |
| b. City, Town or Village <input type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission | | |
| c. City Council, Town or <input type="checkbox"/> Yes <input type="checkbox"/> No Village Zoning Board of Appeals | | |
| d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| i. Coastal Resources. | | |
| i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| iii. Is the project site within a Coastal Erosion Hazard Area? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

C. Planning and Zoning

| | |
|--|---|
| C.1. Planning and zoning actions. | |
| Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <ul style="list-style-type: none"> • If Yes, complete sections C, F and G. • If No, proceed to question C.2 and complete all remaining sections and questions in Part 1 | |
| C.2. Adopted land use plans. | |
| a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| If Yes, identify the plan(s): | |
| <u>NYS Heritage Areas: Mohawk Valley Heritage Corridor</u> <u>Source: https://parks.ny.gov/historic-preservation/heritage-areas/documents/MohawkValleyUrbanHeritageArea.pdf</u> | |
| c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| If Yes, identify the plan(s): | |
| <hr/> <hr/> <hr/> | |

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No
 If Yes, what is the zoning classification(s) including any applicable overlay district?
Central Business District (CBD)

b. Is the use permitted or allowed by a special or conditional use permit? Yes No

c. Is a zoning change requested as part of the proposed action? Yes No
 If Yes,
 i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

a. In what school district is the project site located? Utica City School District

b. What police or other public protection forces serve the project site?
Utica Police Department

c. Which fire protection and emergency medical services serve the project site?
Utica Fire Department

d. What parks serve the project site?
The City of Utica owns and operates parkland within the City limits; no parkland is located within the project limits.

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Healthcare

b. a. Total acreage of the site of the proposed action? _____ ± 25 acres
 b. Total acreage to be physically disturbed? _____ ± 25 acres
 c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ * acres *The applicant is negotiating with current property owners.

c. Is the proposed action an expansion of an existing project or use? Yes No
 i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? Yes No
 If Yes,
 i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)
Resubdivision to consolidate parcels under single ownership.
 ii. Is a cluster/conservation layout proposed? Yes No
 iii. Number of lots proposed? _____ ± 2
 iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will proposed action be constructed in multiple phases? Yes No
 i. If No, anticipated period of construction: _____ ± 44 months
 ii. If Yes:
 • Total number of phases anticipated _____
 • Anticipated commencement date of phase 1 (including demolition) _____ month _____ year
 • Anticipated completion date of final phase _____ month _____ year
 • Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? Yes No
 If Yes, show numbers of units proposed.

| | One Family | Two Family | Three Family | Multiple Family (four or more) |
|-----------------------------|------------|------------|--------------|--------------------------------|
| Initial Phase | _____ | _____ | _____ | _____ |
| At completion of all phases | _____ | _____ | _____ | _____ |

g. Does the proposed action include new non-residential construction (including expansions)? Yes No
 If Yes,

i. Total number of structures 3

ii. Dimensions (in feet) of largest proposed structure: ± 142 height; ± 240 width; and ± 630 length

iii. Approximate extent of building space to be heated or cooled: Main Hospital: ± 670,000 square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? Yes No
 If Yes,

i. Purpose of the impoundment: _____

ii. If a water impoundment, the principal source of the water: Ground water Surface water streams Other specify: _____

iii. If other than water, identify the type of impounded/contained liquids and their source. _____

iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres

v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? Yes No
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)

If Yes:

i. What is the purpose of the excavation or dredging? Excavation and removal of impacted and/or unsuitable fill material, if encountered.

ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?

- Volume (specify tons or cubic yards): To be determined upon further evaluation of existing conditions
- Over what duration of time? ± 12-18 months

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.
Excavated soil/fill material that is unsuitable for re-use on site will be stockpiled, sampled, and disposed of in accordance with applicable federal and state regulations.

iv. Will there be onsite dewatering or processing of excavated materials? Yes No
 If yes, describe. Temporary dewatering of excavations is anticipated. Encountered groundwater will be characterized and managed in accordance with applicable federal and state regulations.

v. What is the total area to be dredged or excavated? _____ To be determined acres

vi. What is the maximum area to be worked at any one time? _____ ± 25 acres

vii. What would be the maximum depth of excavation or dredging? _____ ± 10 feet

viii. Will the excavation require blasting? Yes No

ix. Summarize site reclamation goals and plan: _____
Excavations will be backfilled and hospital, ancillary facilities and grounds will be constructed on the re-graded site.

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? Yes No
 If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will proposed action cause or result in disturbance to bottom sediments? Yes No
If Yes, describe: _____

iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No
If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No

If Yes:

i. Total anticipated water usage/demand per day: _____ ± 187,000 gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No

If Yes:

- Name of district or service area: City of Utica
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
Water mains will need to be installed or replaced. See Attachment 1 for additional details.
- Source(s) of supply for the district: Mohawk Valley Water Authority

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No

If, Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), maximum pumping capacity: N/A gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No

If Yes:

i. Total anticipated liquid waste generation per day: _____ ± 187,000 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____
Sanitary wastewater from hospital operations (± 187,000 gallons/day).

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No

If Yes:

- Name of wastewater treatment plant to be used: Oneida County's Water Pollution Control Plant
- Name of district: Oneida County Sewer District
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

- Do existing sewer lines serve the project site? Yes No
- Will line extension within an existing district be necessary to serve the project? Yes No

 If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____

 Sewer lines will need to be installed or replaced. See Attachment 1 for additional details. _____

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No
 If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge, or describe subsurface disposal plans):

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No
 If Yes:

- i. How much impervious surface will the project create in relation to total size of project parcel?
 _____ Square feet or _____* acres (impervious surface)
 _____ Square feet or ± 25 acres (parcel size)
- ii. Describe types of new point sources. * The majority of the project site is currently impervious. Proposed conditions will increase pervious green space.

- iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

Site stormwater will be managed in accordance with the New York State Stormwater Management Design Manual, as required by the SPDES General Permit for Stormwater Discharges from Construction Activity (GP U-15-002). See Attachment 1 for a description of anticipated infrastructure modifications necessary to accommodate the MVHS Integrated Health Campus.

- If to surface waters, identify receiving water bodies or wetlands: _____
 Stormwater will be conveyed to the City's stormwater conveyance system. _____
- Will stormwater runoff flow to adjacent properties? Stormwater will be conveyed to the City's stormwater conveyance system. Yes No

iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No
 If Yes, identify:

- i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)
 Short-term particulate emissions (dust) and portable equipment exhaust emissions during construction activities. _____
- ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)
 No stationary sources during construction are anticipated. _____
- iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)
 Stationary sources during operations may include boilers, emergency generators and microturbines, as well as other minor sources. _____

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No
 If Yes:

- i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No
- ii. In addition to emissions as calculated in the application, the project will generate: *
 - $\pm 60,000$ Tons/year (short tons) of Carbon Dioxide (CO₂)
 - < 1 Tons/year (short tons) of Nitrous Oxide (N₂O)
 - 0 Tons/year (short tons) of Perfluorocarbons (PFCs)
 - 0 Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
 - 0 Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
 - < 1 Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

* It is anticipated that MVHS will need to obtain either a State Facility Air Permit or Registration. Emission estimates for criteria pollutants will be included in the applicable application.

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? Yes No

If Yes:

i. Estimate methane generation in tons/year (metric): ± 1.5 tons/year

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): None anticipated. Methane emissions will be from combustion sources which typically are not equipped with methane controls.

