

**CITY OF ONEIDA**  
**Project Development Intake Form**  
109 North Main Street, Oneida, NY 13421

Codes Office	Ph 315-363-8460
Engineering	Ph 315-363-7222
Fire Department (Fire Marshall)	Ph 315-363-1910
Planning and Development	Ph 315-363-7467
Water Superintendent	Ph 315-363-1490

*Applicable to any type of project in the city. Complete as much as possible)*

**Name of Proposed Development/Project** *(can be temporary)*: \_\_\_\_\_

**Contact/Sponsor Name:**

**Owner Name (if different)**

\_\_\_\_\_

**Applicant/Sponsor Contact Information:**

\_\_\_\_\_

**Owner Contact Information:**

Street Number: \_\_\_\_\_

Street Number: \_\_\_\_\_

Street Name: \_\_\_\_\_

Street Name: \_\_\_\_\_

City: \_\_\_\_\_ Zip \_\_\_\_\_

City: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Is this a new business or idea? Yes  No

What is or will be the location of the project? \_\_\_\_\_

Tax Map Number (if known): \_\_\_\_\_

Are you the property owner? Yes  No

If not, who is the owner?

Have you contacted anyone from the city about this project? Yes  No

If yes, who:

**Current Condition of Site** (buildings, vacant, etc.):

**Describe the project/business** (Products, services, attach additional information sheet if necessary ex. Brochure or Flyer).

**Identify the Type of Business:** (Choose Primary Categories, more than one could apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Agriculture, Forestry, Fishing and Hunting | <input type="checkbox"/> Medical Offices                                      |
| <input type="checkbox"/> Animal Hospital/Kennel                     | <input type="checkbox"/> Motor Vehicle (Repair, Body Shop, Sales)             |
| <input type="checkbox"/> Appliance and Equipment Repair             | <input type="checkbox"/> Personal Care (Ex. Barber, Salon, Non-medical)       |
| <input type="checkbox"/> Equipment Assembly and Packaging           | <input type="checkbox"/> Professional Office                                  |
| <input type="checkbox"/> Bar/Tavern                                 | <input type="checkbox"/> Recreational Facilities (Commercial)                 |
| <input type="checkbox"/> Bed and Breakfast/Short-term Rental        | <input type="checkbox"/> Research and Development                             |
| <input type="checkbox"/> Carwash                                    | <input type="checkbox"/> Residential<br>(Single or Multi-family (circle one)) |
| <input type="checkbox"/> Care Center (Adult, Child, Nursing Home)   | <input type="checkbox"/> Retail Establishment/Services                        |
| <input type="checkbox"/> Entertainment Facility                     | <input type="checkbox"/> Storage (Warehousing/Self Service)                   |
| <input type="checkbox"/> Excavation (Commercial)                    | <input type="checkbox"/> Whole Sale Distribution                              |
| <input type="checkbox"/> Financial Institution                      | <input type="checkbox"/> Wireless Communication Facility                      |
| <input type="checkbox"/> Large Scale Solar Systems                  | <input type="checkbox"/> Other Services/Project_____                          |
| <input type="checkbox"/> Laundromat                                 |   |
| <input type="checkbox"/> Manufacturing                              |   |

**What kind of assistance are you seeking** (Select all that apply)?

- |  |  |
|--|--|
| <input type="checkbox"/> Grant Assistance                      | <input type="checkbox"/> Utility Hookups                   |
| <input type="checkbox"/> Property Information                  | <input type="checkbox"/> Building Expansion (same site)    |
| <input type="checkbox"/> Property Acquisition                  | <input type="checkbox"/> Business Expansion (new location) |
| <input type="checkbox"/> Property Development and Construction | <input type="checkbox"/> Required Governmental Approvals   |
| <input type="checkbox"/> Code Compliance                       | <input type="checkbox"/> Financing and Capital             |

**Please Return this form and additional documents to:**

**E-mail:** [development@oneidacity.com](mailto:development@oneidacity.com)

**Mail to:**  
**Planning and Development**  
**109 N. Main Street**  
**Oneida, NY 13421**