GENESEE COUNTY PLANNING BOARD REFERRALS
NOTICE OF FINAL ACTION

GCDP Referral ID	**V-02-ALEX-3-21**
Review Date	**3/11/2021**

Municipality	**ALEXANDER, V.**
Board Name	**PLANNING BOARD**
Applicant's Name	**Alice Brenkus**
Referral Type	**Site Plan Review**
Variance(s)	
Description:	**Site Plan Review to install a new sign for an additional service at an existing grooming salon.**
Location	**10571 Main St. (NYS Rt. 98), Alexander**
Zoning District	**Commercial (C) District**

PLANNING BOARD DECISION

APPROVAL

EXPLANATION:

The proposed additional sign should pose no significant county-wide or inter-community impact.

Felice A. Altman

Director

March 11, 2021

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:
GENESEE COUNTY DEPARTMENT OF PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 815-7901

DEPARTMENT USE ONLY:
GCDP Referral # **V-02-ALEX-3-21**

* GENESEE COUNTY * PLANNING BOARD REFERRAL

RECEIVED
Genesee County
Dept. of Planning
3/4/2021

Required According to:
GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N
(Please answer ALL questions as fully as possible)

1. REFERRING BOARD(S) INFORMATION

Board(s) Village of Alexander Planning Board
Address 3350 Church St
City, State, Zip Alexander, NY 14005
Phone (585) 708 - 4167 Ext.

2. APPLICANT INFORMATION

Name Alicia Brenkus
Address 10571 Main St
City, State, Zip Alexander, NY 14005
Phone (585) 993 - 0052 Ext. Email preciouspaws10596@gmail

MUNICIPALITY: ☐ City ☐ Town ☑ Village of Alexander

3. TYPE OF REFERRAL: (Check all applicable items)

- ☐ Area Variance
- ☐ Use Variance
- ☐ Special Use Permit
- ☑ Site Plan Review
- ☐ Zoning Map Change
- ☐ Zoning Text Amendments
- ☐ Comprehensive Plan/Update
- ☐ Other:

Subdivision Proposal
- ☐ Preliminary
- ☐ Final

4. LOCATION OF THE REAL PROPERTY PERTAINING TO THIS REFERRAL:

A. Full Address 10571 Main St Alexander NY 14005
B. Nearest intersecting road Railroad Ave
C. Tax Map Parcel Number 2.-2-16
D. Total area of the property 0.13 acres Area of property to be disturbed 0
E. Present zoning district(s) Commercial

5. REFERRAL CASE INFORMATION:

A. Has this referral been previously reviewed by the Genesee County Planning Board?

☐ NO ☑ YES If yes, give date and action taken

B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law

C. Please describe the nature of this request Applicant is requesting additional signage on existing business for additiona service business

6. ENCLOSURES – Please enclose copy(s) of all appropriate items in regard to this referral

- ☑ Local application
- ☐ Site plan
- ☐ Subdivision plot plans
- ☑ SEQR forms
- ☐ Zoning text/map amendments
- ☑ Location map or tax maps
- ☐ Elevation drawings
- ☑ Agricultural data statement
- ☐ New or updated comprehensive plan
- ☐ Photos
- ☐ Other:

7. CONTACT INFORMATION of the person representing the community in filling out this form (required information)

Name Matthew Mahaney Title CEO Phone (585) 343 - 1729 Ext. 238
Address, City, State, Zip 3833 West Main St Rd Batavia, NY 14020 Email mmahaney@townofbatavia.com

TOWN VILLAGE CITY OF Alexander Application #_____
(circle one)

Agricultural Data Statement

Date 03/04/2021

Instructions: This form must be completed for any application for a special use permit, site plan approval, use variance or a subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant	Owner if Different from Applicant
Name: Alicia Brenkus Address: 10571 Main St Alexander, NY 14005	Name: Rolling Hill Apartments LLC Address: 340 West Main St Batavia,NY 14020

1. Type of Application: ☐Special Use Permit; ☑Site Plan Approval ; ☐Use Variance; ☐Subdivision Approval
   (circle one or more)

2. Description of proposed project: Additional Signage for existing business

3. Location of project: Address: 10571 Main St Alexander, NY 14005
   Tax Map Number (TMP) 2.-2-16

4. Is this parcel within an Agricultural District? ☑NO ☐YES (Check with your local assessor if you do not know)
5. If YES, Agricultural District Number_____
6. Is this parcel actively farmed? ☑NO ☐YES
7. List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary.