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust):

Short-term particulate emissions (dust) and equipment exhaust emissions during construction activities. During construction, the contractor will be required to implement mitigation measures to minimize air quality impacts including proper maintenance of vehicles and equipment and implementation (as necessary) of dust suppression measures.

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? Yes No

* A Traffic Impact Study will be conducted.

If Yes: *

i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend

Randomly between hours of _____ to _____.

ii. For commercial activities only, projected number of semi-trailer truck trips/day: To be determined.

iii. Parking spaces: Existing ±630 Proposed ± 2,800 Net increase decrease ±2,170

iv. Does the proposed action include any shared use parking? Yes No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe:

Discontinue portions of Lafayette and Cornelia Streets within the new hospital boundaries.

vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? Yes No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? Yes No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No

If Yes:

i. Estimate annual electricity demand during operation of the proposed action: _____

The peak electrical demand load for the project is 4.2 mVA.

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other):

National Grid

iii. Will the proposed action require a new, or an upgrade to, an existing substation? Yes No

l. Hours of operation. Answer all items which apply.

| | |
|---|---|
| <p>i. During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>10 hours (7 am - 5 pm)</u> • Saturday: <u>10 hours (7 am - 5 pm)</u> • Sunday: <u>If necessary.</u> • Holidays: _____ | <p>ii. During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: <u>24 hours</u> • Saturday: <u>24 hours</u> • Sunday: <u>24 hours</u> • Holidays: <u>24 hours</u> |
|---|---|

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? Yes No

If yes:
i. Provide details including sources, time of day and duration:
Noise during construction will be minimized via standard construction practices. New York State Environmental Conservation Law prohibits heavy duty vehicles, including diesel trucks, from idling for more than five minutes at a time. Sporadic noise in excess of existing ambient levels during operation may be generated by incoming ambulances and helicopter flights.

ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen? Yes No
Describe: The MVHS Integrated Health Campus will be constructed in an urban setting proximal to existing buildings and other man-made structures.

n. Will the proposed action have outdoor lighting? Yes No

If yes:
i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:
Outdoor lighting will include signage, lamp posts and building-mounted fixtures in exterior parking areas, walkways and entrances to the hospital, as applicable. Outdoor lighting fixtures will be downward facing to minimize glare and night-sky related light pollution.

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? Yes No
Describe: _____

o. Does the proposed action have the potential to produce odors for more than one hour per day? Yes No
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? Yes No

If Yes:
i. Product(s) to be stored No. 2 Fuel Oil, Diesel
ii. Volume(s) * _____ per unit time _____* (e.g., month, year) * To be determined.
iii. Generally describe proposed storage facilities: _____
50,000-gallon double-walled underground storage tank and day tanks for boiler operations, as well as diesel tanks for emergency generators.

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? Yes No

If Yes:
i. Describe proposed treatment(s):
Herbicides and pesticides may be used periodically to mitigate against pests and other nuisance vectors. In addition, water treatment chemicals will be utilized for maintenance of the cooling towers.

ii. Will the proposed action use Integrated Pest Management Practices? Yes No

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? Yes No

If Yes:
i. Describe any solid waste(s) to be generated during construction or operation of the facility:
• Construction: To be determined tons per To be determined (unit of time)
• Operation: ± 100 cy/week (solid waste/recyclables), ± 420 tons/year (RMW)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:
• Construction: To be determined by contractors.
• Operation: Work minimization efforts will be consistent with current operations and applicable State and City requirements.

iii. Proposed disposal methods/facilities for solid waste generated on-site:
• Construction: To be determined by contractors.
• Operation: Solid waste and recyclables will be managed in accordance with applicable local, state and federal requirements. Regulated medical waste (RMW) will be hauled by a NYSDEC-permitted RMW transporter from the new hospital to the existing state-permitted autoclave and shredder located at Faxton St. Luke's Healthcare facility prior to ultimate management off-site.

Hospital operations generate a variety of regulated wastes, including solid waste, regulated medical waste, etc.

s. Does the proposed action include construction or modification of a solid waste management facility? Yes No
 If Yes:
 i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____
 ii. Anticipated rate of disposal/processing:
 • _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
 • _____ Tons/hour, if combustion or thermal treatment
 iii. If landfill, anticipated site life: _____ years

t. Will proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No
 If Yes:
 i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____
 Acute and non-acute hazardous wastes. The majority of these waste streams will be pharmaceutical-related.
 ii. Generally describe processes or activities involving hazardous wastes or constituents: _____
 Pharmaceutical-related activities.
 iii. Specify amount to be handled or generated * tons/month * < 220 lbs/month of hazardous waste; < 2.2 lbs/month of acute hazardous waste.
 Quantity based on conditionally-exempt small quantity generator status.
 iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

 v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No
 If Yes: provide name and location of facility: _____
 MVHS will utilize an NYSDEC-permitted treatment, storage and disposal facilities (TSDFs). Specific facilities have not been selected.
 If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.
 i. Check all uses that occur on, adjoining and near the project site.
 Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Aquatic Other (specify): Institutional, Residential (Urban)
 ii. If mix of uses, generally describe:

b. Land uses and covertypes on the project site.

| Land use or Covertype | Current Acreage | Acreage After Project Completion | Change (Acres +/-) |
|--|-----------------|----------------------------------|--------------------|
| • Roads, buildings, and other paved or impervious surfaces | | | |
| • Forested | | | |
| • Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural) | | | |
| • Agricultural (includes active orchards, field, greenhouse etc.) | | | |
| • Surface water features (lakes, ponds, streams, rivers, etc.) | | | |
| • Wetlands (freshwater or tidal) | | | |
| • Non-vegetated (bare rock, earth or fill) | | | |
| • Other Describe: <u>Urban land including structures and paved and green areas.</u> | ± 25 | ± 25 | ± 25 |

c. Is the project site presently used by members of the community for public recreation? Yes No
i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? Yes No
If Yes,
i. Identify Facilities:
Approximately 3 licensed day care centers are located with 1500 feet of the proposed project site.
Source: http://ocfs.ny.gov/main/childcare/ccfs_template.asp

e. Does the project site contain an existing dam? Yes No
If Yes:
i. Dimensions of the dam and impoundment:
• Dam height: _____ feet
• Dam length: _____ feet
• Surface area: _____ acres
• Volume impounded: _____ gallons OR acre-feet
ii. Dam's existing hazard classification: _____
iii. Provide date and summarize results of last inspection:

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
If Yes:
i. Has the facility been formally closed? Yes No
• If yes, cite sources/documentation: _____
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:

iii. Describe any development constraints due to the prior solid waste activities: _____

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:
Hazardous wastes have been generated within the proposed project area and wastes were shipped off-site for disposal. No large quantity generators or hazardous waste treatment, storage, and disposal facilities (TSDFs) were identified on or adjacent to the proposed project area.

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes No
 Yes – Spills Incidents database Provide DEC ID number(s): One Open Spill (93-03962)
 Yes – Environmental Site Remediation database Provide DEC ID number(s): _____
 Neither database
ii. If site has been subject of RCRA corrective activities, describe control measures: _____

iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
If yes, provide DEC ID number(s): B00061 , E633070, B00063 , 633021
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):
Remediation of two of the four sites identified has been deemed to be satisfactorily completed by the NYSDEC. A remedial program is currently underway at Site B00063, which is located approximately 1600 feet northeast of the proposed project area. Site 633021 is a State Superfund Site and is located approximately 1500 feet north of the proposed project area. Groundwater flow at these two sites is to the north.

