



**GENESEE COUNTY PLANNING BOARD
ZONING REFERRALS NOTICE OF FINAL
ACTION**

GCDP Referral ID **T-01-LEROY-1-17**

Review Date **1/12/2017**

Municipality
Board Name
Applicant's Name

LEROY, T.
ZONING BOARD OF APPEALS
Dennis Bachulak

Referral Type
Variance(s)
Description:

Area Variance(s)
Area Variance to build an addition to an existing home.
Front Yard Setback
Minimum required: 75 ft.
Existing home: 24.5 ft.
Proposed addition: 38.5 ft.

Location
Zoning District

7924 E. Main Rd. (NYS Rt. 5), LeRoy
Commercial (C-2) District

PLANNING BOARD DECISION

APPROVAL

EXPLANATION:

Given that the existing home is closer to the road, the location of the proposed addition should pose no significant county-wide or inter-community impact.

Director

January 12, 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



DEPARTMENT USE ONLY:
GCDP Referral # T-01-LEROY-1-17

*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept. of Planning
1/4/2017

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) LeRoy Town Zoning Board of Appeals
Address 48 Main Street
City, State, Zip LeRoy, NY, 14482
Phone (585) 768-6910 Ext. 223

2. APPLICANT INFORMATION

Name Dennis Bachulak
Address 7924 East Main Rd
City, State, Zip LeRoy, NY, 14482
Phone (585) 356-4992 Ext. _____ Email _____

MUNICIPALITY: City Town Village of LeRoy

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 7924 East Main Rd. LeRoy, NY 14482
- B. Nearest intersecting road Circular Hill Rd
- C. Tax Map Parcel Number 28.-1-6.122
- D. Total area of the property .49 Acres Area of property to be disturbed 234 Sq. Ft.
- E. Present zoning district(s) C-2

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
165-19.D(3)(a)
- C. Please describe the nature of this request Would like to install a 13' x 18' addition on West side of house. The addition is 66 feet from edge of road. Town Zoning for C-2 Area is 75 feet. He is requesting a nine (9) foot front setback variance.

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 Jeff Steinbrenner Title CEO / ZEO Phone (585) 768-6910 Ext. 223
Address, City, State, Zip 48 Main Street, LeRoy, NY, 14482 Email code@leroyny.org

William Pop
for

APPLICATION
to the
LEROY ZONING BOARD OF APPEALS

PERMIT # 01-2017

Applicant: Dennis Brechuh

Location: 7924 E main Rd
Le Roy, NY 14482

Phone # 856-049920 (Bill Fox)

Tax Map # 28-1-6-122

Subject AREA USE VARIANCE

Fee: \$100.00

Date Received:	<u>1-4-17</u>
Date Advertised:	_____
Date of Hearing:	_____
Decision:	_____

Application for permission to use property located in a C2 District for use
as RESIDENTIAL property.

Reasons for proposed change of present status:

- 1] addition to existing house
66' front, where 100' is
required - see enclosed drawing
- 2] ~~addition~~ - only place to
put addition due to not being
able to place to back of house.
- 3] Cannot be located to the east

If additional information is necessary, use reverse side and so indicate.

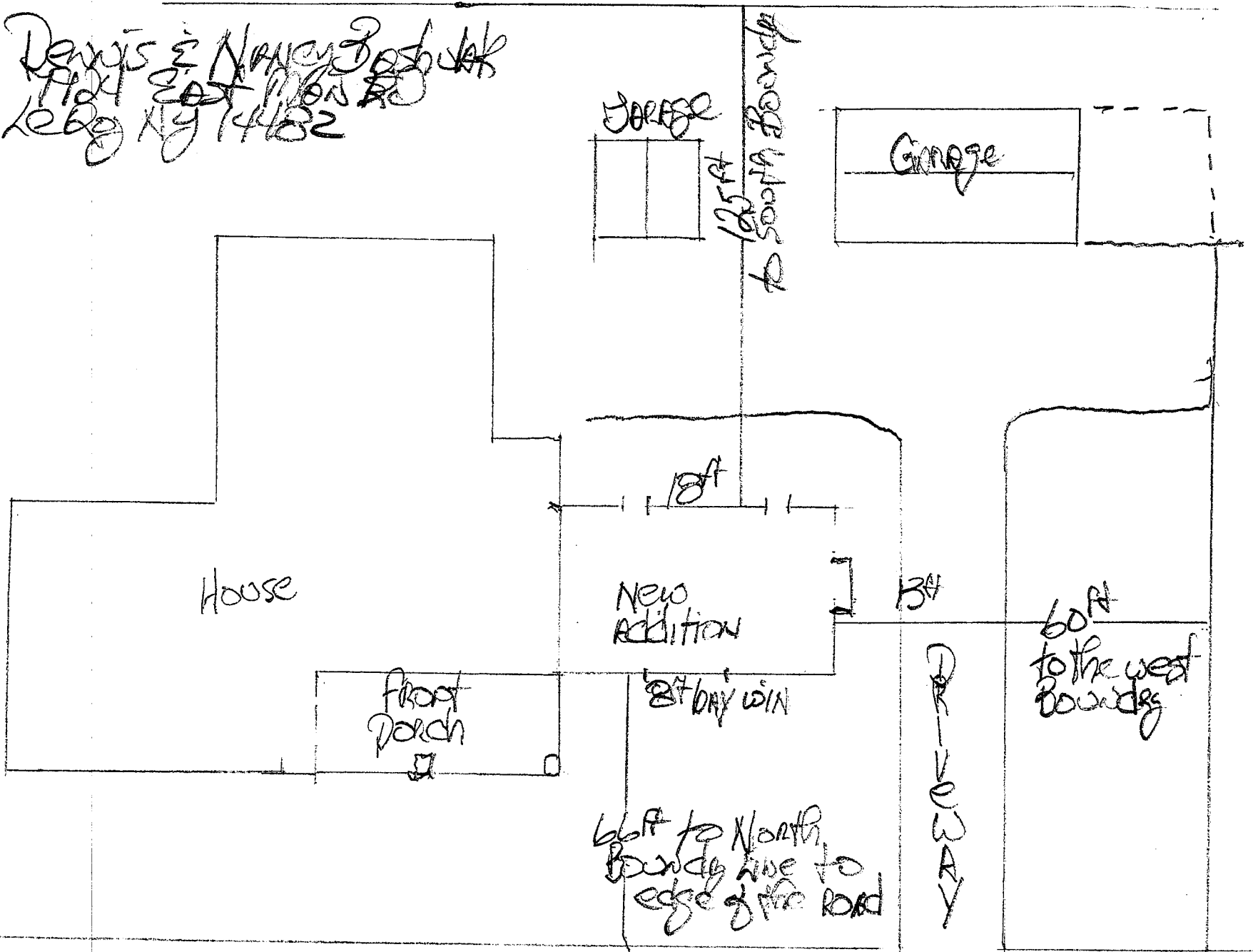
Applicant's Signature [Signature] Date: 1/4/17

Code Enforcement/Zoning Officer: [Signature]

Amount Received: \$100 Ck.# 4788 Date: 1-4-17

By: [Signature], Town Clerk

Dennis & Nancy Bushak
1704 East Main Rd
Lebanon NY 14452



Rt 5

T-01-LEROY-1-17



04/28/2016

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