GENESEE COUNTY PLANNING BOARD
ZONING REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID	**T-07-DAR-6-17**
Review Date	**6/8/2017**

Municipality	**DARIEN, T.**
Board Name	**PLANNING BOARD**
Applicant's Name	**Charles Miller**
Referral Type	**Site Plan Review**
Variance(s)	
Description:	**Site Plan Review for a new retail sales business (sheds).**
Location	**1632 Broadway Rd. (Rt. 20), Darien**
Zoning District	**Commercial (C) District**

PLANNING BOARD DECISION

APPROVAL

EXPLANATION:

The proposed shed retail sales business should pose no significant county-wide or inter-community impact.

Felix A. Ottaviano

Director

June 8, 2017

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

Clear Form

DEPARTMENT USE ONLY:
GCDP Referral # T-07-DAR-6-17

RECEIVED
Genesee County
Dept. of Planning
5/24/2017

* GENESEE COUNTY * PLANNING BOARD REFERRAL

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) Darien Planning Board
Address 10569 Alleghany Road
City, State, Zip Darien, NY 14040
Phone (585) 547 - 2274 Ext. 1026

2. APPLICANT INFORMATION

Name Charles Miller
Address 11331 Shadigee Lane
City, State, Zip Lyndonville, NY 14098
Phone (585) 397 - 0938 Ext. Email

MUNICIPALITY: ☐ City ☒ Town ☐ Village of Darien

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 1632 Broadway, Darien, NY
B. Nearest intersecting road Tinkham Road
C. Tax Map Parcel Number 11.-2-52.2
D. Total area of the property 4.91 Acres Area of property to be disturbed 100' x 70'
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

Article VII, Sec 704, Sub B, Para 1 & Sched A

C. Please describe the nature of this request Sale of mobile sheds and out buildings.

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 Jerry Yoder Title ZEO Phone (585) 547 - 2274 Ext.
Address, City, State, Zip 10569 Alleghany Rd., Darien, NY 14040 Email zeo@townofdarienny.com

TOWN OF DARIEN
GENESEE COUNTY, NEW YORK 14040

PLANNING BOARD
SITE PLAN REVIEW
SPECIAL USE PERMIT APPLICATION

Application #: PB-10-17
(For office use only)

Today's Date: 4/28/2017

Provision of Zoning Law Involved:
Article: VII, Section: 704, Subsection: B, Paragraph: 1
Purpose of Request: Also: Schedule A.

*This request would be in harmony with the orderly development of the district in which it is located because: Permitted accessory use.

*This request would not be detrimental to the property or persons in the neighborhood because: Permitted use

*This request would not increase the traffic flow in the area to the extent that traffic safety would be endangered because: Low volume business. Shed sales. To be used as a display site only to generate sales from home site.

The applicant should submit one (1) copy of the application, nine (9) copies of the site plan and one (1) copy of the zoning application

CERTIFICATION:

I hereby certify that I have read the instructions and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use 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 ordinance regulating construction or performance of construction.

Date of Signature

Signature of Applicant

4/28/2017
Date of Signature

Signature of Owner (If different from Applicant)

Office Use Only:
Zoning Permit Application #: PB-10-17 Date Received: 4/28/17 Fee Paid: $60.00

Date of First Hearing: 5/15/17 Location: Darien Town Hall

Date of Second Hearing: 6/8/17 Location: GC PB

Date of Subsequent Hearings: 6/19/17 Location: Darien Town Hall

Action: (___) APPROVED (___) REJECTED Date: _____

Planning Board Chairman Signature: _____

Zoning Officer Signature: _____ Date Permit Issued: _____

Additional Conditions Imposed: _____

TOWN OF DARIEN APPLICATION FOR ZONING PERMIT

Today's Date: 4/28/2017 Application Number: PB-10-17

Applicant's Name: Charles Miller

Address: 11331 Shadigee Lane Lyndonville N.Y. 14098

Phone Number: 585-397-0938 Tax Map #: 11.-2-52.2

Address of Project: 1632, Broadway, Darien, Ny 14040

INSTRUCTIONS:
Please read the instructions carefully before completing the application form. Fill out the application form completely, using ball point pen or a typewriter. Submit your application form & required attachments (list of such on this form) to the Zoning Enforcement Officer (ZEO) prior to commencing this project or use.
***THIS APPLICATION IS NONTRANSFERABLE AND IS VALID FOR ONE YEAR PERIOD ONLY**

