



## GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID **T-08-PEM-7-20**  
Review Date **7/9/2020**

Municipality  
Board Name  
Applicant's Name  
Referral Type  
Variance(s)  
Description:

<b>PEMBROKE, T.</b>
<b>ZONING BOARD OF APPEALS</b>
<b>Richard Kutter</b>
<b>Area Variance(s)</b>
<b>Area Variance to place a 300 sq. ft. (20 x 15 ft.) shed for a single-family home.</b>
<b>Side Yard Setback</b> <b>Minimum required: 25 ft.</b> <b>Proposed: 20 ft.</b>

Location  
Zoning District

<b>1338 Main Rd. (NYS Rt. 5), Pembroke</b>
<b>Agricultural-Residential (A-R) District</b>

### PLANNING BOARD DECISION

**APPROVAL**

### EXPLANATION:

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

Director

July 9, 2020

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 # T-08-PEM-7-20

**RECEIVED**  
Genesee County  
Dept. of Planning  
6/29/20



**\* 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) Town of Pembroke ZBA  
Address 1145 Main Rd  
City, State, Zip Corfu NY 14036  
Phone (585) 599-4892 Ext. \_\_\_\_\_

**2. APPLICANT INFORMATION**

Name Richard Kutter  
Address 1338 Main Rd  
City, State, Zip Corfu NY 14036  
Phone (716) 440-1602 Ext. \_\_\_\_\_ Email \_\_\_\_\_

MUNICIPALITY:  City  Town  Village of Pembroke

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

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Map Change         | <input type="checkbox"/> Subdivision Proposal |
| <input type="checkbox"/> Use Variance             | <input type="checkbox"/> Zoning Text Amendments    | <input type="checkbox"/> Preliminary          |
| <input type="checkbox"/> Special Use Permit       | <input type="checkbox"/> Comprehensive Plan/Update | <input type="checkbox"/> Final                |
| <input type="checkbox"/> Site Plan Review         | <input type="checkbox"/> Other: _____              |   |

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

A. Full Address 1338 Main Rd  
B. Nearest intersecting road 5&77  
C. Tax Map Parcel Number 19.-1-23.111  
D. Total area of the property 9.17 Area of property to be disturbed 300 sqft  
E. Present zoning district(s) ag res

**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  
section 303

C. Please describe the nature of this request owner is requestiog a 5 foot area variance. they want to place shed 20' off the side property line instead of 25' as listed in the zoning.

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

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Local application | <input type="checkbox"/> Zoning text/map amendments  | <input type="checkbox"/> New or updated comprehensive plan |
| <input checked="" type="checkbox"/> Site plan         | <input type="checkbox"/> Location map or tax maps    | <input type="checkbox"/> Photos                            |
| <input type="checkbox"/> Subdivision plot plans       | <input type="checkbox"/> Elevation drawings          | <input type="checkbox"/> Other: _____                      |
| <input type="checkbox"/> SEQR forms                   | <input type="checkbox"/> Agricultural data statement |  |

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

Name Jim Wolbert Title CEO Phone (585) 599-4892 Ext. 3  
Address, City, State, Zip 1145 Main Rd Corfu ny 14036 Email zoning-codes@townofpembroke.org

**TOWN OF PEMBROKE  
1145 MAIN ROAD  
CORFU, NEW YORK 14036  
585-599-4892**

APPLICATION FOR:	ZONING APPEAL	DATE APPLIED FOR	6-26-2020
<input type="checkbox"/> SPECIAL USE PERMIT	<input type="checkbox"/> LAND SEPARATION	APPLICATION NUMBER	20.06.09
<input type="checkbox"/> TEMP. SPECIAL USE PERMIT	<input type="checkbox"/> SUB DIVISION	REFERRED TO PLANNING	
<input type="checkbox"/> USE VARIANCE	<input type="checkbox"/> ZONE DISTRICT CHANGE	REFERRED TO ZBA	x 7-15-2020
<input checked="" type="checkbox"/> AREA VARIANCE	<input type="checkbox"/> SITE PLAN REVIEW	PUBLIC HEARING REQ.	x

APPLICANT	STREET LOCATION #
ADDRESS	TAX MAP PARCEL #
TELEPHONE #	ZONING DISTRICT
	SIZE OF PARCEL
	CORNER LOT
PROPERTY OWNER (IF OTHER THAN ABOVE)	
NAME	CURRENT SET BACK OF BUILDING
ADDRESS	FRONT
TELEPHONE #	REAR
	SIDE

*Handwritten entries:*  
 APPLICANT: RICHARD W. KUTTER  
 ADDRESS: 1338 MAIN ROAD, CORFU, NY 14036  
 TELEPHONE #: 716-440-1602  
 STREET LOCATION #: 1338  
 TAX MAP PARCEL #: 184289-019-000-0001-023-111  
 ZONING DISTRICT: 19.-1-23.111

