

outral)

Town of Aurora Zoning Board of Appeals 300 Gleed Avenue, East Aurora, New York 14052

Zoning Board of Appeals Application Form

| I. TYPE OF REQUEST | | | | |
|--|---|--|--|--|
| AREA VARIANCE SPECIAL USE PERMIT | USE VARIANCEINTERPRETATION | | | |
| II. APPLICANT/PETITIONER | | | | |
| Applicant's Name MICHAEL TRONG Address 1907 CENTER ST | | | | |
| City <u>EAST AURORA</u> | State <u>N. Y.</u> ZIP <u>Email</u> 14052 | | | |
| Interest in the property of th | per) OWNER | | | |
| III. PROPERTY OWNER INFORMATION (If diffe | rent from applicant information.) | | | |
| Property Owner(s) Name(s)Address | | | | |
| City | State ZIP Email | | | |
| Phone Fax | _ Email | | | |
| III. PROPERTY INFORMATION | | | | |
| Property Address 1907 Center | | | | |
| SBL# 200,00-1-45.2 Property size in acres 3,3 | Property Frontage in feet 215 | | | |
| | Surrounding Zoning RR/M | | | |
| Current Use of Property Residential | Carrounding Zoning | | | |
| | | | | |
| IV. REQUEST DETAIL | | | | |
| (check all that apply) | CED | | | |
| × Variance from Ordinance Section(s) # 116 - 8.5 F (≥) Special Use Permit for: | | | | |
| Use Variance for: | | | | |
| Interpretation of | | | | |

| the owner of the property, a separate owner authorization form must be submitted – see pg. 5) | | | | | | |
|--|--|--|--|--|--|--|
| Male Signature of Applicant/Petitioner | | | | | | |
| MICHAEL TRONOLONE | | | | | | |
| Print name of Applicant/Petitioner | | | | | | |
| State of New York; County of Erie | | | | | | |
| On the 8 day of May in the year John before me, the above individual appeared, personally known to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same for the purposes therein stated. Notary Public | | | | | | |
| TERRI L CZOSNYKA (Notary stamp) Notary Public, State of New York 01CZ6200287 Qualified in Erie County My commission expires Feb. 02, 20 | | | | | | |
| | | | | | | |
| Office Use Only: Date received: 4/13/303-0 | Receipt #: 122088 | | | | | |
| Application reviewed by: | | | | | | |
| ECDP ZR-1 form sent to EC: | Hearing publication date: | | | | | |
| PREVIOUS APPEAL(S): | | | | | | |
| A previous appeal to the Zoning Board of Appeals () ha | s () has not been made with respect to this property. | | | | | |
| Previous appeals: | | | | | | |
| Date: Type of Appeal: | Granted Denied | | | | | |
| Date: Type of Appeal: | Granted Denied | | | | | |

V. SIGNATURES (This application must be signed by the applicant/petitioner. If the applicant is not

PETITIONER'S LETTER OF INTENT

| | e describe in detail the proposed project, reason the variance and/or special use permit is being |
|---------|--|
| • | sted and any additional information that may be helpful to the Zoning Board of Appeals in deciding this |
| appea | al: (attach additional pages if needed) |
| | O BUILD A 40'W × 30'DEEL POLE BARN ON SOUTH SIDE OF PROPERTY 'IN FRONT OF HOUSE GARAGE SINGLE CAR GARAGE. TO BE 16' OFF SIDE LOTLINE. |
| 40 | "IN FRONT OF HOUSE GALAGE SINGLE CAR GARAGE. TO BE 10" OFF SIDE LOTUNE. |
| | CARAGE DOORS, MAN DOOR, ROOF PINCH _16 - 45PT. FROM CORNER OF HOUSE |
| 10 | GARAGE DOORS, MAN DOOR, ROOF PITCH _16 - 45FT. FROM CORNER OF HOUSE |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| TO B | E COMPLETED ONLY WHEN A USE VARIANCE IS BEING REQUESTED: |
| A Use | Variance is requested because the applicable regulations and restrictions in the Zoning Code of the |
| | of Aurora have caused unnecessary hardship as demonstrated by the following: |
| | |
| 1) | I cannot realize a reasonable return on my property for each and every permitted use allowed in the |
| | current zoning classification as demonstrated by the accompanying financial evidence (provide financial |
| | evidence to support your argument). |
| | Financial Evidence Provided Yes No (financial evidence is required per NYS Town Law) |
| 2) | Describe why your alleged hardship relating to the subject property is unique and does not apply |
| 2) | to other properties in the zoning district or neighborhood: |
| | to other properties in the zoning district of heighborhood. |
| | |
| | |
| | |
| | |
| 2) | |
| 3) | Describe why you believe that the essential character of the neighborhood/community will not |
| | change if the Zoning Board of Appeals grants you a use variance: |
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | , |
| | |
| | |
| 4) | Is your need for a use variance a result of you own actions (is your difficulty self-created)? Please |
| explai | n: |
| | |
| | |
| (Attach | n additional pages if needed) |

