

Special Permit Application

JN RETAIL LLC

[REDACTED]

[REDACTED]

City of Watertown

245 Washington Street Watertown, NY 13601

Special Permit Application

Luke DeWitt - Flynnstoned Watertown

To whom it may concern:

On behalf of JN Retail LLC, I am proud to present our vision of Flynnstoned Watertown, a state locally owned and operated retail cannabis store that will be located at Stateway Plaza, 1222 Arsenal St, Watertown, NY 13601.

Our mission is to create a safe, professional, and community-oriented environment where adults can responsibly access cannabis while contributing to the economic growth and positive development of the area.

Flynnstoned Watertown will operate with a strong emphasis on accordance, safety, and education, presenting only state-regulated and lab-tested products to ensure the highest standards of quality and transparency. Our goal is to provide consumers with a reliable, affordable, and joyful retail experience while promoting responsible participation in New York's regulated cannabis market.

Beyond retail operations, our presence at Stateway Plaza will help revitalize and attract new attention to the surrounding area, increasing local foot traffic and supporting neighboring businesses. We are committed to hiring locally, building relationships with community partners, and maintaining a modern, inviting storefront that reflects professionalism, integrity, and respect for the community we serve.

Our team is devoted to operating in full alignment with New York State regulations while setting a positive example of what a responsible and community-minded cannabis business can be.

On behalf of JN Retail, we are hereby applying for a Special Permit in the city of Watertown, NY to use the premises as a licensed recreational cannabis dispensary.

The intended future use of the property is to operate as a fully licensed recreational cannabis dispensary and abide by local and state laws and regulations.

Our hours of operation will be

Sunday 10am – 8pm

Monday – Thursday 10am – 9pm

Friday & Saturday 10am – 10pm

Property located at 1222 Arsenal Street Suite 170 Watertown NY 13601

Community Benefit Summary:

- Knowledge & Convenience: We will provide customers with resources and guidance to encourage safe, informed, and accountable cannabis use.
- Job Creation: We plan to hire people from within the local population, offering fair pay, training, and opportunities for long-term career expansion.
- Economic Impact: By locating in Stateway Plaza, we will improve local foot traffic, support nearby businesses and contribute to the city's tax base.
- Public Safety & Compliance: Our store will strictly adhere to all state regulations, sell only state-tested products, and maintain a secure environment with advanced safety protocols.
- Community Engagement: We aim to consort with local organizations and participate in community progress efforts to ensure our presence benefits Watertown as a whole.

Relating to the proposal, please find attached the following:

Tax Map with subject parcel highlighted

State Environmental Quality Review

Electronic Copy of Entire Submission

\$125 Application fee

Site Drawing

Thank you for the opportunity and consideration. We appreciate your review and hope to continue working with the City of Watertown.

Very truly yours,

Luke DeWitt





City of Watertown
SPECIAL USE PERMIT APPLICATION FORM

City of Watertown, Planning and Community Development Dept.
245 Washington Street, Room 305, Watertown, NY 13601
Phone: 315-785-7741 Email: planning@watertown-ny.gov

Received:

PROPERTY INFORMATION:

PROPERTY ADDRESS: 1222 Arsenal Street

TAX PARCEL NUMBER: 8-53-121.000

PROPOSED USE (describe fully; attach additional sheets if necessary): Adult use recreational cannabis dispensary

APPLICANT INFORMATION:

APPLICANT NAME: Luke DeWitt

APPLICANT MAILING ADDRESS: [REDACTED]

PHONE NUMBER: [REDACTED] E-MAIL: [REDACTED]

PROPERTY OWNER INFORMATION (if different from applicant):

PROPERTY OWNER NAME: Stateway Plaza Shopping Center

PROPERTY OWNER MAILING ADDRESS (if different from subject parcel): [REDACTED]

PHONE NUMBER: [REDACTED] E-MAIL: [REDACTED]

CHECKLIST (please include all of the following in addition to this application form):

- | | |
|---|--|
| <input checked="" type="checkbox"/> Cover Letter* | <input checked="" type="checkbox"/> Tax Map with subject parcel highlighted* |
| <input checked="" type="checkbox"/> Site Drawing* | <input checked="" type="checkbox"/> State Environmental Quality Review (SEQR) form* |
| <input checked="" type="checkbox"/> \$125 application fee * | <input checked="" type="checkbox"/> Electronic Copy of Entire Submission (PDF Preferred) |