Name: Ziegler Farms Inc Address: 0 Telephone Rd Alexander, NY 14005 Is this parcel actively farmed? ☐NO ☑YES	Name: _____ Address: _____ Is this parcel actively farmed? ☐NO ☐YES
Name: _____ Address: _____ Is this parcel actively farmed? ☐NO ☐YES	Name: _____ Address: _____ Is this parcel actively farmed? ☐NO ☐YES

_____ _____
Signature of Applicant Signature of Owner (if other than applicant)

Reviewed by: _____ 3/4/21
Signature of Municipal Official Date

NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Department.

Building and Zoning Application Permit No._____

Village of Alexander 3350 Church Street P.O. Box 266 Alexander, NY 14005 PH. 585-708-4167

Date____ /____ / ____ Zone_____ Flood Zone_____ Wellhead Protection _____ Corner Lot_____

New Construction ☒ Fence ☐ Pond ☐ Sign ☒ Alteration(s)☐ Addition ☐ Demolition ☐

Accessory Bldg. ☐ Mobile Home ☐ Fill Permit ☐ Home Occupation☐ Land Separation ☐ Site Plan Approval ☐

Special Use Permit ☐ Temporary Use ☐ Subdivision ☐ Zoning Variance Request ☐ Other ☐ Specify:_____

Tax Map No. 20-2-16

Owners Name Alicia Brenkus Phone No. (585) 993 0052

Address 10571 main St Alexander NY Project Road Width _____ft

Applicants Name Alicia Brenkus Project Address 10571 main St Alexander

E Mail Address Reciasaws10596@gmail.com Phone No (585) 993 0052

Description of Project: Half wall & Sign 22"x3'

Existing Use Grooming Salon Proposed Use Waxing Salon

Estimated Cost Building_____ Plumbing_____ Mechanical_____ Miscellaneous_____

$1,000 - 1,500

SEQR CLASSIFICATION Type 1 ☐ Type 2 ☐ Unlisted ☐

Review completed by Planning Board ☐_____ Zoning Board of Appeals ☐_____

Permit Fee $_____ Application Date ____/____/____ Permit Expires On ____/____/____

Issuing Officer _____ **Date**____/____/____

IN SIGNING THIS DOCUMENT I HEARBY GIVE THE RIGHT OF AN ON SITE INSPECTION TO THE TOWN OF BATAVIA CODE ENFORCEMENT OFFICIAL OR THEIR DESIGNE. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PREFORMANCE OF CONSTRUCTION.

I, Alicia Brenkus, as Owner or Authorized Agent hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge.

Alicia Brenkus 2-28-21

Signature of Owner or Authorized Agent Date

Construction Attachment:

Permit No. _____

Type of Construction

Agriculture ☐ Commercial ☒ Industrial ☐ Residential ☐ Miscellaneous ☐

Contractors

General Contactors Name Dylan Shea Address N/A Phone ( ) 297-0654

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

Certificate of Workers Compensation: Yes ☐ No ☐ Expiration Date ___/___/___

Liability Insurance: Yes ☐ No ☐ Expiration Date ___/___/___

APPLICANT SHALL PROVIDE A COPY OF ALL INSURANCE AND WORKERS COMP. WITH THIS APPLICATION

- **Masonry** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

- **Electrical** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

- **Plumbing** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

- **Alarms / Sprinklers** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

- **HVAC** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

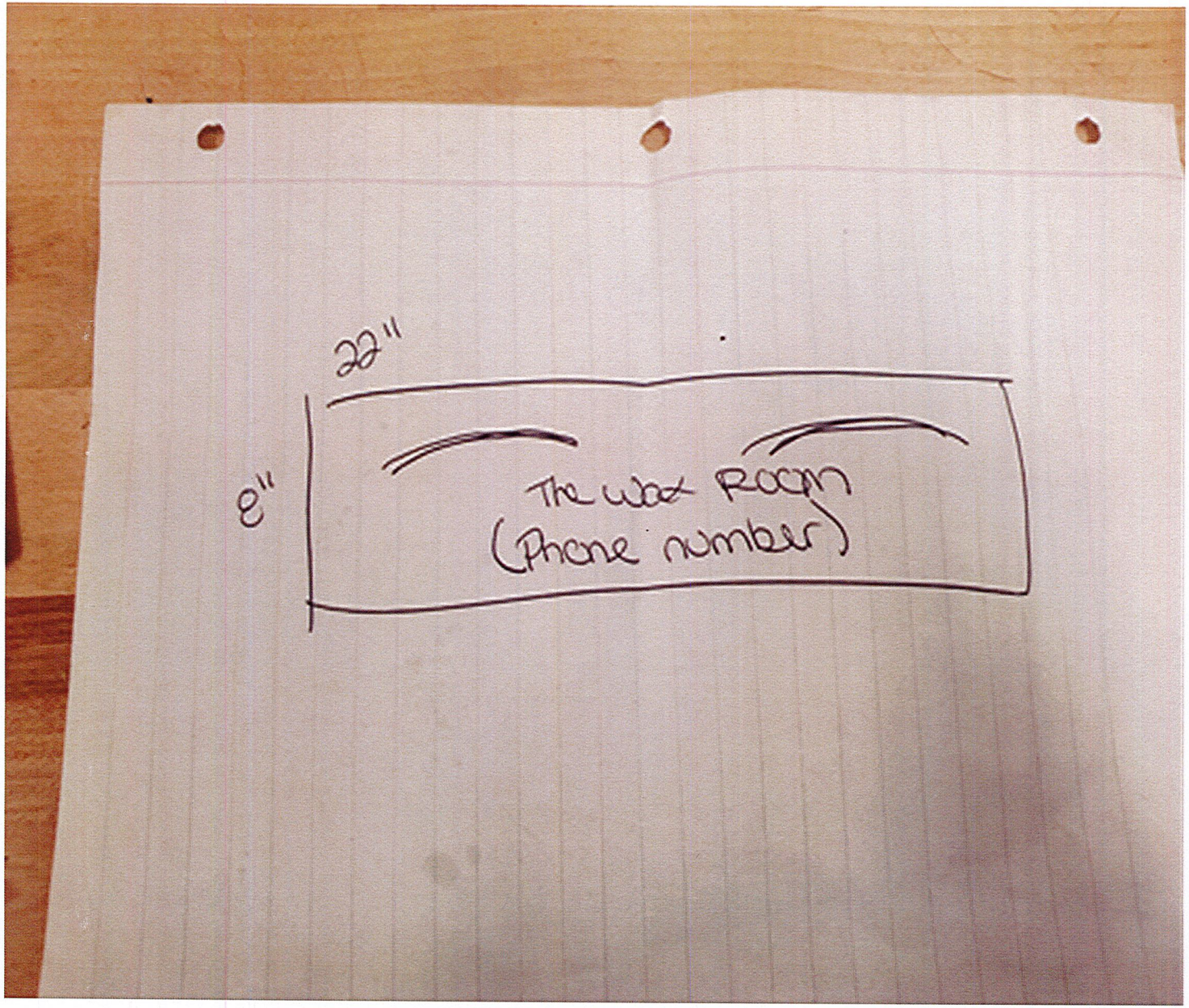
- **Landscape / Site** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

