

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-02-STAF-1-16

*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept of Planning
1/4/2015

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) Stafford Planning Board
Address 8903 Route 237
City, State, Zip Stafford, NY 14143
Phone (585) 344 - 1554 Ext. _____

2. APPLICANT INFORMATION

Name Carolina Eastern Crocker
Address 8610 Route 237
City, State, Zip Stafford, NY 14143
Phone (585) 345 - 4141 Ext. _____ Email dcarroll@cecrocker.com

MUNICIPALITY: City Town Village of Stafford

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

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Map Change | 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 checked="" type="checkbox"/> Site Plan Review | <input type="checkbox"/> Other: _____ | |

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

- A. Full Address 8610 Route 237, Stafford, NY 14143
- B. Nearest intersecting road Bartof Road
- C. Tax Map Parcel Number 6.-1-42.21
- D. Total area of the property 32.85 Acres Area of property to be disturbed approx. 1500 SF
- E. Present zoning district(s) Agricultural-Residential

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

- C. Please describe the nature of this request Site Plan Approval for construction of a 30'x50' storage/outload building.
The applicant indicates the building will be used to shelter vehicles while loading blended fertilizers to prevent the blowing of fertilizers onto adjacent properties.

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 checked="" type="checkbox"/> Other: <u>Project Description</u> |
| <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 William R. VanAlst Title Chairman, Planning Board Phone (585) 344 - 1830 Ext. _____
Address, City, State, Zip 9107 Roanoke Road, Stafford, NY 14143 Email wvanalst@rochester.rr.com

**APPLICATION FOR ZONING and/or BUILDING PERMIT
TOWN OF STAFFORD, N. Y. 14143**

APPLICATION NUMBER: 63-2015

APPLICATION DATE: 11-10-2015

OWNER	Name: _____	APPLICANT <small>(IF OTHER THAN OWNER)</small>	Name: <u>C.F.C.</u>
	Address: _____		Address: <u>8610 Rt 237</u> <u>Stafford, N.Y. 14143</u>
	Phone #: _____		Phone #: <u>585-345-4141</u>

PROJECT SITE LOCATION: 8610 Rt. 237 Tax Map # (TMP) 6-1-42-21
Check w/ local Assessor or Tax Bill

INSTRUCTIONS: Using a ball point pen please fill out this application as completely as possible. Submit additional Attachment(s) [listed on the back of the Gold sheet] and the completed application to the Z.E.O./C.E.O. This application is NON-TRANSFERABLE and is NOT a permit to commence work.

- 1 Application for Use: RESIDENTIAL ; COMMERCIAL ; INDUSTRIAL ; RECREATIONAL ; AGRICULTURAL ; SITE PLAN
- 2 Permit for: NEW CONSTRUCTION ; ADDITION ; ALTERATION ; REPAIR ; CHANGE IN USE
- 3 Is this parcel? ; A corner lot: YES NO ; Have a Driveway permit? YES NO . In a Water District? YES NO .
- 4 List the DIMENSIONS of the parcel: _____ x _____ and/or TOTAL PARCEL AREA (Acres) _____ .
- 5 What are the parcel setbacks [Ft.] from the project. FRONT _____ ; REAR _____ & SIDE yards (a) _____ (b) _____ . Attachment A
- 6 Total % of coverage of ALL buildings on the parcel (including the proposed project): _____ TOTAL %
- 7 Does this project require County Health Department approval? NO YES , If yes, submit Attachment F.
- 8 Is this parcel properly Land Separated/Subdivided? NO YES , If yes, provide documentation.
- 9 Do you give the Town VALID CONSENT to do the required inspections? YES NO , If no, what procedures?
- 10 Name of Architect/Engineer _____ Telephone # _____
Address _____
- 11 Name of Contractor(s) _____ Telephone # _____
Address _____

12 Estimated cost of the project? _____ [Substantiation may be required]

- 14 Total Dwelling units: _____
- 15 Will electric be installed? YES NO .
- 16 Describe the proposed project and use:
30' x 50' Storage Building on Existing Site

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQ. FT.
HOUSE (1st. floor)				
OTHER (or 2nd floor)				
GARAGE				
ACCESSORY BUILDING				
SWIMMING POOL				
DECK				
COMMERCIAL/INDUSTRIAL				
TOTAL SQ. FT.				