1. Zoning District property located in: RESIDENTIAL (__ Low or __ Medium Density)
   __ Industrial X Commercial __ Recreational
2. Permit Application for: __ New Construction __ Addition __ Alteration __ Relocation
   __ Accessory Structure __ Home Occupation __ **SPECIAL USE PERMIT**
   __ **VARIANCE** X **SITE PLAN REVIEW** __ **TEMPORARY USE**
3. Is this parcel: __ Corner Lot X Water District __ Sewer District
4. Dimensions of this lot: 400' length X 540' width and/or area 4.91 ACRES
5. What is the front set back (in feet) from the project to the street right-of-way (Check Survey for ROW): 50' ft and what is the set back (in feet) from project property line Side A 40' Side B 318 Back 270 (Also depict on plot diagram).
6. Total percentage (%) of coverage of all buildings on lot (including proposed): _____%
7. Total Dwelling Units: 1
8. Project Cost: _____ Actual ____ Estimated ____
9.

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQUARE FEET
House				
Garage/Pole Barn				
Accessory Structure				
Commercial				
Industrial				
Signs				

Bathrooms: ____
Bedrooms: ____
Rec Room: ____
Family Room: ____
Fireplace: ____

Describe proposed project and/or use: Sale Mobile sheds, out buildings, Frontier Cabins, Gazebos in an area 100x70 or less.

CERTIFICATION: I hereby certify that I have read the instructions, examined this application and supporting attachments and know them to be true & correct. All provisions of Laws and Ordinances covering this type of work or use will be complied with, whether specified herein or not. The granting of a permit does not give authority to violate or cancel the provisions of any other State or Local Law/Ordinance regulating construction, performance or use.

Charles A. Miller
APPLICANT SIGNATURE (must sign in presence of ZEO)

PROPERTY OWNER SIGNATURE (If other than applicant)

PB-10-17

Attachments required & verified by ZEO: Site Plan Review.

Action taken by ZEO: **APPROVED:** [X] **DENIED:** [ ] Reason: Permitted accessory use

Referral To: [X] Town Planning [ ] Town Appeals [X] County Planning [ ] Building Inspector

4/28/2017
Date of Signature

Signature of ZEO

Date of Signature # of Inspects Signature of Building Inspector

Date Fee Received Fee Indicate Fees Paid/Town Clerk Use Only

Date of Signature Renewal Approval / ZEO Signature

This application will not be considered complete until all appropriate attachments have been supplied and accepted; photo-copies are acceptable. The applicant is responsible to present all applicable attachments to the ZEO. The project in question can not be started until an approved Zoning Permit has been issued, the Building Inspector contacted and if required, the Town Clerk has issued the Building Permit. The applicant is responsible to make all calls to the Building Inspector for review of plans and inspection assignments and to pay any necessary fees as set forth in the appropriate schedule of fees to the Town Clerk.
If a Site Plan is necessary, a total of nine (9) copies are needed.

Please be advised that you may contact the following if you have any questions or concerns with regard to procedures:
*ZEO – Filling out or filing Zoning Permits, Zoning Regulations, appointments for Zoning Permit approval, Variance & Special Use Procedures.
*Building Inspector – Construction, Plan review, Code requirements and inspections
*Town Clerk – Forms, Fees (payable to Town Clerk), Building Permit, General Information & who to contact.

ATTACHMENTS:
The following attachments are mandated for all projects or uses in question.
*Layout sketch (Plot Diagram) shall consist of an accurate map (survey or plot diagram on graph paper) showing all structures and/or buildings on the parcel. All dimensions of project, property lines and right-of-ways shall also be indicated. Identify adjoining parcels and indicate the owners of such.

Please contact the ZEO regarding which of the following attachments will be required for the project or use in question:

1. Graphic material showing traffic circulation, parking spaces, pedestrian walks, topography and landscape plans, open space & buffer zone.
2. Preliminary engineering plans showing street improvements, storm drainage, water supply and sanitary sewer facilities.
3. Copy of current Genesee County Health Department approval for an individual sewer disposal system and plans for such.
4. A drawing of any signs which the applicant wishes to post. This drawing shall include dimensions, characters, shape, and illumination (if any, show source of power & location of illumination).
5. Elevation drawings with applicable height dimensions.
6. Description of the nature of existing use.
7. Freshwater wetland determination and/or permit, from NYS Dept of Environmental Conservation.
8. Certification indicating specific elevations in relation to the Federal Flood Hazard Area.
9. Letter of review from the Department of Soil and Water Conservation when applying for a pond.

