



Board of Standards and Appeals

250 Broadway, 29th Floor
 New York, NY 10007
 212-386-0009 - Phone
 646-500-6271 - Fax
 www.nyc.gov/bsa

ZONING (BZ) CALENDAR
 Application Form

RECEIVED
 2014 MAR 14
 BSA APPLICATION NO. 289-13-BZ-
 CEQR NO. 14-BSA-057K

Section A

Applicant/
 Owner

Kramer Levin Naftalis & Frankel LLP NAME OF APPLICANT	New York Methodist Hospital OWNER OF RECORD
1177 Avenue of the Americas ADDRESS	506 6th Street ADDRESS
New York NY 10036 CITY STATE ZIP	Brooklyn NY 11215 CITY STATE ZIP
212 715-9189 AREA CODE TELEPHONE	LESSEE / CONTRACT VENDEE
212 715-8208 AREA CODE FAX	ADDRESS
ewagner@kramerlevin.com EMAIL	CITY STATE ZIP

Section B

Site
 Data

473-541 6th St., 502-522 8th Ave., 480-496 & 542-548 5th St., & 249-267 7th Ave. 11215
 STREET ADDRESS (INCLUDE ANY AKA) ZIP CODE

Block bounded by 7th Avenue, 6th Street, 8th Avenue, and 5th Street
 DESCRIPTION OF PROPERTY BY SOUNDING OR CROSS STREETS

1084 BLOCK	25, 26, 28, 39-44, 46, 48, 50-59, 164, 1001, and 1002 LOT(S)	Brooklyn BOROUGH	6 COMMUNITY DISTRICT	N/A LANDMARK/HISTORIC DISTRICT
Brad Lander CITY COUNCIL MEMBER	R6, C1-3/R6, R6B, and R7B ZONING DISTRICT (include special district, if any)		16d ZONING MAP NUMBER	

Section C

Dept of Building
 Decision

BSA AUTHORIZING SECTION(S) 72-21 for **VARIANCE** **SPECIAL PERMIT (Including 11-41)**

Section(s) of the Zoning Resolution to be varied 24-11, 24-17, 77-02, 24-382, 24-522, 24-552, 22-321, 24-36

DOB Decision (Objection/ Denial) date: 10/9/2013 Acting on Application No: 320576952

Section D

Description

(LEGALIZATION YES NO IN PART)

Application for a variance to allow the development of a new ambulatory care facility on the campus of New York Methodist Hospital.

Section E

BSA History
 and
 Related Actions

If "YES" to any of the below questions, please explain in the STATEMENT OF FACTS

	YES	NO
1. Has the premises been the subject of any previous BSA application(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PRIOR BSA APPLICATION NO(S): <u>142-92-BZ</u>		
2. Are there any applications concerning the premises pending before any other government agency?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Is the property the subject of any court action?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Section F

Signature

I HEREBY AFFIRM THAT BASED ON INFORMATION AND BELIEF, THE ABOVE STATEMENTS AND THE STATEMENTS CONTAINED IN THE PAPERS ARE TRUE.

Euse Wagner
 Signature of Applicant, Corporate Officer or Other Authorized Person

ANITA ROSE
 Notary Public, State of New York
 NO: 63RO4755325
 Qualified in Dutchess County

SWORN TO ME THIS 4th DAY OF March 2014

Anita Rose
 Notary Public
 Commission Expires April 30, 2015

Print Name