*See appendices for further information

Applicant Signature: Luke DeWitt [REDACTED] *Date:* 2/17/26

Property Owner Signature (if different): [REDACTED] *Date:* 2/17/2026

Appendix A: Checklist Instructions

- Cover Letter:** The applicant must submit a detailed cover letter describing what the applicant seeks to establish with the proposed Special Use Permit (e.g. the intended future use of the property). Include details such as proposed site alterations, hours of operation, compatibility with the surrounding neighborhood, etc. The applicant should refer to Section 310-52.3 of the Zoning Ordinance, which contains all Special Use Permit standards, and is accessible at the following website: <https://www.ecode360.com/10498983>.
- Tax Map:** A copy of the City Tax Map, with the subject parcel highlighted. Tax maps are accessible using the following website: <https://www.watertown-ny.gov/imo/search.aspx>. Upon entering the required information, the search engine will direct the user to the Parcel Data page for their property. A link to the appropriate tax map will appear on the right hand side of the Parcel Data page.
- Drawing:** The sketch/site drawing must accurately depict what the applicant seeks to establish and include any information necessary to help the Planning Board comprehend the request. Examples of features to show on the drawing include:
- Site Plan showing existing and proposed building locations, including all property line setbacks
 - Vehicular and pedestrian circulation, parking and loading spaces
 - Landscaping plans, including site grading (if applicable).
- To assist with the drawing, applicants may wish to use the City's public GIS mapping tool, available at: <https://www.watertown-ny.gov/index.asp?NID=168>. However, measurements obtained using the GIS tool are NOT an acceptable substitute for actual measurements taken on site.
- SEQR:** The applicant must submit a completed SEQR Short Environmental Assessment Form (EAF). The New York State Department of Environmental Conservation (DEC) offers an online mapping tool that assists in completing the SEQR form. It is available at the following website: <https://gisservices.dec.ny.gov/eafmapper/>.
- Property Notice/Affidavit:** The applicant must post a sign on the premises of the proposed permit for at least two (2) weeks prior to the Public Hearing that the City Council will hold on the matter. The applicant must submit an affidavit to the City Council affirming that they have fulfilled this requirement. Planning Staff will provide the applicant with the required sign and affidavit, and will identify the timeline and all relevant dates at the time of distribution.
- Required Sets:** The items in the checklist (other than the application fee) collectively make up a "set." The applicant is responsible for submitting 10 complete collated "sets" to the City Planning Department. If the application requires Jefferson County Planning Board review, then the applicant must submit 11 "sets." Planning Staff will inform the applicant if this is necessary.
- Submittal Instructions:** Submit all required materials to:
- Michael A. Lumbis, Planning and Community Development Director
City of Watertown
245 Washington Street
Watertown, NY 13601
- Meeting Information:** The Planning Board normally meets at 6:00 p.m. on the first Tuesday of every month in Council Chambers at City Hall, 245 Washington Street. The application deadline is 14 days prior to the scheduled meeting date. Planning Board action does not represent final approval, as the Planning Board only votes to make a recommendation to City Council, which holds the sole authority to grant a Special Use Permit. Special Use Permit Requests carry a legal requirement for the City Council to hold a Public Hearing prior to voting on the Ordinance. The Special Use Permit application process will typically take six-to-eight weeks.

Occasionally, due to holidays or other reasons, meetings may occur on other dates and/or times. The City will announce any changes to meeting dates in advance on its website at www.watertown-ny.gov.

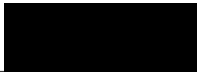
Additional Information regarding Special Use Permits: Upon applying for a Special Use Permit, please note the following:

- A Special Use Permit is a special authorization by City Council to allow a particular land use in a Zoning District that specifically requires additional oversight of said land use. The Zoning Ordinance identifies acceptable special uses under the district descriptions for each Zoning District. The Special Use Permit process ensures that the proposed use will not adversely affect the neighborhood.
- The City Council may impose reasonable conditions and restrictions that directly relate to the proposed special use. The applicant is responsible meeting all such conditions prior to any City official issuing any permits, and continuing to meet any such conditions for the duration of the approved special use.
- A Special Use Permit shall expire one year from the date of City Council approval if the applicant has not begun using the subject property for the approved special use. A Special Use Permit shall also expire immediately upon cessation of the approved special use. Council may approve more stringent expiry conditions at their discretion.

AFFIDAVIT OF POSTING NOTICE ON PROPERTY

I, Luke DeWitt the undersigned, do hereby certify that the sign provided by the Planning and Community Development Department giving notice of my Special Use Permit request was posted on 2/17/2026 for a continuous period of at least two (2) weeks immediately before the public hearing scheduled for April 7th.

Luke DeWitt



2/17/2026

Applicant Signature

Date

Nick Moore



2/17/2026

Witness

Date

The applicant must return this affidavit to Planning Staff on or before the date for which the City Council has scheduled the public hearing.

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. 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.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: Flynnstoned Watertown			
Project Location (describe, and attach a location map): 1222 Arsenal Street Watertown NY			
Brief Description of Proposed Action: Adult use recreational cannabis dispensary.			
Name of Applicant or Sponsor: Luke Dewitt		Telephone: [REDACTED]	
		E-Mail: [REDACTED]	
Address: [REDACTED]			
City/PO: Syracuse		State: NY	Zip Code: 13212
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: Office of cannabis management			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		13.06 acres	
b. Total acreage to be physically disturbed?		13.06 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		13.06 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO YES
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO YES
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	NO YES YES NO
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO YES
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ Existing already connected _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO YES
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ Existing already connected _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO YES
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. 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?	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	NO YES YES NO
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	NO YES YES NO

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input checked="" type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>Luke DeWitt</u> Date: <u>2/17/2026</u>		
Signature: <u>Luke DeWitt</u> [REDACTED] Title: <u>General Manager</u>		

Project:

Date:

***Short Environmental Assessment Form
Part 2 - Impact Assessment***

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

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**Short Environmental Assessment Form
Part 3 Determination of Significance**

For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT FORM

Short Environmental Assessment Form

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5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
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I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
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Signature: <u>Luke DeWitt</u> [REDACTED] Title: <u>General Manager</u>		

Project:

Date:

***Short Environmental Assessment Form
Part 2 - Impact Assessment***

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4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
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a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
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Project:

Date:

**Short Environmental Assessment Form
Part 3 Determination of Significance**

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<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT FORM