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ > 6 feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site:

| | | |
|------------|-------|---------|
| Urban Land | _____ | 100 % |
| _____ | _____ | _____ % |
| _____ | _____ | _____ % |

d. What is the average depth to the water table on the project site? Average: _____ ± 10 feet

e. Drainage status of project site soils:

| | | |
|---|-------|-----------------|
| <input checked="" type="checkbox"/> Well Drained: | _____ | 100 % of site |
| <input type="checkbox"/> Moderately Well Drained: | _____ | _____ % of site |
| <input type="checkbox"/> Poorly Drained | _____ | _____ % of site |

f. Approximate proportion of proposed action site with slopes:

| | | |
|--|-------|-----------------|
| <input checked="" type="checkbox"/> 0-10%: | _____ | 100 % of site |
| <input type="checkbox"/> 10-15%: | _____ | _____ % of site |
| <input type="checkbox"/> 15% or greater: | _____ | _____ % of site |

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes No

ii. Do any wetlands or other waterbodies adjoin the project site? Yes No
 If Yes to either i or ii, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? Yes No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? Yes No
 If yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? Yes No

j. Is the project site in the 100 year Floodplain? Yes No

k. Is the project site in the 500 year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:

i. Name of aquifer: Principal Aquifer

m. Identify the predominant wildlife species that occupy or use the project site: _____
 Common species (urban) _____

n. Does the project site contain a designated significant natural community? Yes No
 If Yes:
 i. Describe the habitat/community (composition, function, and basis for designation): _____
 ii. Source(s) of description or evaluation: _____
 iii. Extent of community/habitat:
 • Currently: _____ acres
 • Following completion of project as proposed: _____ acres
 • Gain or loss (indicate + or -): _____ acres

o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? Yes No
 Several NYS endangered and threatened plants and animals have been identified in Oneida County (<http://www.dec.ny.gov/natureexplorer/app/location/county/results.5>). However, given the urban setting, these species are not anticipated to be encountered.
 Review of the United States Fish and Wildlife (USFWS) Information for Planning and Consultation (IPaC) website (<https://ecos.fws.gov/ipac/>), identified the following threatened species: Northern Long-Eared Bat (NLEB). Tree cutting will be restricted to November 1st - March 31st.

p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? Yes No

q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? Yes No
 If yes, give a brief description of how the proposed action may affect that use: _____

E.3. Designated Public Resources On or Near Project Site

a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? Yes No
 If Yes, provide county plus district name/number: _____

b. Are agricultural lands consisting of highly productive soils present? Yes No
 i. If Yes: acreage(s) on project site? _____
 ii. Source(s) of soil rating(s): _____

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? Yes No
 If Yes:
 i. Nature of the natural landmark: Biological Community Geological Feature
 ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? Yes No
 If Yes:
 i. CEA name: _____
 ii. Basis for designation: _____
 iii. Designating agency and date: _____

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places? Yes No

If Yes:

i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District

ii. Name: Several parcels included in the project site are located within the Upper Genesee Street Historic District. In addition, two historic buildings are located proximal to the project site. Specifically, Fort Schuyler Club Building (located + 600 feet south of the proposed project site) and St. Joseph's Church (located + 580 ft west of the proposed project site, on the opposite side of the North-South Arterial Highway).

iii. Brief description of attributes on which listing is based: _____
Items of significance include religion and architecture (https://cris.parks.ny.gov/Login.aspx?ReturnUrl=%2fDefault.aspx).

f. 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? Yes No

g. Have additional archaeological or historic site(s) or resources been identified on the project site? Yes No

If Yes: To be determined. Consultation with the State Historic Preservation Office has been initiated. A Phase IA Cultural Resource

i. Describe possible resource(s): Survey will be conducted.

ii. Basis for identification: _____

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? Yes No

If Yes:

i. Identify resource: City of Utica Scenic and Historic District, Erie Canalway Trail, NYS-designated Wildlife Management Areas

ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): Scenic District and/or Wildlife Management Area

iii. Distance between project and resource: _____ Varies miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? Yes No

If Yes:

i. Identify the name of the river and its designation: _____

ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? Yes No

F. Additional Information

Attach any additional information which may be needed to clarify your project.

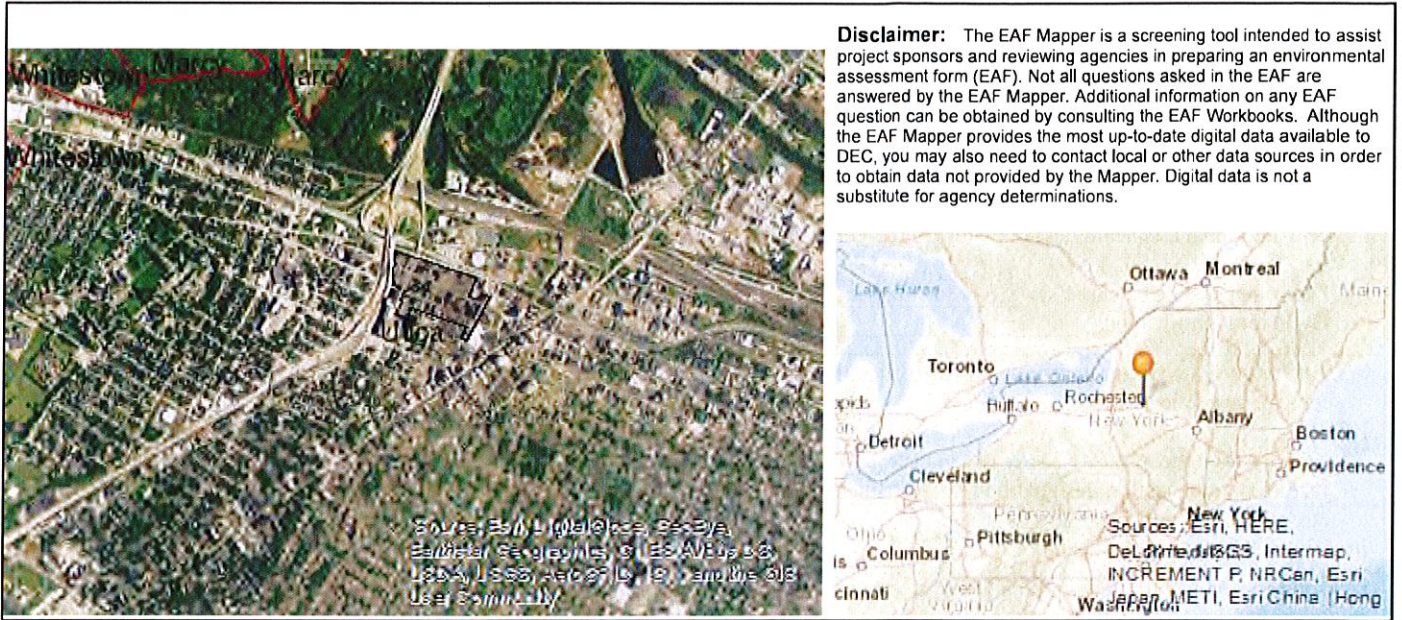
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name _____ Date _____

