

## County of Albany

Harold L. Joyce Albany County Office Building 112 State Street - Albany, NY 12207

## Legislation Text

File #: TMP-4683, Version: 1  Description (e.g., Contract Authorization for Information Services): Adopting a Negative Declaration SEQR Determination for the Shaker Place Garage and Parking Lot Extension		
Submitted By:	Shawn Thelen	
Department:	Shaker Place Rehabilitation and Nursing Center	
Title:	Deputy Executive Director	
Phone:	518-447-7108	
Department Rep.		
Attending Meeting:	Shawn Thelen and or Larry I. Slatky	
Purpose of Request:		
<ul> <li>□ Adopting of Local Law</li> <li>□ Amendment of Prior Legislation</li> <li>□ Approval/Adoption of Plan/Procedur</li> <li>□ Bond Approval</li> <li>□ Budget Amendment</li> <li>□ Contract Authorization</li> <li>□ Countywide Services</li> <li>⋈ Environmental Impact/SEQR</li> <li>□ Home Rule Request</li> <li>□ Property Conveyance</li> <li>□ Other: (state if not listed)</li> </ul>	Click or tap here to enter text.	
CONCERNING BUDGET AMENDME	NTS	
Increase/decrease category (choose  ☐ Contractual ☐ Equipment ☐ Fringe ☐ Personnel ☐ Personnel Non-Individual	e all that apply):	

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☐ Revenue		
Increase Account/Line No.: Source of Funds: Title Change:	Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	
CONCERNING CONTRACT AUTHOR	ZATIONS	
Type of Contract:  ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☐ Grant ☐ Choose an item. ☐ Submission Date Deadline Click ☐ Settlement of a Claim ☐ Release of Liability ☐ Other: (state if not listed)		
Contract Terms/Conditions:		
Party (Name/address): Shaker Place Rehabilitation and Nursin, 100 Heritage Lane Albany, New York 12211  Additional Parties (Names/addresses): Click or tap here to enter text.	g Center	
Amount/Raise Schedule/Fee: Scope of Services: Garage and Parking Lot Extension	\$.00 Adopting the Negative Declaration Determination for the Shaker Place	
Bond Res. No.: Date of Adoption:	Click or tap here to enter text. Click or tap here to enter text.	
CONCERNING ALL REQUESTS		
Mandated Program/Service: If Mandated Cite Authority:	Yes ☑ No ☐ State Environmental Quality Review and the New York State Historic	

**Preservation Office** 

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ls there a Fiscal Impact:	Yes □ No ⊠
Anticipated in Current Budget:	Yes □ No ☒
County Budget Accounts:	
Revenue Account and Line:	Click or tap here to enter text.
Revenue Amount:	Click or tap here to enter text.
	C.13.1. 3.1 13.1 13.1 13.1 13.1 13.1 13.
Appropriation Account and Line:	N/A
Appropriation Amount:	N/A
Source of Funding - (Percentages) Federal: State: County: Local: Original Awarding Agency / Fun Click or tap here to enter New York State Pass-Through A	text. Agency (if applicable):
Term	
Term: (Start and end date)	12/31/2023 through 12/31/2025
Length of Contract:	25 months
Impact on Pending Litigation	Yes □ No ⊠
If yes, explain:	Click or tap here to enter text.
-	•

Previous requests for Identical or Similar Action:

Resolution/Law Number: N/A

Date of Adoption: Click or tap here to enter text.

## **Justification**: (state briefly why legislative action is requested)

Shaker Place Rehabilitation and Nursing Center is requesting the adoption of the Negative Declaration Determination State Environmental Quality Review (SEQR) for the Shaker Place Garage and Parking Lot Extension. This is a Type 1 SEQR review and approved through Resolution 34-2023 and it has been determined by the New York State Historic Preservation Office that there would be no adverse impact to historic and cultural resources. (see attachments)