PERMIT OR VARIANCE FOR:	IF THIS APPLICATION IS FOR A VARIANCE PLEASE STATE THE SECTION OF THE ORDINANCE UNDER WHICH THE VARIANCE REQUESTED
<input checked="" type="checkbox"/> NEW CONSTRUCTION	DESCRIBE REASON FOR VARIANCE
<input type="checkbox"/> ADDITION	
<input type="checkbox"/> SIGN	
<input type="checkbox"/> HOME OCCUPATION	
<input type="checkbox"/> OTHER	

*Handwritten entries:*  
 NEW CONSTRUCTION of SHED  
 20' x 15' SHED IS LOCATED 20' FROM NEIGHBORING CEMETERY PROPERTY

DOES THIS PROJECT REQUIRE APPROVAL FROM THE FOLLOWING? CHECK THOSE THAT APPLY:

<input type="checkbox"/> GENESEE CO. HEALTH DEPARTMENT	<input checked="" type="checkbox"/> TOWN BOARD
<input type="checkbox"/> GENESEE CO. SOIL & WATER	<input checked="" type="checkbox"/> Z.B.A.
<input type="checkbox"/> DEPARTMENT OF TRANSPORTATION	<input type="checkbox"/> PLANNING BOARD
<input type="checkbox"/> COUNTY PLANNING DEPARTMENT	<input type="checkbox"/> PUBLIC HEARING
<input type="checkbox"/> D.E.C.	

DESCRIPTION OF PROPOSED PROJECT OR REASON FOR PERMIT REQUEST

*Handwritten entry:* BUILDING ON SITE 20' x 15' STORAGE SHED

- INSTRUCTIONS FOR COMPLETING THIS APPLICATION:
1. INCLUDE SITE SKETCH PLAN, PREFERABLY A LAND SURVEY WITH CURRENT AND PROPOSED SET BACKS.
  2. IF APPLICANT IS NOT THE OWNER OF THE LAND ON WHICH THE PROPOSED PROJECT IS LOCATED, THEY ARE THEN REQUIRED TO OBTAIN WRITTEN PERMISSION FROM THE LAND OWNER FOR THE PROJECT.
  3. A SEQR FORM (EAF) MUST BE INCLUDED WITH THE APPLICATION.
  4. APPLICANT OR REPRESENTATIVE SHOULD ATTEND PLANNING BOARD AND/OR ZBA MEETING.

NOTE: IF THE REQUEST IS FOR A USE OR AREA VARIANCE, THE PLANNING BOARD'S ONLY ACTION WILL BE TO MAKE A RECOMMENDATION TO THE ZONING BOARD OF APPEALS FOR APPROVAL OR DISAPPROVAL.

APPLICANT SIGNATURE Richard W. Kutter DATE 6/23/2020

**SPECIAL USE PERMIT**

THE PEMBROKE PLANNING BOARD AT A MEETING HELD ON \_\_\_\_\_ HAS HEREBY  
(APPROVED) (DISAPPROVED) APPLICATION # \_\_\_\_\_ FOR A SPECIAL USE PERMIT TO  
CONDUCT A \_\_\_\_\_ ON PROPERTY IDENTIFIED AS  
TAX MAP # \_\_\_\_\_

THE FOLLOWING RESTRICTIONS HAVE BEEN IMPOSED AS A CONDITION OF APPROVAL

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATED \_\_\_\_\_ CHAIRMAN OF THE PLANNING BOARD \_\_\_\_\_  
ZONING OFFICER \_\_\_\_\_

The applicant agrees to the Special Conditions imposed with approval \_\_\_\_\_  
Signature

Dated \_\_\_\_\_

**LAND SEPARATION PERMIT**

THE PEMBROKE PLANNING BOARD AT A MEETING HELD ON \_\_\_\_\_ HAS HEREBY  
(APPROVED) (DISAPPROVED) APPLICATION # \_\_\_\_\_ FOR A LAND SEPARATION FROM  
PROPERTY IDENTIFIED AS TAX MAP # \_\_\_\_\_

PLEASE NOTE: THIS PERMIT WILL NOT BE ISSUED UNTIL A SURVEY FOR THE NEWLY CREATED PARCEL IS  
SUBMITTED TO THE TOWN CLERK.

