

Mar 20th

ORIGINAL



CASE NO. 1334

DATE OF HEARING 4.18.19

Town of Aurora Zoning Board of Appeals
300 Glead 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 GERALD E. ZAJAC
Address 5 STEWART COURT
City EAST AURORA State N.Y. ZIP 14052
Phone 716- Email K IL.COM
Interest in the (purchaser/developer) O

III. PROPERTY OWNER INFORMATION (If different from applicant information.)

Property Owner(s) Name(s) _____
Address _____
City _____ State _____ ZIP _____
Phone _____ Fax _____ Email _____

III. PROPERTY INFORMATION

Property Address 5 STEWART COURT EAST AURORA N.Y. 14052
SBL# 142489 163.03-1-15
Property size in acres 1.55 Property Frontage in feet _____
Zoning District _____ Surrounding Zoning _____
Current Use of Property _____

IV. REQUEST DETAIL

(check all that apply)

Variance from Ordinance Section(s) # 116-8.4 E(1)
 Special Use Permit for: _____
 Use Variance for: _____
 Interpretation of _____

V. SIGNATURES (This application must be signed by the applicant/petitioner. If the applicant is not the owner of the property, a separate owner authorization form must be submitted – see pg. 5)

Gerald E Zajac

Signature of Applicant/Petitioner

GERALD E. ZAJAC

Print name of Applicant/Petitioner

State of New York; County of Erie

On the 3RD day of MARCH in the year 2019 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.

Marcia A. Bloom

Notary Public

(Notary stamp)

Marcia A. Bloom
Notary Public, State of New York
Qualified in Erie County
My Commission Expires March 30, 2019

Office Use Only:

Date received: 3/12/19

Receipt #: 121428

\$100⁰⁰

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.

Previous appeals:

Date: _____ Type of Appeal: _____ Granted _____ Denied _____

Date: _____ Type of Appeal: _____ 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)

project
My proposed is to Add A 3^{ED} CAR Attached garage. I have A CORVETT CONVERTABLE which I pay to store elsewhere since we Moved here. We have 3 vehicles with the corvette and 3 John Deere tractors for SNOW and grass. I do not Like ALL those CARS sitting IN the driveway. The reason for the variance is there is existing windows and CANNOT move back.

TO BE 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 Town 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 to other properties in the zoning district or neighborhood: _____

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 explain: _____

(Attach additional pages if needed)

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 NOT 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: Town of Aurora

2. Hearing Schedule: **Date** 4/18/2019 **Time** 7:00pm **Location** 300 Glead Ave., E. Aurora, NY

3. Action is before: Legislative Body Board of Appeals Planning Board

4. Action consists of: New Ordinance Rezone/Map Change Ordinance Amendment

Site Plan Variance Special Use Permit Other

5. Location of Property: Entire Municipality Specific as follows 5 Stewart Court

6. Referral required as Site is within 500' of: State or County Property/Institution Municipal Boundary Farm Operation located in an Agricultural District

Expressway County Road State Highway Proposed State or County Road, Property, Building/Institution, Drainageway

7. Proposed change or use: (be specific) Proposed garage addition closer to right of way than allowed by code.

8. Other remarks: (ID#, SBL#, etc.) SBL#163.03-1-15

9. Submitted by: Martha Librock, Town Clerk 3.25.19

300 Glead Avenue, East Aurora, 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. Form ZR-3, Comment on Proposed Action is attached hereto.
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: _____ Date: _____

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



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

TOWN OF AURORA
Southside Municipal Center
300 Glead Avenue, East Aurora, NY 14052
www.townofaurora.com

TOWN COUNCIL MEMBERS

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sfriess@townofaurora.com

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jharris@townofaurora.com

Jolene M. Jeffe
jjeffe@townofaurora.com

Charles D. Snyder
csnyder@townofaurora.com

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(716) 652-4050
highway@townofaurora.com

BUILDING INSPECTOR
William R. Kramer
(716) 652-7591
building@townofaurora.com

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

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

TOWN ATTORNEY
Ronald P. Bennett

TOWN JUSTICE
Douglas W. Marky
Jeffrey P. Markello

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

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

Gerald E Zajac
5 Stewart Ct.
East Aurora, NY 14052

3/20/2019


Re; Variance at 5 Stewart Ct

Gerald,

The Building Department has reviewed your request to erect an attached garage to the existing residence. Your design shows the new structure extending into the required front yard setback so we have requested that you apply to the Town of Aurora Zoning Board of Appeals for an area variance.