SUPERVISOR James J. Bach (716) 652-7590 ibach@townofaurora.com



TOWN CLERK Martha L. Librock (716) 652-3280 townclerk@townofaurora.com

TOWN OF AURORA

Southside Municipal Center 300 Gleed Avenue, East Aurora, NY 14052 www.townofaurora.com

TOWN COUNCIL MEMBERS

Susan A. Friess sfriess@townofaurora.com

June, 09 2020

Jolene M. Jeffe jjeffe@townofaurora.com

> Michael Tronolone 1907 Center St. East Aurora NY 14052

Charles D. Snyder csnyder@townofaurora.com

Luke Wochensky lwochensky@townofaurora.com

Michael,

SUPT. OF HIGHWAYS

David M. Gunner (716) 652-4050 highway@townofaurora.com

CODE ENFORCEMENT **OFFICER** William Kramer (716) 652-7591 building@townofaurora.com

ASSESSOR Roger P. Pigeon assessor@townofaurora.com (716) 652-0011

> DIR, OF RECREATION Christopher Musshafen (716) 652-8866 chris@townofaurora.com

> > Ronald P. Bennett TOWN JUSTICE

Anthony DiFilippo IV

Jeffrey P. Markello

TOWN ATTORNEY

HISTORIAN Robert L. Goller (716) 652-7944 historian@townofaurora.com

> FAX: (716) 652-3507 NYS Relay Number: 1(800) 662-1220

This institution is an equal opportunity provider and amn lover

The Building Department has reviewed your application for an accessory structure at 1907 Center St. We have denied your application because you fail to meet the zoning requirements for accessory structures in an A zoning district. We therefore request that you apply to the town Zoning Board of Appeals for an area variance if you wish to continue with this project.

116-8.5F(2)

Required: No accessory building shall be erected in the front yard.

Requested: An accessory building in the front yard. Variance: An accessory building in the front yard.

If you wish to pursue this matter further you must apply to the Town of Aurora Zoning Board of Appeals for an Area Variance. You must include your application, application fee, and any information needed to support your request for a variance from the Town Code. If you have any questions contact the Building Department at 652-7591.

William R Kramer willia L. Kra

Code Enforcement Officer

SITE PLAN OR ZONING REFERRAL TO COUNTY OF ERIE, NY AND REPLY TO MUNICIPALITY

Note: Please complete in triplicate. Send original and one copy (with attachments) to Erie County Division of Planning, Room 1053, 95 Franklin Street, Buffalo, N.Y. 14202.

Retain last copy for your files.

| DO NO | OT WRITE IN THIS SPACE |
|-----------|------------------------|
| Case No.: | |
| Received: | |

The proposed action described herein is referred in accordance with the provisions of the General Municipal Law, which provides that if no reply is received in 30 days after receipt of full information including a SEQR EAF if applicable, the municipal agency may take final action without considering such reply. If, however, reply is received at any time prior to municipal Action, such reply must be considered.