Signature _____ Title _____

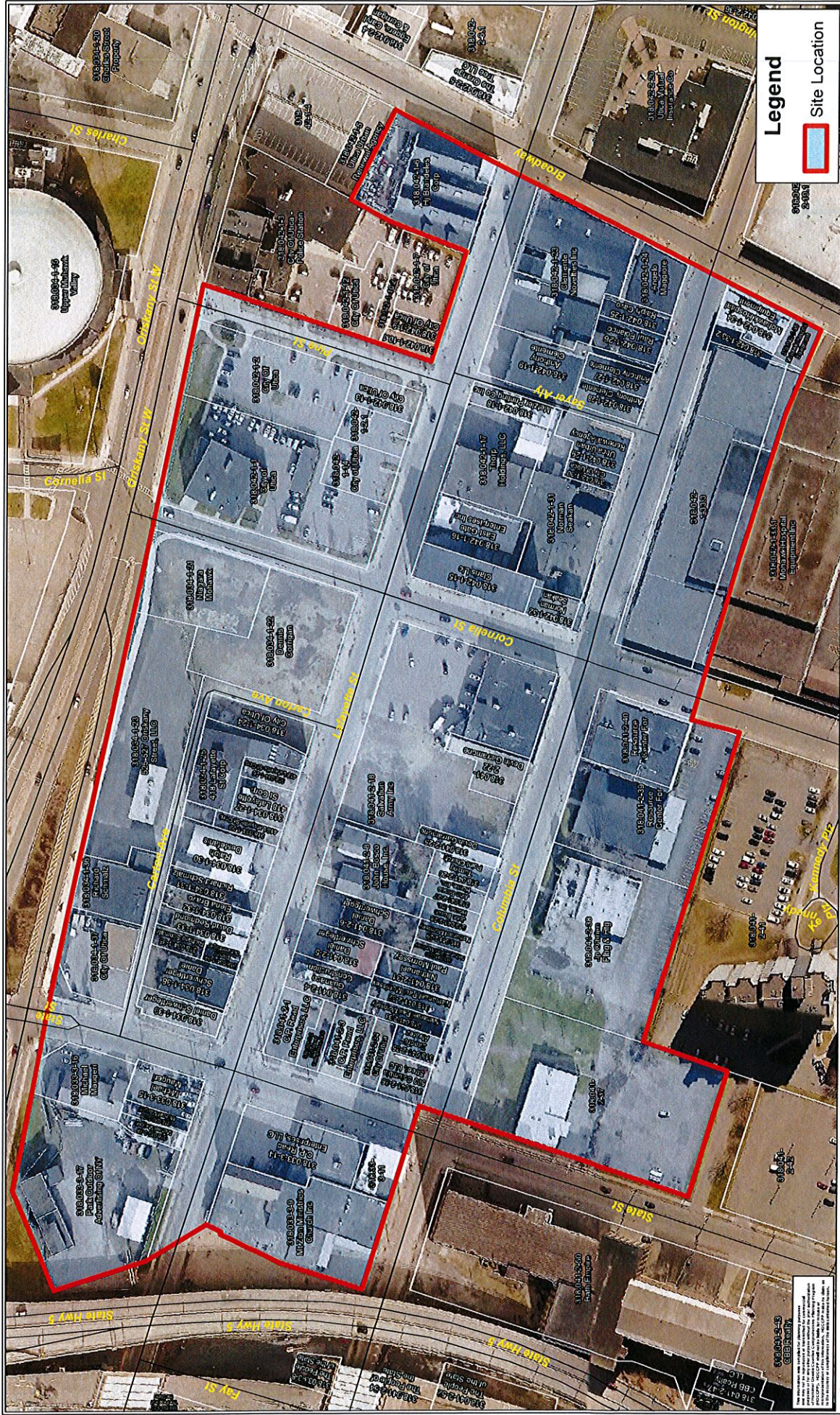


| | |
|--|---|
| B.i.i [Coastal or Waterfront Area] | No |
| B.i.ii [Local Waterfront Revitalization Area] | No |
| C.2.b. [Special Planning District] | Yes - Digital mapping data are not available for all Special Planning Districts. Refer to EAF Workbook. |
| C.2.b. [Special Planning District - Name] | NYS Heritage Areas: Mohawk Valley Heritage Corridor |
| E.1.h [DEC Spills or Remediation Site - Potential Contamination History] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Listed] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.iii [Within 2,000' of DEC Remediation Site] | Yes |
| E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID] | B00061 , E633070, B00063 , 633021 |
| E.2.g [Unique Geologic Features] | No |
| E.2.h.i [Surface Water Features] | No |
| E.2.h.ii [Surface Water Features] | No |
| E.2.h.iii [Surface Water Features] | No |
| E.2.h.v [Impaired Water Bodies] | No |
| E.2.i. [Floodway] | No |
| E.2.j. [100 Year Floodplain] | No |
| E.2.k. [500 Year Floodplain] | No |
| E.2.l. [Aquifers] | Yes |
| E.2.l. [Aquifer Names] | Principal Aquifer |

| | |
|--|---|
| E.2.n. [Natural Communities] | No |
| E.2.o. [Endangered or Threatened Species] | Yes |
| E.2.p. [Rare Plants or Animals] | No |
| E.3.a. [Agricultural District] | No |
| E.3.c. [National Natural Landmark] | No |
| E.3.d [Critical Environmental Area] | No |
| E.3.e. [National Register of Historic Places] | Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook. |
| E.3.e.ii [National Register of Historic Places - Name] | Fort Schuyler Club Building, St. Joseph's Church |
| E.3.f. [Archeological Sites] | Yes |
| E.3.i. [Designated River Corridor] | No |



Site Location



Legend

Site Location

Date: January 11, 2018
 Date of Photography: April 2015

Proposed Hospital Site Location

1 inch = 120 feet

0 60 120 240 Feet

This map was prepared by the City of Upton, Michigan, and is for informational purposes only. It is not intended to be used for any other purpose. The City of Upton, Michigan, is not responsible for any errors or omissions in this map. The City of Upton, Michigan, is not responsible for any damages, including consequential damages, arising from the use of this map. The City of Upton, Michigan, is not responsible for any actions taken based on the information contained in this map. The City of Upton, Michigan, is not responsible for any actions taken based on the information contained in this map.



Purpose and Project Description

PURPOSE

Faxton St. Luke's Healthcare (FSLH) and St. Elizabeth Medical Center (SEMC) affiliated in 2014 to become the Mohawk Valley Health System (MVHS). MVHS's mission is to provide excellence in healthcare for its communities. Substantial effort has been focused on consolidating existing resources, eliminating redundancies, expanding the depth and breadth of services, improving access and elevating the quality of healthcare services in the region. MVHS has been successful in its efforts thus far, but has been constrained by the age and physical limitations of the existing facilities.

To support goals to deliver higher quality, more effective care with better community outcomes and at a lower cost, the proposed MVHS Integrated Health Campus, will combine services from both existing campuses. The new MVHS integrated health campus and state-of-art hospital will replace SEMC and FSLH, reduce the number of beds in the community, and consolidate patient services to one campus.

The decision to consolidate the two inpatient campuses to a single facility was spurred by several key factors:

- The desire and need to build a facility with the newest technology, services and advancements in patient safety and quality so that our community can receive the most up-to-date healthcare services that rivals those found in large cities.
- The growing demand for healthcare due to the rapidly increasing and aging population in this region.
- The increasing need to improve accessibility and availability by attracting specialists and providing services that otherwise would not be available to our community.