[Use additional sheet(s) for more information]

SIGNATURE BLOCK
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 provisions of any other state or local law or ordinance regulating construction or performance of construction.

Signature - OWNER _____

Signature - APPLICANT (if different than owner) _____
11-10-15

Date _____

Action taken by Zoning Enforcement Officer: APPROVED DENIED , Action necessary: SPECIAL USE: SITE PLAN:
SCHEDULE A: VARIANCE: Area Use

OFFICE USE ONLY	Article _____ Section _____ Subsection _____ Paragraph _____ Briefly Describe: _____	Zoning District: _____	F Zoning \$ _____	Cash: _____
	Attachments Required: _____	Wetlands YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	E Building \$ <u>75.00</u>	Check #: _____
	Z.E.O./C.E.O. _____ Signature _____	Flood Plain <input type="checkbox"/> <input checked="" type="checkbox"/>	E Late \$ _____	Receipt #: _____
	Date of Action: _____		S TOTAL \$ <u>75.00</u>	

11-9-15

CRACKER, LLC

Proposed New Building

30' X 50' X 20'

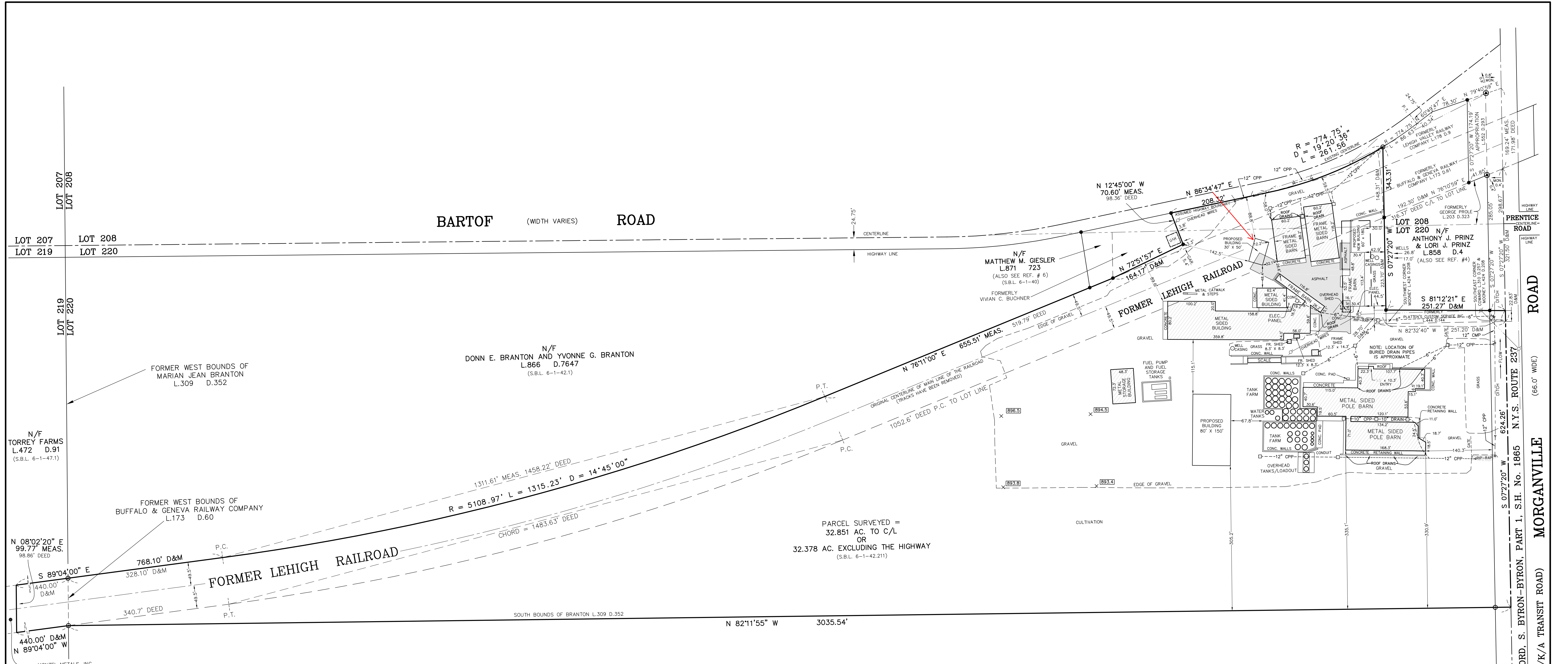
Dry Fertilizer loadout
Building

Pole barn style

Contractor:
R & R Builders
Castile NY

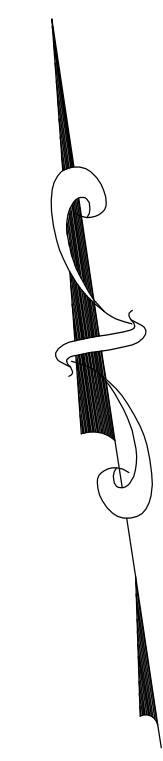
able to load in
inclement weather

building meets all setback



- = IRON PIN SET
- = IRON PIN/PIPE FOUND
- ⊕ = UTILITY POLE
- ⊙ = CONCRETE MONUMENT FOUND
- ⊕ = FIRE HYDRANT
- ⊠ = CATCH BASIN
- D&M = DEED & MEASURED

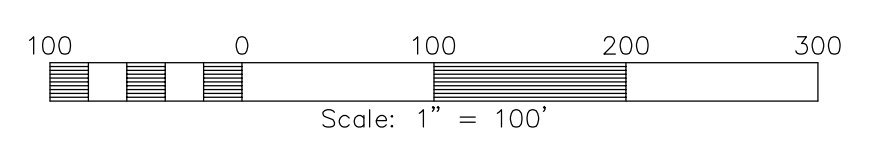
NORTH PER REFERENCE No. 6



PARCEL SURVEYED =
32.851 AC. TO C/L
OR
32.378 AC. EXCLUDING THE HIGHWAY
(S.B.L. 6-1-42.211)

N/F
DENIS DARLING AND PHYLLIS DARLING
