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Town of Aurora Zoning Board of Appeals 575 Oakwood Avenue, East Aurora, New York 14052

Zoning Board of Appeals Application Form

• -
I. TYPE OF REQUEST
AREA VARIANCE SPECIAL USE PERMIT USE VARIANCE INTERPRETATION
II. APPLICANT/PETITIONER
Applicant's Name Kelly O'Connor Address 12 W. Fall'S Rd
City (N - Pall) State N 1 ZIP 1917
Phone TV x Email Kelly Trom
Interest in t
III. PROPERTY OVVINER IN CRMATION (If different from applicant information.) Property Owner(s) Name(s) SAME
Address
City State ZIP Phone Fax Email
THORE TAX Email
III. PROPERTY INFORMATION
Property Address 12 W. Falls Rd SBL# 186 = 04 1-7. 2 Property size in acros 10. 902 Property Frontage in feet 1144 x 19 b
Zoning District
Current Use of Property Residential
IV. REQUEST DETAIL (check all that apply) X Variance from Ordinance Section(s) # 116 -8 1 E Special Use Permit for:
Use Variance for:
Interpretation of

the owner of the property, a separate owner authori	• • • • • • • • • • • • • • • • • • • •
Buban Bullion	Du (Koc)
Signature of Applicant/Petitioner	
Print name of Applicant/Petitioner	
State of New York; County of Erie	· · · · · · · · · · · · · · · · · · ·
On the 12 day of Februarin the year 2021 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	
(Notary stamp) KARIN L. DOJNIK Notary Public, State of New York Reg. # 01D06445148 Qualified in Erie County Commission Expires December 12, 20	
Office Use Only: Date received: 2/12/24	\$ 100 Clock Receipt #: 891110 (KM)
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 () has () has not been made with respect to this property.

Date: Type of Appeal:

Date: ____ Type of Appeal:____

Previous appeals:

Granted _____ Denied ____

Granted ____ Denied ____

PETITIONER'S LETTER OF INTENT

Please describe in detail the proposed project, reason the variance and/or special use permit is being requested and any additional information that may be helpful to the Zoning Board of Appeals in deciding this appeal: (attach additional pages if needed)

10	would like to improve the curb appeal of my home on
···	vest falls and Mill Roads and be able to use my front
ΛC	por. As it stands my tront dow is inaccessible as it
	as a small stone path to the culvert (dirch) along
	lest Falls Road. Building a Small porch on the
	yes Fals and would allow us to entire the house through
	VI J. VALLE CO. C.
`U	ne main entrance door.
<u>то в</u>	E COMPLETED ONLY WHEN A USE VARIANCE IS BEING REQUESTED:
A Use	e 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). Short work of the
	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
-)	to other properties in the zoning district or neighborhood:
	to other proportion in the zerining district or meighborhood.
3)	Describe why you believe that the essential character of the neighborhood/community will not
٠,	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
,	ain:
onpid	
	·
/ Attoo	ch additional pages if needed)
TAILGO	ar additional pages it needed)

SITE PLAN OR ZONING REFERRAL TO COUNTY OF ERIE, N.Y. AND REPLY TO MUNICIPALITY

Submit this form with <u>full statement of proposed action</u> (as described in GML 239-m(c)) at <u>www.Erie.gov/IRonline</u>, OR mail a hard copy (retain a copy for your files) to: Erie County Division of Planning, 95 Franklin Street, Room 1053, Buffalo, N.Y., 14202

DO NOT WRITE IN	THIS SPACE
Case No.:	
k/Delivery Date:_	

14202		8,		z, <u>z 4114</u> 10, <u>1</u> 1,	Postmar	rk/Deli	very Date:
				-			al Municipal Law §2391 - nn
A Municipal Re	ferral	Map is available to help d			licable a	ction is	s subject to referral.
	_	-	1 01 1	roposed Action			
I. Name of Municipality:	10	wn of Aurora					
However, any county	If t reply re	les that the county shall have 30 one county fails to reply within succeived after 30 days but 2 or moring body shall file a report of its it	ch perio e days i	od, the referring body ma orior to final action by th	ay take fina ne referring	al action. g body st	nall be subject to §239-m(5)
2. Hearing Schedule:	D	ate 3/21/2024	Т	ime <u>7:00pm</u>	Locatio	on <u>5</u> 7	5 Oakwood Ave., EA
3. Action is before:		Legislative Body	~	Board of Appeal	ls		Planning Board
4. Action consists of:		New Ordinance		Rezone/Map Ch	nange		Ordinance Amendment
☐ Site Plan	~	Variance		Special Use Per	rmit		Other:
5. Location of Property:		Entire Municipality	V	Address: 12 W	est Fa	lls Ro	d, PO W. Falls
5a. S.B.L. of Property:	186	6.04-1-7.2	_			•	
6. Referral required as site is within 500' of:		State or County Property/Institution		Municipal Bound	lary ⊏		Operation located in an cultural District
□ Expressway	V	County Road		State Highway		Prop	osed State or County Road, perty, Building/Institution, nageway
7. Proposed change or us (specify the action, such as scope of variances or site p	the	Pro posed porch ad allowed by Town C			ouse c	loser	to right of way than
8. Other remarks: Prop	ose	d porch would be	abo	out 1/2 foot fr	om R	.O.V	V line
9. Submitted by: Martha	a L.	Librock, Town Cle	erk	Email: towncle	erk@t	own	ofaurora.com
10. Return Address: 575	Oa	kwood Ave., E. A	uro	ra, NY 14052	2		
	Re	ply to Municipality by	/ Erie	County Division	on of Pl	annin	g
Receipt of the above-deso submits its review and re submitted with this referr	ply u	d proposed action is ac nder the provisions of	cknov appli	wledged on cable state and l	local la	T w, bas	The Division herewith sed on the information
1. The proposed a	ction	is not subject to revie	w un	der the law.			
2. Comment on pro	opos	ed action is attached h	ereto).			
3.	ction	is subject to review; R	lecor	nmendation on F	Propose	ed Act	tion is attached hereto.
4.	ation	; proposed action has	beer	reviewed and d	letermir	ned to	be of local concern.
By the Division of Plannir	ng: _						Date:

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



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

TOWN OF AURORA

Aurora Municipal Center

575 Oakwood Avenue, East Aurora, NY 14052 www.townofaurora.com

TOWN COUNCIL MEMBERS

Charles D. Snyder csnyder@townofaurora.com Kelly O'Connor 12 West Falls Rd West Falls, NY 14170

Luke Wochensky lwochensky@townofaurora.com

January 12, 2024

James F. Granville jgranville@townofaurora.com

Kelly:

Joseph M. McCann jmccann@townofaurora.com

The Building Department has reviewed your request to construct a front porch at your property at 12 West Falls Rd. The request has been denied because it fails to meet the code requirements for the front yard setback in the Residence 1 (R1) District in which it is located.

SUPT, OF HIGHWAYS David M. Gunner (716) 652-4050

highway@townofaurora.com

Section 116-8.1E(1)

CODE ENFORCEMENT **OFFICER** Elizabeth Cassidy

Required: Front yard setback is a minimum of 75 feet from the street right-of-way

(716) 652-7591

Requested: Front porch with a front yard setback of .54'

building@townofaurora.com

Variance: 74.46'

ASSESSOR

Stephen R. Pigeon assessor@townofaurora.com

(716) 652-0011

This letter serves as notice that we have received the application and fee for the Zoning Board of Appeals. You will receive notification from the Town Clerk with the date and time of the next available hearing. If you have any questions, please contact our office at

652-7591.

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

Sincerely,

TOWN ATTORNEY Brigid M. Maloney

Elizabeth Cassidy

TOWN JUSTICE Jeffrey P. Markello Anthony DiFilippo IV

Code Enforcement Officer

HISTORIAN Robert L. Goller

(716) 652-7944 historian@townofaurora.com

FAX: (716) 652-3507

This institution is an equal

opportunity provider and employer.

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	A ALANA MAY TO THE					
Name of Action or Project:	· · ·					
_			i.			
Project Location (describe, and attach a location map):	- Marin					
Project Location (describe, and attach a location map):	•					
Property on 12 west Jalls Roo	4					
Brief Description of Proposed Action:						
Property on 12 west Falls Roo Brief Description of Proposed Action: To build a porch on the main side	of house, fa	cina				
(Nes) Falls Road.	,	J				
0.00, (2005)						
Name of Applicant or Sponsor:	Telephone:		,			
Wat Oliopoo	E-Mail: 1					
Address:	L-Wan. (C)		101)4			
Address: 12 west Falls Road City/PO: W. Falls						
City/PO:	State: Zip	Code:				
Witalls	1 12	1417	2			
1. Does the proposed action only involve the legislative adoption of a plan, local administrative rule, or regulation?	al law, ordinance,	МО	YES			
If Yes, attach a narrative description of the intent of the proposed action and the						
may be affected in the municipality and proceed to Part 2. If no, continue to que		1				
2. Does the proposed action require a permit, approval or funding from any other government Agency? NO YES						
If Yes, list agency(s) name and permit or approval: TOA Burldry permit						
3. a. Total acreage of the site of the proposed action? b. Total correspond to be physically dicturbed?	902 acres		1			
b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned						
or controlled by the applicant or project sponsor?	acres					
4. Check all land uses that occur on, are adjoining or near the proposed action:	,					
	ial X Residential (suburban)					
Forest Agriculture Aquatic Other(Spe	, ,					
Parkland	JOIL J.					
L_I r antique						

. Is the proposed action,	ИО	YES	N/A
a. A permitted use under the zoning regulations?		N	
b. Consistent with the adopted comprehensive plan?			$\overline{\boxtimes}$
. Is the proposed action consistent with the predominant character of the existing built or natural landsc	eape?	NO	YES
. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Arc	ea?	NO	YES
f Yes, identify:		K	
. 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?		X	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the propos action?	ed	\boxtimes	
. Does the proposed action meet or exceed the state energy code requirements?	,	NO	YES
f the proposed action will exceed requirements, describe design features and technologies:		\searrow	
0. Will the proposed action connect to an existing public/private water supply?		NO	YES
If No, describe method for providing potable water:			
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:			
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or	district	NO	YE
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 fo archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	r	×	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, con wetlands or other waterbodies regulated by a federal, state or local agency?	tain	NO	YE
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	. *	Ì		
☐ Wetland ☐ Urban ☒ Suburban				
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or	NO	YES		
Federal government as threatened or endangered?	区			
16. Is the project site located in the 100-year flood plan?	NO	YES		
	区			
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES		
If Yes,	1	×		
a. Will storm water discharges flow to adjacent properties?	X			
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?		×		
If Yes, briefly describe:	10 M 10 1 M	A 55.55		
18. Does the proposed action include construction or other activities that would result in the impoundment of water	NO	YES		
or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	l			
		ļ		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste	NO	YES		
management facility? If Yes, describe:				
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or	МО	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: But Date: 2/12	1/2	4_		
Signature: Title:				