The opportunity to gain greater operational efficiencies through the elimination of duplicative and redundant functions will help to reduce the rate of increase in healthcare spending and to achieve improved financial stability.

PROJECT DESCRIPTION

As depicted on Figure 1 (Site Location Map), the MVHS Integrated Health Campus will generally be bounded by Oriskany Boulevard (NYS Route 69) to the north, Broadway on the east, Columbia Street, and NYS Route 8 to the west and City Hall and Kennedy Apartments to the south. The MVHS Integrated Health Campus will encompass approximately 25-acres and will include the following elements:

- Hospital Building
- Central Utility Plant
- Parking facilities (including one parking garage)
- Potential future Medical Office Building (by private developer)
- Campus grounds
- Helistop

It should also be noted that modifications to existing utility infrastructure will be necessary to accommodate the proposed MVHS Integrated Health Campus. A description of the project elements noted above, as well as utility modifications, is provided below. This description represents the project as currently envisioned.

HOSPITAL BUILDING

The proposed ±670,000 square foot (sf) hospital building will be constructed on parcels located west of Broadway and will extend through Cornelia Street onto parcels located east of State Street. The hospital building consists of a 2-story podium and a 7-story bed tower.

The main entrance to the hospital will be located south of Lafayette Street, proximal to Cornelia Street. In addition to the main entrance, Emergency Department (ED) walk-in and ED ambulance entrances will be located on the western portion of the hospital. Vehicular and pedestrian entries will be marked by canopy systems that provide adequate coverage for public drop off, ED walk-in and loading activities. Ambulance traffic will be provided with a sally port adjoined to the podium.

A service entrance will be located on the eastern portion of the hospital building, which will be accessible via Columbia Street.

Most services currently provided at the FSLH and SEMC will be transitioned to the MVHS Integrated Health Campus including ±373 inpatient beds.

CENTRAL UTILITY PLANT

A three-story Central Utility Plant (CUP) will service the hospital. The CUP will adjoin the eastern portion of the podium of the hospital building.

The CUP will house three centrifugal chillers, a heat recovery chiller and four steam and eight hot water heating condensing boilers, each which will be fueled by both natural gas and No. 2 Fuel oil. A 50,000-gallon underground storage tank (UST) used to store the No. 2 fuel oil will be installed south of the CUP in the service yard. A 30,000-gallon aboveground storage tank (AST) used to store emergency water for fire protection will also be located in the service yard.

PARKING FACILITIES

Parking facilities will consist of a three-story parking garage and multiple parking lots. The parking garage will provide approximately 1500 parking spaces and the parking lots will allow for an additional ± 1300 parking spaces. These parking facilities will be available for use by patients, visitors, staff, and volunteers, as well as the community for non-hospital related events.

POTENTIAL FUTURE MEDICAL OFFICE BUILDING

A future medical office building is proposed. It is anticipated that the medical office building would be owned and operated by a private developer. The proposed location of the medical office building is south of Columbia Street and east of Cornelia Street.

CAMPUS GROUNDS

The campus will be designed as an urban park with enhanced lighting, trees, pedestrian walkways and seating areas. A pedestrian walkway will replace a portion of Lafayette Street. This walkway will extend from the main entrance to the west, terminating just adjacent to the North-South Arterial Highway. An additional segment of the walkway will provide access to the ED entrance. Outdoor areas will include gardens and other design considerations to create a healing environment.

HELISTOP

A helistop (*i.e.*, a minimally developed helicopter facility for boarding and discharging passengers or cargo, without the support facilities found at a heliport) will be situated to the west of the hospital building, adjacent to the ED ambulance entrance and north of Columbia Street.

UTILITY INFRASTRUCTURE

Based on a preliminary review of existing utilities, modifications to the existing infrastructure in the project area are anticipated. A summary of the anticipated modifications is provided below.

Sanitary Sewers

It is expected that the existing sanitary sewer line in Cornelia Street between Columbia and Lafayette Streets, in Lafayette Street between Cornelia and State Streets will be abandoned/removed. A new sewer line on Columbia

Street will be constructed from Cornelia Street to the 48" trunk sewer on State Street. A new sewer line would be constructed to divert upstream flow from the south on Cornelia Street to the sewer on Broadway. Other potential new sewers lines may be needed in Lafayette Street on the north side of the hospital. The location and size of sanitary laterals and connections will depend on the plumbing/mechanical design of the new hospital buildings. It is assumed each new structure will have its own service lateral(s) connecting to the City mains.

Storm Sewers

The buildings and paved impervious surface areas of the MVHS Integrated Health Campus may be minimized or reduced using "Green Infrastructure" design features such as pervious pavement/pavers, planting beds, and subsurface rainwater detention.

It is expected that the existing storm sewer lines in Cornelia Street between Columbia and Lafayette Streets will be abandoned/removed. Removal of portions of storm sewer lines may also be required on Street and Lafayette Street between Cornelia and State Streets. New storm sewer piping will be installed on State Street and connect to the existing NYSDOT storm sewer line on the north side of Oriskany Street West/Route 5S west of the Aud. New branch lines will tie-in catch basins on the west end of Columbia Street. Flow from the east side of the campus and upstream flow from Broadway will be conveyed through existing storm sewers in Cornelia Street north of Lafayette, Lafayette Street east of Cornelia, and Broadway.

Water Mains

Water mains located on portions of Lafayette Street may need to be removed/abandoned, as would other smaller mains within the new building footprint. Where new supply mains are required, the older mains would be replaced. Fire hydrants will be located along the public streets with no private hydrants required. Each building will be provided with its own backflow prevention device depending on the requirements.

Water mains to be replaced or installed include: 1) a 6" main on State Street that will be replaced with a larger diameter pipe; 2) a 6" and 8" main on Broadway that will be replaced with a larger diameter pipe connecting large mains on Columbia to Whitesboro Street; and 3) 1030 LF of piping along Oriskany Street East.

DISPOSITION AND REDEVELOPMENT OF EXISTING HOSPITAL CAMPUSES

With the exception of certain ancillary facilities, MVHS's objective is to facilitate redevelopment of the existing FSLH and SEMC campuses consistent with the Town of New Hartford's and the City of Utica's long term development plans and capable of making an economically positive contribution to each community. In support of this objective, MVHS will be conducting an evaluation of the properties and potential redevelopment opportunities concurrent with planning for the proposed hospital. In addition to the disposition and redevelopment of the primary facilities, existing ancillary facilities will also be reused. A description of the anticipated continued use of portions of the existing campuses is provided below.

FSLH

Most of the inpatient and outpatient services performed at the existing FSLH site will be transitioned to the MVHS Integrated Health Campus; however, it is anticipated that ±24 physical medical and rehabilitation beds will remain and some outpatient services may be performed at this site. Unused medical supplies and certain medical equipment will be brought to the MVHS Integrated Health Campus. Medical equipment that is beyond its useful life will be disposed of in accordance with applicable federal and state regulations.