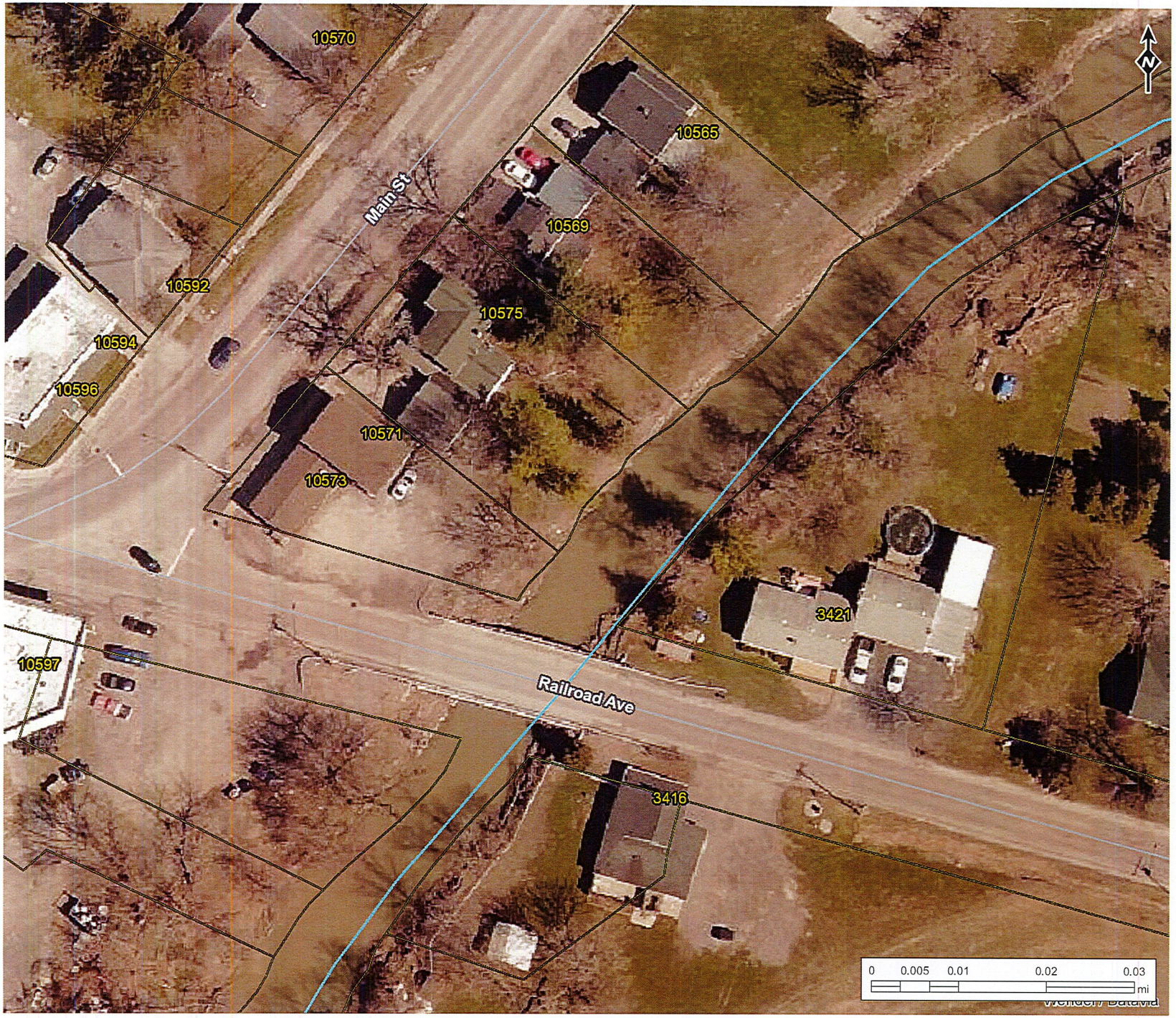
- **Miscellaneous** _____ Phone (__)_____

Office Phone (__)_____ Cell Phone(__)_____ Fax No. (__)_____ E-Mail _____

Signature of Owner or Authorized Agent X Alicia Bell Date 2.28.21


22"
8"
The Wax Room
(Phone number)

Town of Batavia Web Mapping Application



LEGEND

- Water Tank
- Pump Station

Hydrant

- Red
- Yellow
- Yellow w/ Blue Caps

Fittings

- Type Not Specified
- Bend
- Cap
- Cross
- Coupling
- Reducer
- Blowoff Connection
- Sleeve
- Tee
- Other