DATED \_\_\_\_\_ CHAIRMAN OF THE PLANNING BOARD \_\_\_\_\_

MYLAR RECEIVED (Date) \_\_\_\_\_ LETTER SENT TO APPLICANT FOR FILING WITH COUNTY (Date) \_\_\_\_\_  
FILED WITH COUNTY (Date) \_\_\_\_\_

**VARIANCE**

**ZONING BOARD OF APPEALS ONLY**

THE PEMBROKE BOARD OF APPEALS AT A MEETING HELD ON \_\_\_\_\_ HAS HEREBY  
(APPROVED) (DISAPPROVED) APPLICATION # \_\_\_\_\_ FOR (AN AREA) OR (A USE)  
VARIANCE ON PROPERTY IDENTIFIED AS TAX MAP # \_\_\_\_\_

FOR THE FOLLOWING PURPOSE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE FOLLOWING RESTRICTIONS HAVE BEEN IMPOSED AS A CONDITION OF APPROVAL

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATED \_\_\_\_\_ CHAIRMAN ZONING BOARD OF APPEALS \_\_\_\_\_

The applicant agrees to the Special Conditions imposed with approval \_\_\_\_\_  
Signature

Dated \_\_\_\_\_

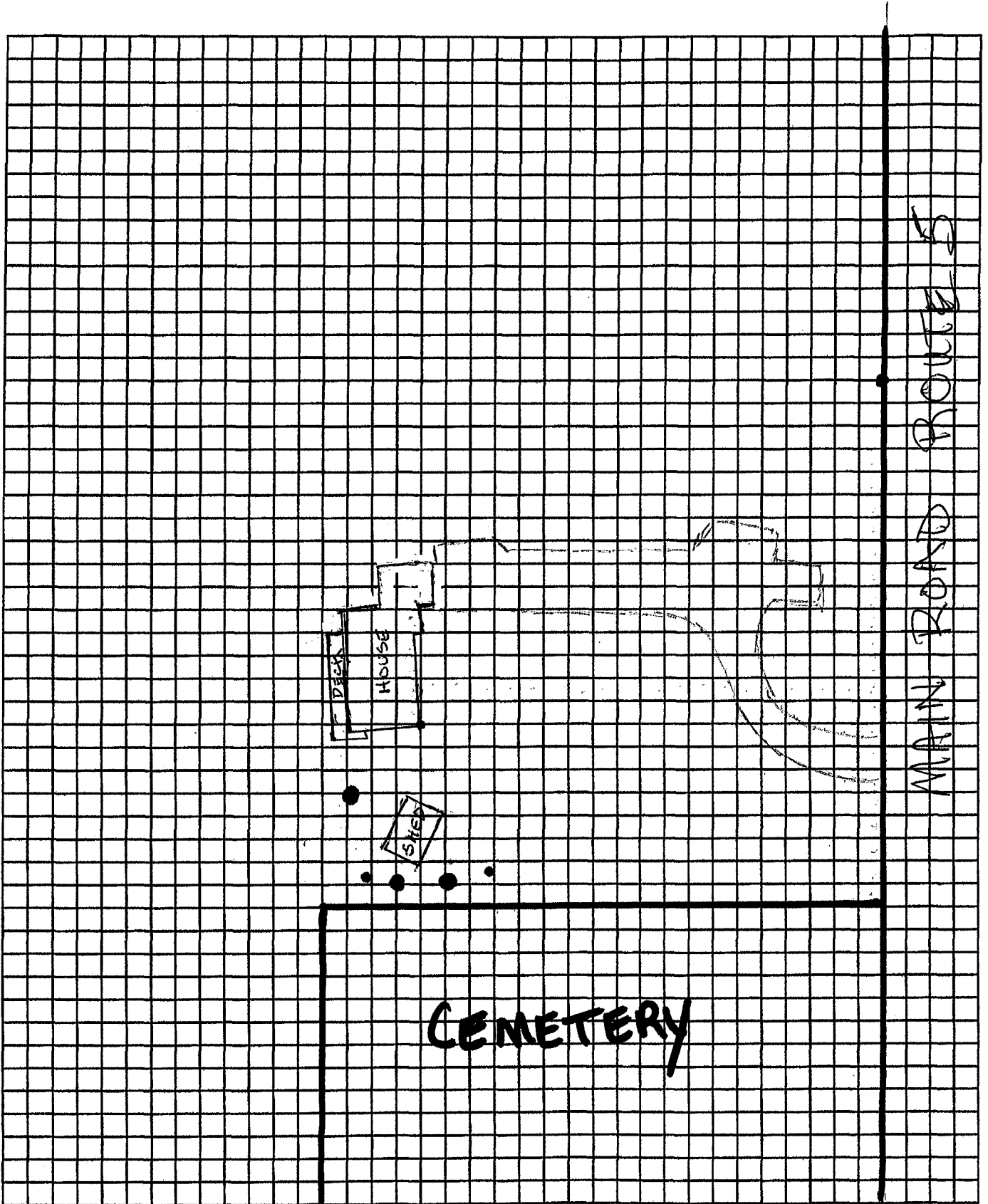
PLOT DIAGRAM

Locate clearly and distinctly all buildings, whether existing or proposed, and indicate all yard dimensions from property lines. Give identifying information or deed description, show street names and adjacent property owner names. Indicate whether an interior or a corner lot.

RICHARD W. KUTTER

EASTERN EDGE OF SHED 20' FROM CEMETERY LINE

BLACK DOTS ARE TREES



MAIN ROAD ROUTE 5

CEMETERY



# T-08-PEM-7-20



05/01/2018