Land Use Review Application

Department of City Planning **120 Broadway, 31st Floor, New York, NY 10271**

City Planning will assign and stamp reference numbers here

APPLICATION NUMBER | APPLICATION NUMBER

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1. APPLICANT AND APPLICANT'S REPRESENTATIVES

MDM Development Group LLC
APPLICANT (COMPANY/AGENCY OR OTHER ORGANIZATION) *

Gandolfo Di Fiore
STREET ADDRESS

New York **NY** **22205**
CITY STATE ZIP

(718) 721-2339 **N/A**
AREA CODE TELEPHONE # FAX#

Frank St. Jacques
APPLICANT'S PRIMARY REPRESENTATIVE

Akerman LLP
REPRESENTATIVE'S COMPANY/AGENCY OR OTHER ORGANIZATION

520 Madison Avenue, 20th Floor
STREET ADDRESS

New York **NY** **10022**
CITY STATE ZIP

(212) 259-6474 **(212) 905-6441**
AREA CODE TELEPHONE # FAX#

*** List additional applicants below:**

2441 Astoria Associates, LLC
CO-APPLICANT (COMPANY/AGENCY OR OTHER ORGANIZATION)

31 Neptune LLC
CO-APPLICANT (COMPANY/AGENCY OR OTHER ORGANIZATION)

ADDITIONAL APPLICANT REPRESENTATIVE:

Gerald J. Caliendo (Architect) **(718) 268-9098** **N/A**
NAME AND PROFESSIONAL AFFILIATION (ATTORNEY/ARCHITECT/ENGINEER ETC.) TELEPHONE # FAX #

2. SITE DATA

(If the site contains more than one property complete the "LR Item 2. Site Data Attachment Sheet.")

STREET ADDRESS

31st Street Rezoning
PROJECT NAME (IF ANY)

31st St to the west, Astoria Blvd to the south, a line generally midway btw 31st St and 32nd St to the east, and a line 200 feet from/parallel to 24th Ave to the north
DESCRIPTION OF PROPERTY BY BOUNDING STREETS OR CROSS STREETS

C4-3, R5B
EXISTING ZONING DISTRICT (INCLUDING SPECIAL ZONING DISTRICT DESIGNATION, IF ANY)

9a
ZONING SECTIONAL MAP NO(S).

see Site Data form | **Queens** | **1**
TAX BLOCK AND LOT NUMBER | BOROUGH | COMM. DIST.

N/A
URBAN RENEWAL AREA, HISTORIC DISTRICT OR OTHER DESIGNATED AREA (IF ANY)

IS SITE A NEW YORK CITY OR OTHER LANDMARK? NO ☒ YES ☐ IF YES, IDENTIFY

3. DESCRIPTION OF PROPOSAL

(If the entire project description does not fit in this space, enter "see attached description" below and submit description on a separate sheet, identified as "LR item 3. Description of Proposal")

See attached description.

4. ACTIONS REQUESTED AND FEES

(Check appropriate action(s) and attach supplemental form)

* No supplemental form required

☐	CHANGE IN CITY MAP……MM	$
☒	ZONING MAP AMENDMENT……ZM	$ 6,425
☒	ZONING TEXT AMENDMENT…… ZR	$ 5,445
☐	ZONING SPECIAL PERMIT.....ZS	$
☐	ZONING AUTHORIZATION……ZA	$
☐	ZONING CERTIFICATION……ZC	$
☐	PUBLIC FACILITY, SEL../ACQ……...PF	$
☐	DISPOSITION OF REAL PROP……..PP	$
☐	URBAN DEVELOP=T ACTION……HA	$
☐	URBAN RENEWAL PROJECT……..*	$
☐	HOUSING PLAN & PROJECT……*	$
☐	FRANCHISE……..*	$
☐	REVOCABLE CONSENT……*	$
☐	CONCESSION……..*	$
☐	LANDFILL……..*	$
☐	OTHER (Describe)	$

☐	MODIFICATION	$
☐	FOLLOW-UP (APPLICATION NO.)	$
☐	RENEWAL (APPLICATION NO.)	$
☒	OTHER: CEQR (SPECIFY)	$ 5,465

TOTAL FEE (For all actions) $ 17,335

Make Check or Money Order payable to Department of City Planning.