Meters

- Unknown
- Master Meter
- Master w/ PRV-PSV
- Meter

wendelcompanies.com

Town of Batavia Web Mapping Application

LEGEND

- Water Tank
- Pump Station

Hydrant

- Red
- Yellow
- Yellow w/ Blue Caps

Fittings

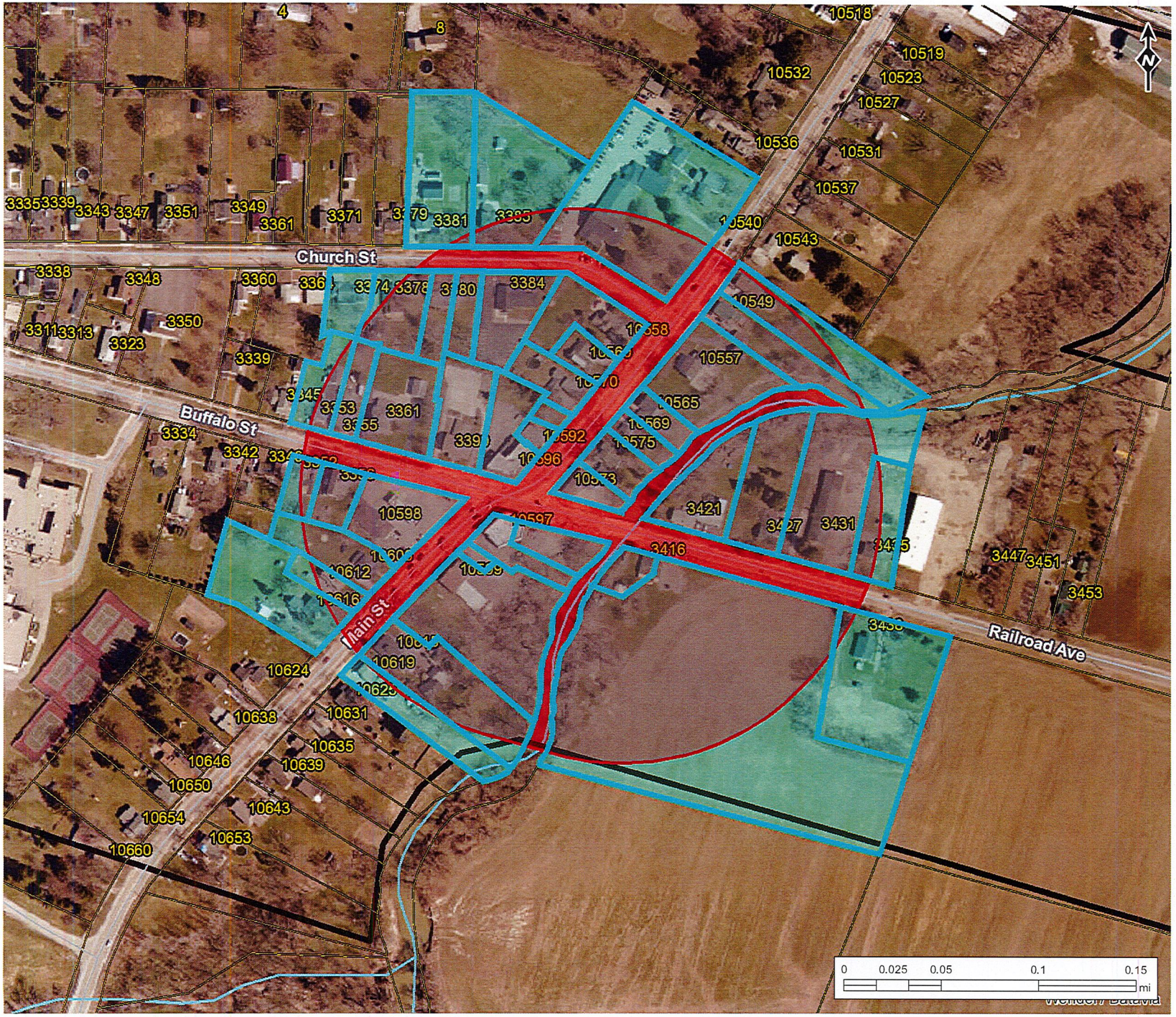
- Type Not Specified
- Bend
- Cap
- Cross
- Coupling
- Reducer
- Blowoff Connection
- Sleeve
- Tee
- Other

Meters

- Unknown
- Master Meter
- Master w/ PRV-PSV
- Meter

wendelcompanies.com

Town of Batavia Web Mapping Application



LEGEND

- Water Tank
- Pump Station

Hydrant

- Red
- Yellow
- Yellow w/ Blue Caps

Fittings

- Type Not Specified
- Bend
- Cap
- Cross
- Coupling
- Reducer
- Blowoff Connection
- Sleeve
- Tee
- Other