Other:

TOWN OF DARIEN
Agricultural Data Statement

Application # PB-10-17

Date 4/28/2017

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 than Applicant
Name Charles Miller	Name Palitha Athoudage
Address 11331 Shadigee Lane	Address 1632, Broadway, Darien,
Lyndonville N.Y. 14098	NY, 14040

1. Type of application: Special use permit [ ]; Site plan approval [X]; Use variance [ ]; Subdivision approval [ ]
2. Description of proposed project: Mobile sheds, out buildings, Frontier Cabins, Gazebos, 10-20 Items
3. Location of project: Address 1632, Broadway, Darien, NY, 14040
   Tax Map Number (TMP) 11.-2-52.2
4. Is this property within an Agricultural District ? NO [X] YES [ ]
5. If yes, Agricultural District Number _____
6. Is this property actively farmed ? NO [X] YES [ ]
7. List all farm operations within 500 feet of your property, (Attach additional sheets if necessary).

Check with your local Assessor if you do not know

1.	2.
Name April Gow	Name Ste-Don
Address v/l Tinkham	Address v/l Broadway
Is this property actively farmed ? NO [ ] YES [X]	Is this property actively farmed ? NO [ ] YES [X]

3.	4.
Name Klossner & Teachen	Name Keith Foss
Address v/l Broadway	Address v/l Broadway
Is this property actively farmed ? NO [ ] YES [X]	Is this property actively farmed ? NO [ ] YES [X]

Signature of Applicant [signature] Signature of Owner (if other than Applicant) [signature]

REVIEWED BY [signature] Signature of Municipal Official 4/28/2017 Date

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

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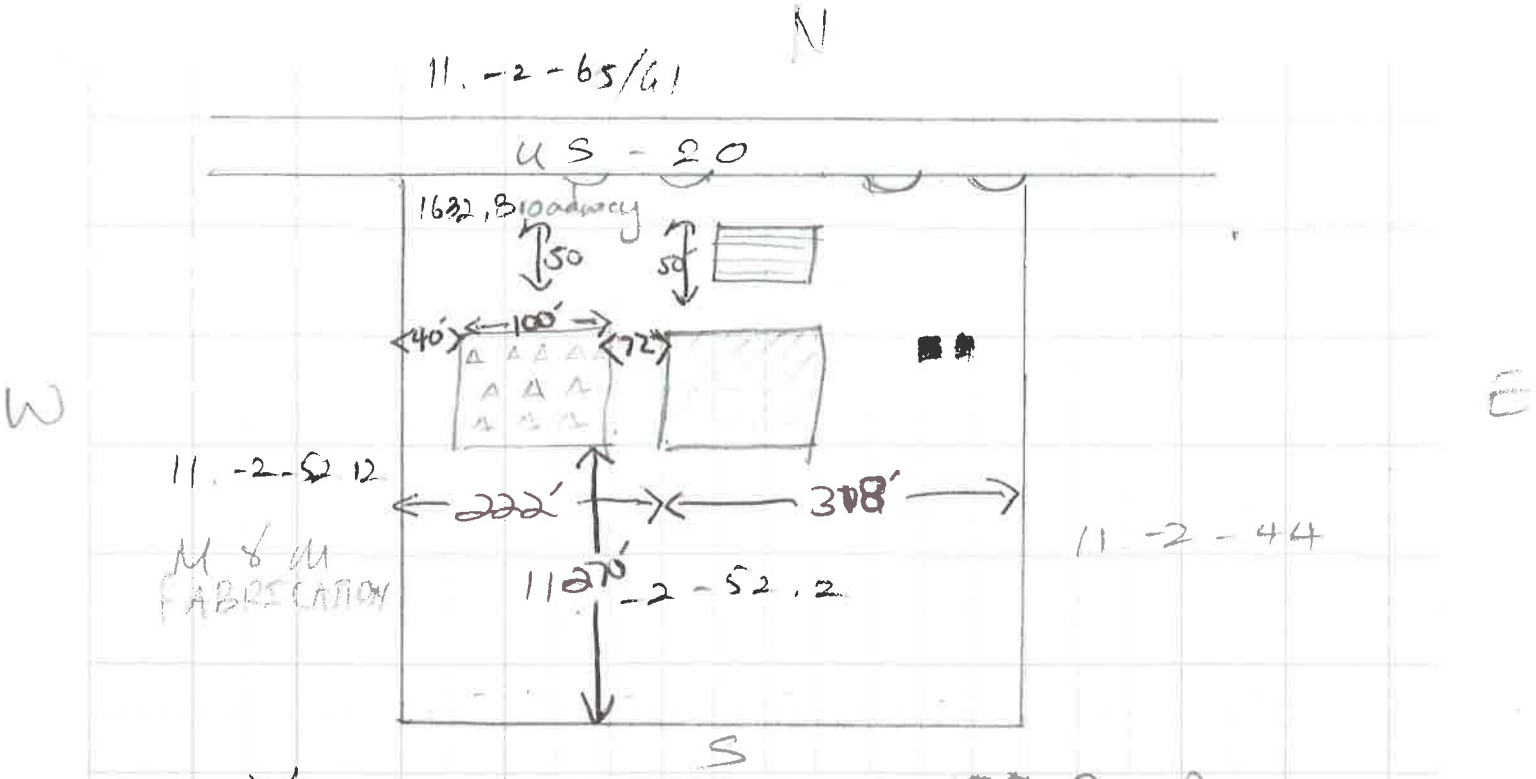