Description of Proposed Action

| 1. Name of Municipality: | Tow | n of Aurora | | | | | |
|---|-------------|--|-------------|-----------------|---------------|-------|--|
| 2. Hearing Schedule: | Date | 7/16/2020 | Time | e 7pm | Location | 300 | Gleed Ave., E. Aurora |
| 3. Action is before: | | Legislative Body | \boxtimes | Board of Ap | peals | | Planning Board |
| 4. Action consists of: | | New Ordinance | | Rezone/Map | p Change | | Ordinance Amendment |
| ☐ Site Plan | \boxtimes | Variance | | Special Use | Permit | | Other |
| 5. Location of Property: | | Entire Municipality | \boxtimes | Specific as f | follows 19 | 07 Ce | enter Street, E. Aurora |
| 6. Referral required as Site is within 500'of: | | State or County Property/Institution County Road | | Municipal Bo | · | | Farm Operation located in an Agricultural District Proposed State or County Road, Property, Building/ Institution, Drainageway |
| 7. Proposed change or use | e: (be | specific) Accessory bu | uilding | g in front yard | d of residenc | e not | allowed by Town code |
| 8. Other remarks: (ID#, SB | L#, et | SBL#200.00-1-45.2 | 2 | | | | |
| 9. Submitted by: Martha | L. Lik | prock | | | Jui | ne 12 | , 2020 |
| 300 Gleed Ave., East Aurora | a, NY | 14052 | | | | | |
| Reply to Municipality by Erie County Division of Planning | | | | | | | |
| Receipt of the above-described proposed action is acknowledged on The Division herewith submits its review and reply under the provisions of applicable state and local law, based on the information submitted with this referral. | | | | | | | |
| 1. The proposed action is not subject to review under the law. | | | | | | | |
| 2. | | | | | | | |
| 3. The proposed action is subject to review; the Division makes the recommendation shown on Form ZR-4, Recommendation on Proposed Action, which is attached hereto. | | | | | | | |
| 4. No recommendation; proposed action has been reviewed and determined to be of local concern | | | | | | | |
| By the Division of Planning | g: _ | | | | Date: | | |

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.

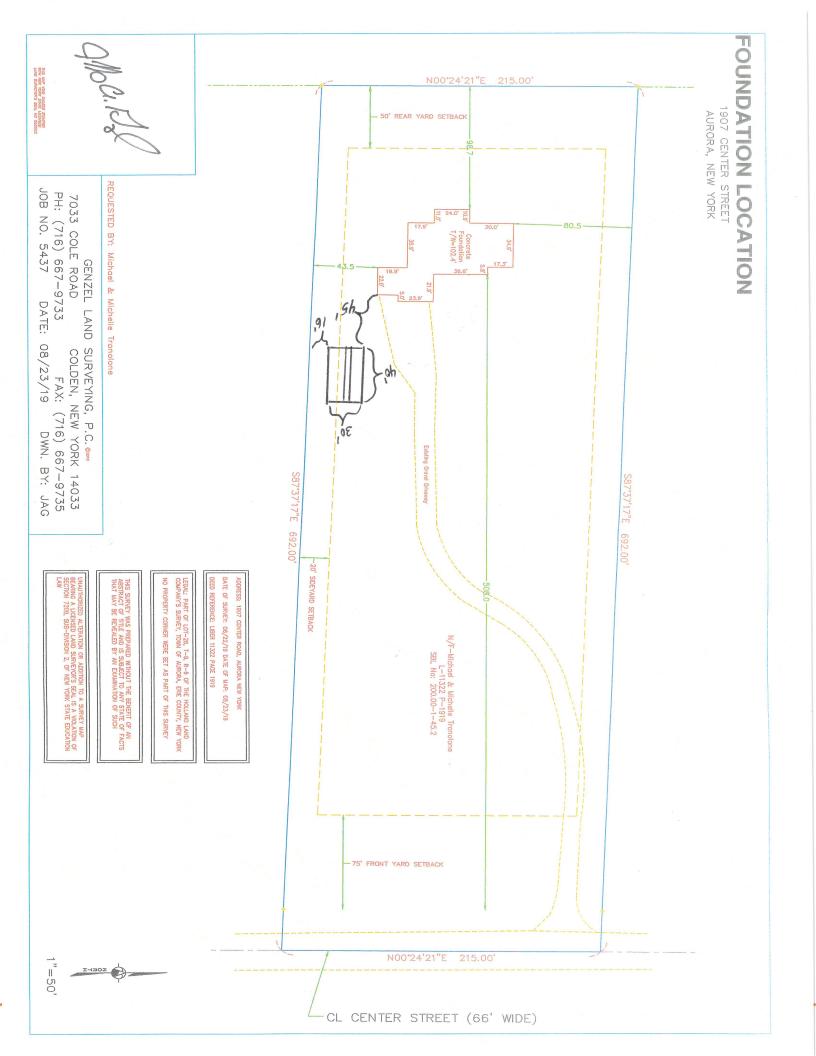
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