SEMC

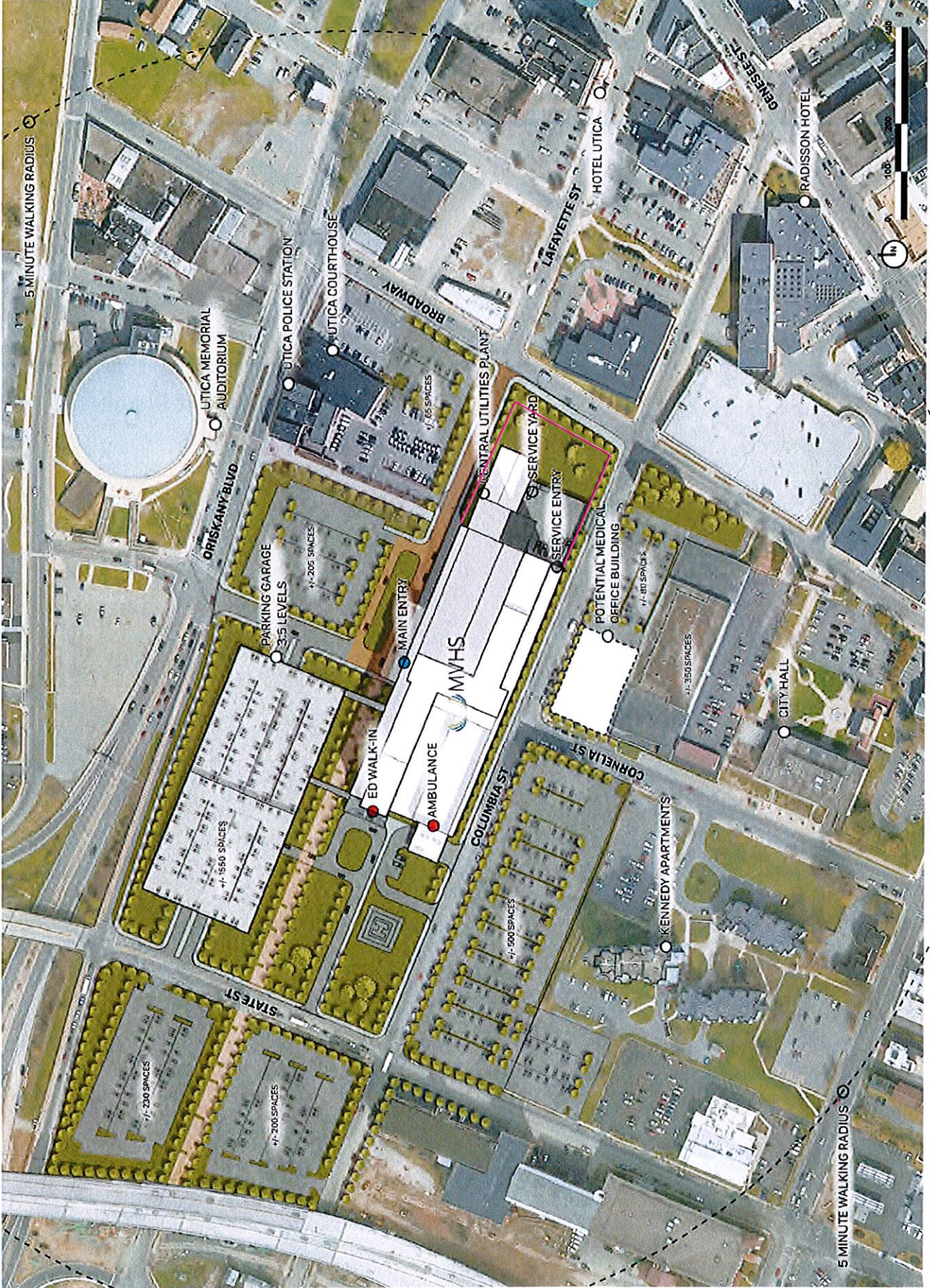
The SEMC site will be converted into an outpatient extension clinic. Services provided at the clinic will include sleep center services, cardiac and thoracic surgery-related offices, primary care services and a laboratory patient service center. Unused medical supplies and certain medical equipment will be brought to the MVHS Integrated Health Campus. Medical equipment that is beyond its useful life will be disposed of in accordance with applicable federal and state regulations.



Site Layout



| NO. | DATE | DESCRIPTION |
|-----|------|-------------|
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**Listing of Current Property
Owners**

ATTACHMENT 3 | LISTING OF CURRENT PROPERTY OWNERS

| MVHS Property ID # | Owner Name | Property Type | Tax Parcel ID No(s) | Street Address(es) |
|--------------------|--|-----------------------|---------------------|--------------------------|
| 1 | Norman Seakan | Retail/Warehouse | 318.042-1-31 | 338-358 Columbia St |
| 2 | Norman Seakan | Retail/Warehouse | 318.042-1-32 | 360-362 Columbia St |
| 3 | Richard W. Schmalz | Vacant Land | 318.034-1-31 | 438 Lafayette St. |
| 4 | Greg Urbanik | Vacant Land | 318.041-2-2 | 503 State St |
| | | | 318.041-2-1 | AKA 441-447 Lafayette St |
| 5 | Mark Smaltz | Commercial Bldg. | 318.034-1-36 | 529 Oriskany St. W. |
| 6 | Mark Smaltz | Vacant Land | 318.034-1-35 | Carton Ave. |
| 7 | Salvation Army/Dennis Corrigan | Commercial Land | 318.034-1-22 | 400-406 Lafayette St. |
| 9 | Niagara Mohawk | Commercial Land | 318.034-1-21 | 501 Oriskany St. |
| 10 | 525-527 Oriskany St., LLC | Bldg./Comm. Land | 318.034-1-23.1 | 525 Oriskany St. |
| | | | 318.034-1-23.2 | 527 Oriskany St. |
| 11 | Devin Garramone | Commercial Bldg. | 318.041-2-22 | 420-422 Columbia St |
| | | | 318.041-2-25 | 430-432 Columbia St |
| 12 | David B. Redmond | Converted Resid. | 318.034-1-33 | 442 Lafayette St. |
| 13 | Nathaneal P. Morrissey | Mixed Used Bldg. | 318.041-2-29 | 446-448 Columbia St. |
| | | | 318.041-2-30 | 450 Columbia St. |
| | | | 318.041-2-31 | 452-454 Columbia St. |
| 14 | Nathaneal P. Morrissey | Mixed Used Bldg. | 318.041-2-32 | 456 Columbia St. |
| | | | 318.041-2-33 | 458 Columbia St. |
| 15 | Ralph Polanco | Mixed Used Bldg. | 318.042-1-26 | 312-316 Columbia St |
| 16 | Ralph J. Destfanis | Commercial Bldg. | 318.034-1-30 | 432 Lafayette St. |
| 17 | Zandro Alavarez | Mixed Used Bldg. | 318.041-2-35 | 460-464 Columbia St. |
| 18 | 500 Columbia St LLC | Vacant Land | 318.041-2-36 | 466-470 Columbia St. |
| 20 | Joseph D. Thierry | Office | 318.042-2-37 | 601 State St. |
| 21 | Angelo Maggiore | Mixed Used Bldg. | 318.042-1-24 | 300-306 Columbia St |
| 22 | Ralph Cavo | Mixed Used Bldg. | 318.042-1-25 | 308-310 Columbia St |
| 23 | Thorp Holdings, Inc. | Mixed Used Bldg. | 318.042-1-17 | 319-325 Lafayette St |
| 24 | East Gate Enterprises, Inc. | Mixed Used Bldg. | 318.042-1-16 | 327-331 Lafayette St |
| 25 | David Gibbons | Mixed Used Bldg. | 318.041-2-26 | 436-438 Columbia St |
| 26 | Daniel Schwertfeger | Commercial Bldg. | 318.041-2-6 | 431 Lafayette St |
| | | | 318.041-2-5 | 433-435 Lafayette St |
| 27 | Daniel Schwertfeger | Commercial Bldg. | 318.034-1-34 | 444 Lafayette St |
| | | | 318.034-1-38 | 446 Lafayette St |
| | | | 318.034-1-39 | 450-454 Lafayette St |
| 28 | Greg Urbanik | Commercial Bldg. | 318.041-2-3 | 505-507 State St |
| 29 | Mt. Zion Ministries Church, Inc./Charles Sweet | Commercial Bldg. | 318.033-3-9 | 506 Columbia St |
| 30 | Park Outdoor Advertising of NY | Commercial Bldg. | 318.033-3-17 | 514 Lafayette St |
| | | | 318.033-3-17.1 | 524 Lafayette St |
| | | | 318.033-3-17.2 | 524 Lafayette St |
| 31 | Anthony Clemente | Building and Parking | 318.042-1-27 | 318-320 Columbia St |
| | | | 318.042-1-28 | 322-324 Columbia St |
| 32 | John Bosco House, Inc. | Religious and Parking | 318.041-2-8 | 425-429 Lafayette St. |
| | | | 318.041-2-27 | 442 Columbia St. |
| | | | 318.041-2-28 | 444 Columbia St. |
| 33 | Michael Maugeri | Commercial Building | 318.033-3-16 | 402 State St |
| | | | 318.033-3-15 | 502-506 Lafayette St |
| | | | 318.033-3-19 | 508 Lafayette St |
| | | | 318.033-3-18 | 510-512 Lafayette St |
| 34 | Oscar Figueora/Guarno Construction | Residential | 318.041-2-4 | 437 Lafayette St. |
| 35 | Elena Bravo | Residential | 318.034-1-32 | 440 Lafayette St. |
| 37 | City of Utica | Police Garage | 318.042-1-1 | 334 Lafayette St |