ENTRANCE

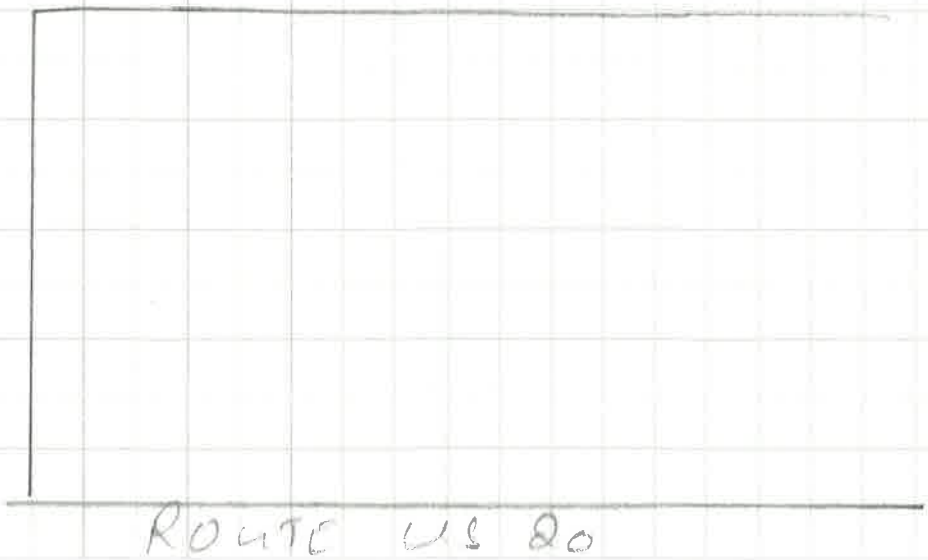
GAS PUMP & CANOPY

PUMPS

BUILDING

PROPOSED PROJECT AREA
100 X 70

FRONT DIMENTION



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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:
Lake Ontario Shed Sales

Project Location (describe, and attach a location map):
1632, Broadway, Darien, Ny, 14040

Brief Description of Proposed Action:
Selling mobile sheds, outbuildings, Frontier Cabins in a area 100 x 70

Name of Applicant or Sponsor:	Telephone:
Charles Miller	E-Mail:

Address:
11331 Shadigee Lane,

City/PO:	State:	Zip Code:
Lyndonville, Ny, 14098		

	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 governmental Agency? If Yes, list agency(s) name and permit or approval:	☒	☐

3.a. Total acreage of the site of the proposed action? 100 x 70 ~~acres~~ sft
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

4. Check all land uses that occur on, adjoining and near the proposed action.
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☒ Commercial ☐ Residential (suburban)
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other (specify): _____
☐ Parkland

PB-10-17

	NO	YES	N/A
5. Is the proposed action,			
a. A permitted use under the zoning regulations?	☐	☒	☐
b. Consistent with the adopted comprehensive plan?	☐	☒	☐

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☒	☐
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	✓	☐
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	☒	☐
b. Are public transportation service(s) available at or near the site of the proposed action?	☒	☐
c. Are any pedestrian accommodations or bicycle routes available on or near 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: _____	☒	☐
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	☒	☐
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	☒	☐
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	✓	☐
b. Is the proposed action located in an archeological sensitive area?	✓	☐
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: _____	☒	☐

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

	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 plain?	☒	☐
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? ☒ NO ☐ YES	☒	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☒ NO ☐ YES		

(22) B

	NO	YES
18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size:	☒	☐
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 AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: Lake Ontario Shed Sales (Charlie Miller) Date: 4/28/17

Signature: Charles Miller

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04/27/2016

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04/27/2016