116-8.4E(1) Required: Front yard depth a minimum of 75'
Request: 71.5'
Variance: 3.5'

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 you need to support your need for a variance from the Town Code. If you have any questions contact us at 652-7591.

William R. Kramer

Code Enforcement Officer

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.

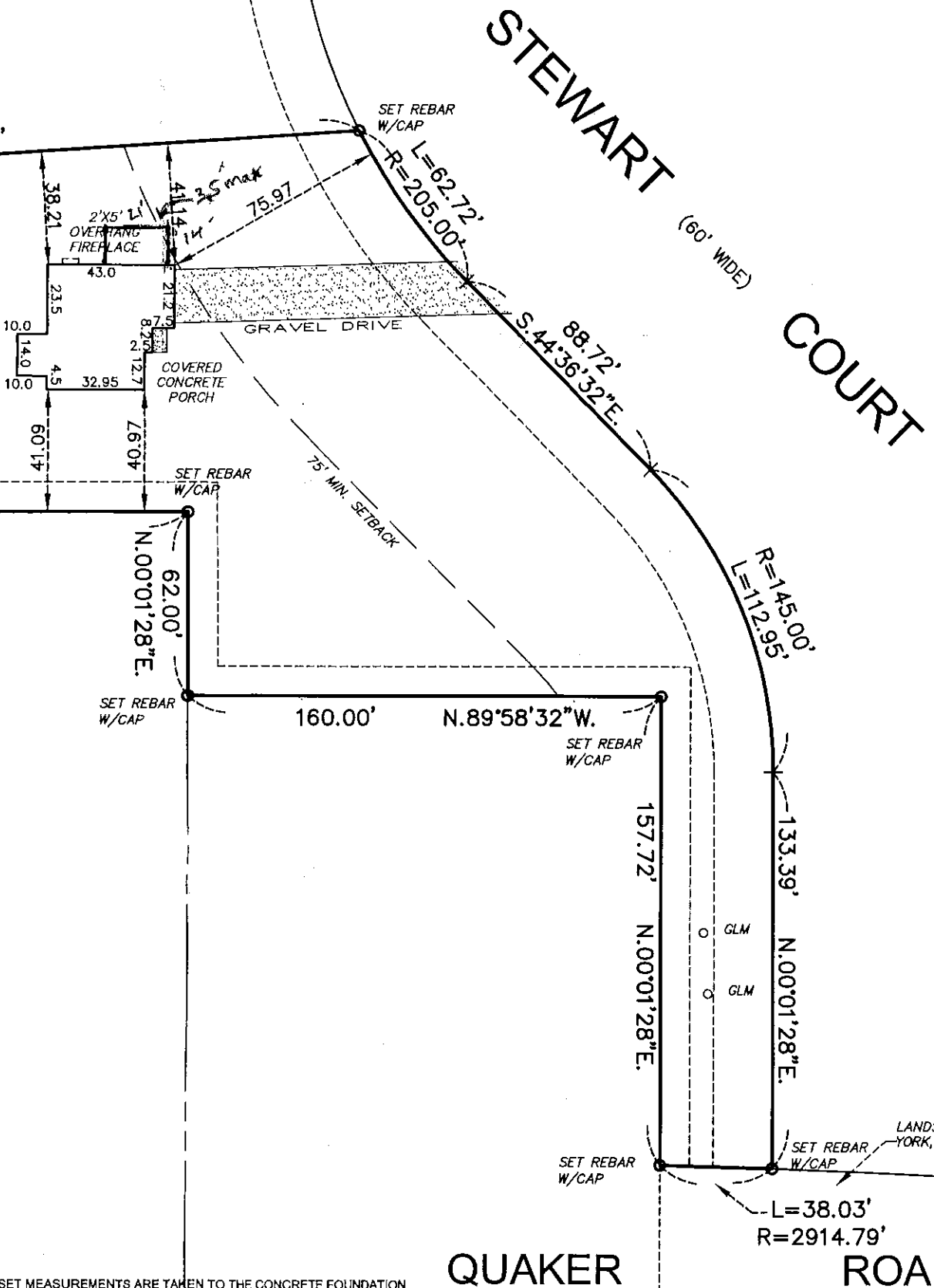
Part 1 - Project and Sponsor Information			
GERALD E. ZAJAC			
Name of Action or Project: SINGE CAR GARAGE			
Project Location (describe, and attach a location map): 5 STEWART COURT, E. AURORA NY 14052			
Brief Description of Proposed Action: CONSTRUCTION OF AN ATTACHED SINGLE CAR GARAGE.			
Name of Applicant or Sponsor: GERALD E. ZAJAC		Telephone: 716 711 0386	
		E-Mail: kmail.com	
Address: 5 STEWART COURT			
City/PO: EAST AURORA		State: NY	Zip Code: 14052
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO YES <input checked="" type="checkbox"/> <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO YES <input checked="" type="checkbox"/> <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
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, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>Gerald E. Zajac</u> Date: <u>3-12-19</u></p> <p>Signature: <u>Gerald E. Zajac</u></p>		