ATTACHMENT 3 | LISTING OF CURRENT PROPERTY OWNERS



| MVHS Property ID # | Owner Name | Property Type | Tax Parcel ID No(s) | Street Address(es) |
|--------------------|--|--------------------|-----------------------|-----------------------|
| 38 | Resource Center for Independent Living | Office/Educational | 318.041-2-40 | 401-407 Columbia St |
| | | | 318.041-2-39 | 409 Columbia St |
| 39 | JP O'Brien Plumbing & Heating | Commercial Pl & H | 318.041-2-38 | 411 Columbia St. |
| 40 | Anthony Clemente | Retail/Warehouse | 318.042-1-19.1 & 19.2 | 313 Lafayette St |
| | Clemente Novelties, Inc. | Retail/Warehouse | 318.042-1-23 | 303-309 Lafayette St |
| 41 | Metzler Printing Co. Inc. | Office/Warehouse | 318.042-1-18 | 317 Lafayette St |
| 42 | Claris LLC/Corrigan | Retail/Warehouse | 318.042-1-15 | 333 Lafayette St |
| 43 | Mohawk Hospital Equipment Inc. | Mixed Used Bldg. | 318.042-1-34 & 35 | 301 Columbia St |
| 44 | Mohawk Hospital Equipment Inc. | Mixed Used Bldg. | 318.042-1-33.1 | 335 Columbia St |
| | | | 318.042-1-33.2 | 336 Columbia St |
| | | | 318.042-1-33.3 | 337 Columbia St |
| 45 | 418 Lafayette St./Citation Services | Mixed Used Bldg. | 318.034-1-28 | 430 Lafayette St. |
| | 419 Lafayette St. | | 318.034-1-29 | Carton Ave |
| | 420 Lafayette St./Citation Services | Mixed Used Bldg. | 318.034-1-27 | 424-428 Lafayette St. |
| | 421 Lafayette St./Citation Services | Mixed Used Bldg. | 318.034-1-26 | 420 Lafayette St |
| | 422 Lafayette St./Citation Services | Mixed Used Bldg. | 318.034-1-25 | 418 Lafayette St |
| 46 | Sanita, Ernest F | Mixed Used Bldg. | 318.033-3-11 | 500-504 Columbia St |
| 47 | Greg Urbanik | Commercial Bldg. | 318.033-3-14 | 501 Lafayette St |
| 48 | HJ Brandeles Corp. | Office/Warehouse | 318.042-1-6 | 300-306 Lafayette St |
| 49 | Salvation Army | Office/Warehouse | 318.041-2-18 | 406 Columbia St. |
| 50 | City of Utica | | 318.042-1-2.1 | |
| | | | 318.042-1-13 | 322 Lafayette St |
| | | | 318.042-1-2 | 324 Lafayette St |
| | | | 318.042-1-14 | 326-330 Lafayette St |
| 51 | City of Utica | | 318.042-1-30 | 336 Columbia St |
| 52 | City of Utica | | 318.034-1-37 | 401 State St. |
| 53 | City of Utica | | 318.034-1-24 | 414-416 Lafayette St. |
| 54 | City of Utica | | 318.041-2-34 | 509 State St. |
| 55 | Utica Urban Renewal Agency | Commercial Bldg. | 318.042-1-29 | 326-334 Columbia St |





Permits and Approvals

TABLE 1 | PERMITS & APPROVALS

Table 1. Permits & Approvals

| Permit/Approval | Activity | Agency | Comments | Agency Contact (SEQRA Involved Agencies in Bold*) |
|-----------------|---|--------|--|---|
| State | | | | |
| 1 | Funding Administration, Certificate of Need (CON) & Construction Approval | NYSDOH | <ul style="list-style-type: none"> New York Public Health Law Section 2825-b, New York State created the "Oneida County Health Care Transformation Program" | <p>Mr. Udo Ammon Director Health Care Facility Planning, Licensure and Finance Bureau of Architectural & Engineering Facility Planning New York State Department of Health Corning Tower, 18th Floor Empire State Plaza Albany, New York 12237</p> |
| 2 | Operating Certificate | NYSOMH | <p>Joint Administration (with DASNY) of project funding approved by New York State Legislature.</p> <p>Review process, mandated under state law, which governs the establishment, ownership, construction, renovation and change in service of specific types of health care facilities including hospitals.</p> <p>Obtain an operating certificate (license) issued by the NYS Office of Mental Health (NYSOMH) prior to the operation of such facilities and programs that are subject to the regulatory jurisdiction of the Commissioner of Mental Health</p> | <p>Mr. Keith McCarthy Director, Bureau of Inspection and Certification New York State Office of Mental Health 44 Holland Avenue Albany, New York 12229</p> |
| 3 | Funding Administration | DASNY | <p>Joint administration (with NYSDOH) of project funding approved by New York State Legislature.</p> | <p>Robert S. Derico, RA Senior Environmental Manager Office of Environmental Affairs Dormitory Authority of the State of New York 515 Broadway Albany, NY, 12207</p> |
| 4 | Air Facility Permit | NYSDEC | <p>Permit to construct and operate an air emission source.</p> | <p>Ms. Judy Drabicki Regional Director NYSDEC, Region 6 207 Genesee Street Utica, NY 13501</p> |