If fee exemption is claimed check box below and explain ☐

Has pre-application meeting been held? ☐ NO ☒ YES

If yes **Blake Montieth, John Young** (DCP Office/Representative) **09/05/2019** (Date of meeting)

5. ENVIRONMENTAL REVIEW

CITY ENVIRONMENTAL QUALITY REVIEW (CEQR) (Discuss with CEQR lead agency before completing)

LEAD AGENCY **NYC Department of City Planning** CEQR NUMBER **TBD**

TYPE OF CEQR ACTION:

☐ TYPE II Type II category: _____ Date determination was made: _____

☐ TYPE I } Has EAS been filed? Yes ☐ No ☒

☒ UNLISTED } If yes, Date EAS filed: _____

Has CEQR determination been made? Yes ☐ No ☒

If yes, what was determination? Negative Declaration ☐

CND ..... ☐ } Date determination made: _____ (Attach Copy)

Positive Declaration ☐

If Positive Declaration, has PDEIS been filed? _____

Has Notice of Completion (NOC) for DEIS been issued? _____ If yes, attach copy.

If PDEIS has not been filed, has final scope been issued? _____ If yes, date issued: _____

6. COASTAL ZONE MANAGEMENT

IS SITE IN STATE DESIGNATED COASTAL ZONE MANAGEMENT (CZM)? AREA? No ☒ Yes ☐

7. RELATED ACTIONS BY CITY PLANNING

LIST ALL CURRENT OR PRIOR CITY PLANNING COMMISSION ACTIONS RELATED TO SITE:

APPLICATION NO.	DESCRIPTION/ DISPOSITION/STATUS	CAL. NO.	DATE
C100199ZMQ	Astoria Rezoning / Completed	19	04/28/2010

8. RELATED ACTIONS BY OTHER AGENCIES

LIST ALL OTHER CURRENT OR PRIOR CITY, STATE OR FEDERAL ACTIONS RELATED TO APPLICATION:

REFERENCE NO.	DESCRIPTION/ DISPOSITION/STATUS	CAL. NO.	DATE

9. FUTURE ACTIONS REQUIRED

LIST ALL FUTURE CITY, STATE OR FEDERAL ACTIONS REQUIRED TO IMPLEMENT THE PROPOSED ACTION:

10. APPLICANT (Attach authorizing resolution(s), if applicable)

Gandolfo DiFiore — /s/ Gandolfo DiFiore — 12/1/20

NAME AND TITLE OF APPLICANT OR AUTHORIZED REPRESENTATIVE | SIGNATURE OF APPLICANT | DATE

MDM Development Group LLC

APPLICANT'S COMPANY/AGENCY OR OTHER ORGANIZATION (IF ANY)

11. CO-APPLICANTS

(Attach authorizing resolution(s), if applicable)

Charles P. Scaturro — /s/ Charles P. Scaturro — 12/1/20

NAME AND TITLE OF CO-APPLICANT OR AUTHORIZED REPRESENTATIVE | SIGNATURE OF CO-APPLICANT | DATE

2441 Astoria Associates, LLC

CO-APPLICANT'S COMPANY/AGENCY OR OTHER ORGANIZATION

STREET ADDRESS	CITY	STATE	ZIP	TEL.NO.	FAX
258-01 Hillside Avenue	Floral Park	NY	11004	718-347-1101	n/a

Spiro Anagnostopoulos — /s/ Spiro Anagnostopoulos — 12/1/20

NAME AND TITLE OF CO-APPLICANT OR AUTHORIZED REPRESENTATIVE | SIGNATURE OF CO-APPLICANT | DATE

31 Neptune LLC

CO-APPLICANT'S COMPANY/AGENCY OR OTHER ORGANIZATION

STREET ADDRESS	CITY	STATE	ZIP	TEL.NO.	FAX
39-26 Bell Blvd, 2nd Floor	Bayside	NY	11361	917-494-6535	n/a

ADMINISTRATIVE CODE

ANY PERSON WHO SHALL KNOWINGLY MAKE A FALSE REPRESENTATION ON OR WHO SHALL KNOWINGLY FALSIFY OR CAUSE TO BE FALSIFIED ANY FORM, MAP, REPORT OR OTHER DOCUMENT SUBMITTED IN CONNECTION WITH THIS APPLICATION SHALL BE GUILTY OF AN OFFENSE PUNISHABLE BY FINE OR IMPRISONMENT OR BOTH, PURSUANT TO SECTION 10-154 OF THE CITY OF NEW YORK ADMINISTRATIVE CODE.

NOTICE

THIS APPLICATION WILL BE DEEMED PRELIMINARY UNTIL IT IS CERTIFIED AS COMPLETE BY THE DEPARTMENT OF CITY PLANNING OR THE CITY PLANNING COMMISSION. ADDITIONAL INFORMATION MAY BE REQUESTED OF THE APPLICANT BY THE DEPARTMENT OF CITY PLANNING.