Meters

- Unknown
- Master Meter
- Master w/ PRV-PSV
- Meter

wendelcompanies.com

John E Riley
10619 Main St
Alexander, NY

Alexander Methodist Church
#0
NY

John F Dyrbala
3385 Church St
Alexander, NY

Karen E Stewart
3381 Church St
Alexander, NY

Robert J Young
10615 Main St
Alexander, NY

Beatrice Dominick
10592 Main St
Alexander, NY

Gary Dominick
#0
NY

Jennifer A Wall
10594 Main St
Alexander, NY

C&D Design, Build, Development LLC
3399 Buffalo St
Alexander, NY

Sydney Breton
3361 Buffalo St
Alexander, NY

John H Koch
3355 Buffalo St
Alexander, NY

Carole M Wolfley
10570 Main St
Alexander, NY

Diane S Quinn
3353 Buffalo St
Alexander, NY

Eric Kleckler
10560 Main St
Alexander, NY

Beatrice M Dominick
10558 Main St
Alexander, NY

Pro Properties Group, LLC
3384 Church St
Alexander, NY

Douglas W Dayton
3380 Church St
Alexander, NY

Douglas W Dayton
#0
NY

Attica Center Baptist Church
3378 Church St
Alexander, NY

Steven Fitzner
3374 Church St
Alexander, NY

Ziegler Farms Inc
#0 Telephone Rd
Alexander, NY

Andrew Schmieder
3438 Telephone Rd
Alexander, NY

Dawn L Townsend
10612 Main St
Alexander, NY

Kody A Wisniewski
3416 Telephone Rd
Alexander, NY

Dean S Lapp Randy Wall
10599 Main St
Alexander, NY

Sunnyside Cycles Sales LLC
#0
NY

Sheri A Russell
10616 Main St
Alexander, NY

Village of Alexander
#0 Telephone Rd
Alexander, NY

Todd R Hoover
10606 Main St
Alexander, NY

Sunnyside Cycle Sales LLC
1 Main St
Alexander, NY

Reisdorf Family LLC
#0 Main St
Alexander, NY

David N Trzecieski
3356 Buffalo St
Alexander, NY

Rolling Hill Apartments, LLC
10571 Main St
Alexander, NY

Heather Gill
3352 Buffalo St
Alexander, NY

Bonnie E Green
3435 Telephone Rd
Alexander, NY

Karen H Taylor
10575 Main St
Alexander, NY

Christopher J Hinca
3421 Telephone Rd
Alexander, NY

Josselyn Borowiec
10569 Main St
Alexander, NY

Town Of Alexander
#0 Telephone Rd
Alexander, NY

Thomas M Green
3427 Telephone Rd
Alexander, NY

Kelly M Pope
10565 Main St
Alexander, NY

Shirley A Harmon
10557 Main St
Alexander, NY

Gerald T Brade
10549 Main St
Alexander, NY

Richard D Smith
10547 Main St
Alexander, NY

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:
Waxing Salon

Project Location (describe, and attach a location map):
10571 main St Alexander NY 14005

Brief Description of Proposed Action:
1/2 wall seperating work area and waiting room.

Name of Applicant or Sponsor: Alicia Brenkus	Telephone: 585 993 0052
	E-Mail: PreciousPaws10596@gmail.com
Address: 67 Dewey Ave	
City/PO: Batavia	State: NY Zip Code: 14020

	NO	YES
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.	☒	☐
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:	☒	☐

3. a. Total acreage of the site of the proposed action? 0 acres
   b. Total acreage to be physically disturbed? 0 acres
   c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 0 acres

Project is 775 sq ft of rented space

4. Check all land uses that occur on, are adjoining or near the proposed action:

☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☒ Commercial ☐ Residential (suburban)
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Specify):
☐ 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?	☐	☐	☒
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	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: _____	NO ☒	YES ☐	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? only one business will be open at a time	NO ☒	YES ☐	
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?	☒	☐	
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: _____ _____	NO ☐	YES ☒	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO ☒	YES ☒	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	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?	NO ☒	YES ☐	
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?	☒	☐	
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?	NO ☒	YES ☐	
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: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:

☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional

☐ Wetland ☐ Urban ☐ Suburban

None N/A

	NO	YES
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?	☒	☐
16. Is the project site located in the 100-year flood plan?	☒	☐
17. Will the proposed action create storm water discharge, either from point or non-point sources?	☒	☐
If Yes,		
a. Will storm water discharges flow to adjacent properties?	☒	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	☒	☐
If Yes, briefly describe: _____		
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: _____		
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: _____		
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: _____		

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor/name: Alicia Brenkus Date: 2/28/21

Signature: Alicia Brenkus Title: _____

PRINT FORM

V-02-ALEX-3-21

2.-2-13
2.-3-1
2.-3-20.2
2.-2-14
2.-3-21
2.-2-15
Railroad Avenue
2.-2-16
Main Street (NY 98)
Railroad Avenue
2.-1-1
1.-1-68
1.-1-69
1.-1-70
2.-1-2
04/21/2018
© All Pictometry