| Part 1 – Project and Sponsor Information | | | |
|--|---------------------------|--------------|-----|
| Michael Tronolone | | | |
| Name of Action or Project: | | | |
| New 30x40 Pole Barn | | | |
| Project Location (describe, and attach a location map): | | | |
| 1907 Center St. East Aurora, NY 14052 SBL# 200.00-1-45.2 | | | |
| Brief Description of Proposed Action: | | | - |
| 30 x40 Accessory building in the front yard of the residence at 1907 Center St. East Aurora N | NY | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Name of Applicant or Sponsor: | Telephor | 21700000 | |
| Michael Tronolone | E-Mail: | | |
| Address: | ON BURE STORE OF | | |
| 70 Fairway Dr. | | | |
| City/PO: | State: | Zip Code: | |
| Orchard Park | NY 14127 | | |
| 1. Does the proposed action only involve the legislative adoption of a plan, loca administrative rule, or regulation? | l law, ordinance, | NO | YES |
| If Yes, attach a narrative description of the intent of the proposed action and the e | nvironmental resources th | at 🗸 | |
| may be affected in the municipality and proceed to Part 2. If no, continue to ques | | V | |
| 2. Does the proposed action require a permit, approval or funding from any other If Yes, list agency(s) name and permit or approval: | er government Agency? | NO | YES |
| | | \checkmark | |
| 3. a. Total acreage of the site of the proposed action? | 3.3 acres | | |
| b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned | <u>.2</u> acres | | |
| or controlled by the applicant or project sponsor? | 3.3 acres | | |
| 4 Cl-1 III 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | | | |
| 4. Check all land uses that occur on, are adjoining or near the proposed action: | | | |
| ☐ Urban ☑ Rural (non-agriculture) ☐ Industrial ☐ Commercia | al 🔽 Residential (subur | ban) | |
| ☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Spec | eify): | | |
| Parkland | | | |
| | | | |

Page 1 of 3

| 5. Is the proposed action, | NO | YES | N/A |
|---|-----|---|-----|
| a. A permitted use under the zoning regulations? | | | |
| b. Consistent with the adopted comprehensive plan? | 븕 | | |
| | V | | |
| 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? | | NO | YES |
| If Yes, identify: | | V | |
| | | | |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? | | NO | YES |
| b. Are public transportation services available at or near the site of the proposed action? | | \checkmark | |
| | | \checkmark | |
| c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? | | \checkmark | |
| 9. Does the proposed action meet or exceed the state energy code requirements? | | NO | YES |
| If the proposed action will exceed requirements, describe design features and technologies: | | | |
| | | √ | |
| | | ليا | |
| 10. Will the proposed action connect to an existing public/private water supply? | | NO | YES |
| If No, describe method for providing potable water: | | 110 | ILS |
| 11 1 to, describe method for providing potable water. | | \checkmark | П |
| | | نا | |
| 11. Will the proposed action connect to existing wastewater utilities? | | NO | YES |
| If No, describe method for providing wastewater treatment: | | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | *** |
| No water planned for the accessory structure | | \checkmark | |
| | | | |
| 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 | | NO | YES |
| Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the | | \checkmark | |
| 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? | | | |
| 13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain | | NO | YES |
| 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 | | | | | |
| 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 | YES | | | |
| | \checkmark | | | | |
| 16. Is the project site located in the 100-year flood plan? | NO | YES | | | |
| | \checkmark | | | | |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? | NO | YES | | | |
| If Yes, | \checkmark | | | | |
| 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: | NO | YES | | | |
| | ✓ | | | | |
| 19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? | NO | YES | | | |
| If Yes, describe: | ✓ | | | | |
| 20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or | NO | YES | | | |
| 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: Michael Tronolone Date: 6/11/2020 | | | | | |
| Signature:Title: owner | | | | | |
| | | | | | |



Warranty Deed with Lien Covenant Form PRE1

S&S Forms(1994)

Made the 28 day of November , 2017

Between

Michael J. Montileone and Laurel A. Montileone, residing at V/L Center Street, Aurora, NY 14052

Grantor(s), and

Michael Tronolone and Michelle M. Tronolone, husband and wife, residing at 70 Fairway Drive, Orchard Park, NY 14127

Grantee(s)

Witnesseth, that the Grantor(s) in consideration of One and More Dollars (\$1.00 & More) lawful money of the United States, paid by the Grantee(s) do hereby grant and release unto the Grantee(s), their heirs and assigns forever,

ALL THAT TRACT OR PARCEL OF LAND, described on Schedule A attached hereto and made a part hereof.