TABLE 1 | PERMITS & APPROVALS

| Permit/Approval | Activity | Agency | Comments | Agency Contact (SEQRA Involved Agencies in Bold*) |
|-----------------|--|---------|--|---|
| 5 | SPDES General Permit for Storm Water Discharges from Construction Activity (GP-0-15-002) | NYSDEC | <ul style="list-style-type: none"> Submission of a Notice of Intent (NOI) to obtain coverage under General Permit. Preparation and implementation of a construction phase Stormwater Pollution Prevention Plan (SWPPP) Review of SWPPP by City of Utica as a Municipal Separate Storm Sewer System (MS4). | <p>Ms. Judy Drabicki Regional Director NYSDEC, Region 6 207 Genesee Street Utica, NY 13501</p> |
| 6 | Petroleum Bulk Storage Registrations | NYSDEC | <ul style="list-style-type: none"> Preparation of a Spill Prevention, Control & Countermeasure (SPCC) Plan | <p>Ms. Judy Drabicki Regional Director NYSDEC, Region 6 207 Genesee Street Utica, NY 13501</p> |
| 7 | Highway Work Permit | NYS DOT | <ul style="list-style-type: none"> Work within NYS highway right-of-way. | <p>Mr. Brian Hoffmann, P.E. Regional Design Engineer NYS DOT Region 2 Utica State Office Building 207 Genesee Street Utica, NY 13501</p> |
| 8 | Consultation (16PR06600) | SHPO | <ul style="list-style-type: none"> Compliance with State & National Historic Preservation Acts | <p>Mr. John A. Bonafide Director, Bureau of Technical Preservation Services</p> <p>Mr. Anthony Opalka Historic Preservation Program Analyst</p> <p>New York State Division for Historic Preservation New York State Office of Parks, Recreation & Historic Preservation Pebbles Island State Park P.O. Box 189 Waterford, NY 12188-0189</p> |



TABLE 1 | PERMITS & APPROVALS

| Permit/Approval | Activity | Agency | Comments | Agency Contact (SEQRA Involved Agencies in Bold*) |
|-----------------|---------------------|--|---|---|
| Local | | | | |
| 9 | Project Funding | Financial benefits & incentive support | Oneida County Local Development Corporation (LDC) | Ms. Shawna Papale Executive Director Oneida County LDC 584 Phoenix Drive Rome, NY 13441-4105 |
| 10 | Site Plan Review | Review and approval of site plan | Utica Planning Board | Mr. Fred Matrulli Chairperson City of Utica Planning Board c/o Department of Urban & Economic Development (Mr. Brian Thomas, Commissioner) 1 Kennedy Plaza Utica, NY 13502 |
| 11 | Multiple | Approval of public property transfers/road closures; funding of parking garage; review and approval of structures located within City rights-of-way (i.e., pedestrian bridges, walkways, canopies, etc.) | Utica Common Council | Hon. Michael P. Galime Council President 1 Kennedy Plaza Utica, NY 13502 |
| 12 | Highway Work Permit | Work within highway rights-of-way (road and utility improvements, curb cuts). | Utica Department of Engineering | Mr. J. Michael Mahoney Deputy City Engineer City of Utica Department of Engineering 1 Kennedy Plaza Utica, NY 13502 |



TABLE 1 | PERMITS & APPROVALS

| Permit/Approval | Activity | Agency | Comments | Agency Contact (SEORA Involved Agencies in Bold*) |
|-----------------|-------------------------------------|--|--|--|
| 13 | Consolidation & Re-Subdivision | Potential consolidation of parcels within area of potential effect. | Utica Department of Engineering or City Planning Board | <p>Mr. J. Michael Mahoney Deputy City Engineer City of Utica Department of Engineering 1 Kennedy Plaza Utica, NY 13502</p> <p>Mr. Fred Matrulli Chairperson City of Utica Planning Board c/o Department of Urban & Economic Development (Mr. Brian Thomas, Commissioner) 1 Kennedy Plaza Utica, NY 13502</p> |
| 14 | Special Use Permit | Medical use in Central Business District (CBD). | Utica Zoning Board of Appeals | <p>City of Utica Zoning Board of Appeals c/o Department of Urban & Economic Development (Mr. Brian Thomas, Commissioner) 1 Kennedy Plaza Utica, NY 13502</p> |
| 15 | General Municipal Law (GML) § 239-m | County Planning review of activities located within 500-feet of State or County highway, municipal boundary or park. | Oneida County Department of Planning | <p>Mr. John R. Kent, Jr. Commissioner</p> <p>Mr. Chris Henry Oneida County Department of Planning 321 Main Street Utica, NY 13501</p> |



TABLE 1 | PERMITS & APPROVALS

| Permit/Approval | Activity | Agency | Comments | Agency Contact (SEQRA Involved Agencies in Bold*) |
|-----------------|--|--|---|---|
| 16 | Water and Wastewater System Improvements Approval of Plans | <p>Approval of water and wastewater infrastructure improvements and connections.</p> <p>Mohawk Valley Water Authority (MVWA)</p> <p>Oneida County Health Department City of Utica</p> <p>Oneida County Department of Water Quality & Water Pollution Control</p> | <ul style="list-style-type: none"> ■ MVWA – Water connections, backflow prevention ■ Oneida County Health Department – backflow prevention ■ City of Utica – Sewer connections ■ Oneida County Department of Water Quality & Water Pollution Control – Industrial Wastewater Discharge Permit, compliance with County sewer use ordinance (waste stream characterization, pre-treatment review) | <p>Mr. Richard Goodney, P.E. Director of Engineering Mohawk Valley Water Authority 1 Kennedy Plaza Utica, NY 13502</p> <p>Daniel W. Gilmore, Ph.D. Environmental Health Director Oneida County Health Department Adirondack Bank Building, 4th Floor 185 Genesee Street Utica, NY 13501</p> <p>Mr. J. Michael Mahoney Deputy City Engineer City of Utica Department of Engineering 1 Kennedy Plaza Utica, NY 13502</p> <p>Mr. Steven Devan, P.E. Commissioner Oneida County Department of Water Quality & Water Pollution Control 51 Leland Avenue Utica, NY 13503</p> |
| 17 | Building & Demolition Permits | Utica Codes Department | Building code compliance. | <p>Mr. Chris Osier Pretreatment Coordinator Oneida County Department of Water Quality & Water Pollution Control 51 Leland Avenue Utica, NY 13503</p> <p>Mr. Dave Farina Code Enforcement Administrator City of Utica Codes Department 1 Kennedy Plaza Utica, NY 13502</p> |



TABLE 1 | PERMITS & APPROVALS

| Permit/Approval | Activity | Agency | Comments | Agency Contact: (SEQRA Involved Agencies in Bold*) |
|-----------------------------|------------------------------|------------------------|----------|--|
| 18 Certificate of Occupancy | Approval to occupy building. | Utica Codes Department | | Mr. Dave Farina Code Enforcement Administrator City of Utica Codes Department 1 Kennedy Plaza Utica, NY 13502 |

*Specific hospital operations will require multiple registrations, licensing, notifications, and/or certifications. Such activities are considered nondiscretionary (ministerial) approvals. Consequently, the issuing agencies are not considered SEQRA Involved Agencies.