L.434 D.867
(S.B.L. 6-1-43)

MAP OF A SURVEY
OF LAND BELONGING TO
CROCKER, LLC
BEING PART OF LOTS 208, 219 & 220, TOWNSHIP 1 OF THE 100,000 ACRE TRACT
SITUATE IN THE
TOWN OF STAFFORD
GENESEE COUNTY, NEW YORK
1" = 100' AUGUST 21, 2012
REVISED: SEPTEMBER 18, 2014 (UPDATED IMPROVEMENTS)
REVISED: DECEMBER 16, 2015 (UPDATED IMPROVEMENTS & ADDED PROPOSED STRUCTURES)



- ~ REFERENCES ~
- 1) DEED TO: CROCKER, LLC L.840 D.788
 - 2) THE GENESEE COUNTRY ABSTRACT COMPANY ABSTRACT No. 52,180 LAST SETOUT #16 (SETOUT DATED JUNE 2, 1995)
 - 3) MONROE-GENESEE COUNTRY TITLE AGENCY, LLC ABSTRACT No. 59,919 LAST DATED: MAY 5, 2005
 - 4) MAP OF THE CROCKER LAND SEPARATION DATED: MAY 15, 2006 BY K. M. O'DONOGHUE, L.S. JOB No. G04-2846S
 - 5) MAP BY THOMAS F. DUTTON, L.S. LAST DATED: JULY 29, 1991 JOB No. 78-102-A-1
 - 6) MAP BY K. M. O'DONOGHUE, L.S. LAST DATED: JANUARY 13, 2009 JOB No. G08-3431S

I HEREBY CERTIFY THAT THIS MAP WAS MADE DECEMBER 16, 2015 FROM NOTES OF A SURVEY COMPLETED DECEMBER 9, 2015.



NOTES:
1) UNAUTHORIZED ALTERATION OR ADDITION TO THIS SURVEY MAP IS A VIOLATION OF SECTION 7209 PROVISION 2 OF THE NEW YORK STATE EDUCATION LAW.
2) THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT ABSTRACT OF TITLE AND IS SUBJECT TO ANY STATE OF FACT THAT MAY BE REVEALED BY AN EXAMINATION OF SUCH.

KEVIN M. O'DONOGHUE, L.S. No. 49514

WELCH & O'DONOGHUE
LAND SURVEYORS, P.C.
P.O. BOX 669
8713 ROUTE 237
STAFFORD, NEW YORK 14143
PH. (585) 343-5334
FAX 343-5810

wsurvey@rochester.rr.com

JOB No. G04-2846S-1

T-02-STAF-1-16



04/04/2013

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