Together with the appurtenances and the estate and rights of the Grantor(s) in and to the Premises: To have and to hold the above granted premises unto the Grantee(s) their heirs and assigns forever; and the Grantor(s) covenant(s) with the Grantee(s) that the Grantee(s) shall quietly enjoy the premises and that the Grantor(s) will forever warrant the title to the premises.

This grant is made subject to the trust fund provisions of Section 13 of the Lien Law.

In Witness Whereof the hand(s) and seal(s) of the undersigned are affixed as of the day and year first above

Michael J. Montileone

Laurel A. Montileone

STATE OF NEW YORK

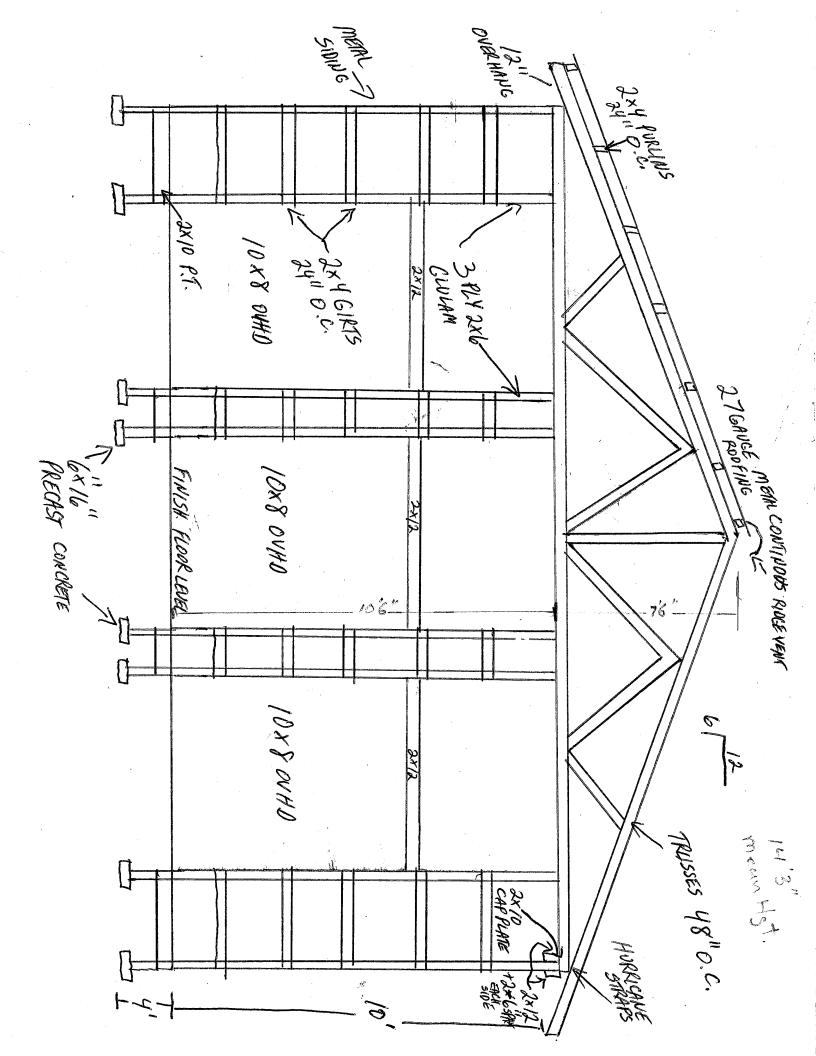
COUNTY OF ERIE

On the 28th day of November

in the year 2017, before me, the undersigned, a notary public in and for said state, personally appeared Michael J. Montileone and Laurel A. Montileone, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s).

or the person upon behalf of which the individual(s) acted, executed the instrument.

Laura A. Cye Notary Public, State of New York Qualified in Eric County No. 01CY5079989 My commission expires: 6/16/2019



Fw: garage

From: michelle Tronolone (mtronolone1@yahoo.com)

To: miketronolone@yahoo.com

Date: Monday, May 11, 2020, 10:18 AM EDT

---- Forwarded Message -----

From: michelle Tronolone <mtronolone1@yahoo.com>

To: mt <mtronolone1@yahoo.com>

Sent: Monday, May 11, 2020, 10:17:58 AM EDT

Subject: garage