20' WIDE UTILITY EASEMENT,
L.11064, PG.2429



SET MEASUREMENTS ARE TAKEN TO THE CONCRETE FOUNDATION

QUAKER ROAD

Y COPIES FROM THE ORIGINAL OF THIS SURVEY MAP MARKED
H AN ORIGINAL OF THE LAND SURVEYOR'S EMBOSSED SEAL AND
VATURE SHALL BE CONSIDERED TO BE VALID TRUE COPIES.

THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF AN
UP-TO-DATE ABSTRACT OF TITLE AND IS SUBJECT TO ANY STATE
OF FACTS THAT MAY BE REVEALED BY AN EXAMINATION OF SUCH.

LANDS APPROPRIATED BY THE STATE OF
YORK, L.6650, PG.478, PARCEL 76



CASE NO. 1335

DATE OF HEARING 4.18.19

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 VARIANCE INTERPRETATION

II. APPLICANT/PETITIONER

Applicant's Name JODI OSINSKI
Address 108 RIVERMIST DRIVE
City BUFFALO State NY ZIP 14202
Phone 716 Email JODI@runner.com
Interest in the (purchaser/developer) OWNER

III. PROPERTY OWNER INFORMATION (If different from applicant information.)

Property Owner(s) Name(s) JODI OSINSKI
Address 108 RIVERMIST DRIVE
City BUFFALO State NY ZIP 14202
Phone 716 Email JO@RUNNER.COM

III. PROPERTY INFORMATION

Property Address 1889 CENTER STREET
SBL# 200.00-1-18.131
Property size in acres 70.5 Property Frontage in feet 477'
Zoning District _____ Surrounding Zoning _____
Current Use of Property AGRICULTURAL

IV. REQUEST DETAIL

(check all that apply)

- Variance from Ordinance Section(s) # 116-18 A(1)
- Special Use Permit for: _____
- Use Variance for: _____
- Interpretation of _____

V. SIGNATURES (This application must be signed by the applicant/petitioner. If the applicant is not the owner of the property, a separate owner authorization form must be submitted – see pg. 5)

Jodi Osinski
 Signature of Applicant/Petitioner

JODI OSINSKI
 Print name of Applicant/Petitioner

State of New York; County of Erie

On the 20th day of March in the year 2019 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.

Trudi C. Martin
 Notary Public

(Notary stamp)

TRUDI C. MARTIN
NOTARY PUBLIC-STATE OF NEW YORK
No. 01MA6298713
 Qualified in Chautauque County
 My Commission Expires 03-17-2022

Office Use Only: Date received: 3/21/19 Receipt #: 121440

\$100 fee # 4013

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.

Previous appeals:

Date: _____ Type of Appeal: _____ Granted _____ Denied _____

Date: _____ Type of Appeal: _____ Granted _____ Denied _____

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



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

TOWN OF AURORA
Southside Municipal Center
300 Glead Avenue, East Aurora, NY 14052
www.townofaurora.com

TOWN COUNCIL MEMBERS

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Jolene M. Jeffe
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(716) 652-7591
building@townofaurora.com

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

TOWN ATTORNEY
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Jeffrey P. Markello

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

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

Jodi Osinski
108 Rivermist Dr.
Buffalo, NY 14207

3/20/2019

Re; Site plan for 1889 Center st.

Jodi,

The Building Department has reviewed your site plan to erect a single family residence on your property at 1889 Center St. We have advised you that the accessory structure between the road and your proposed residence would not comply with the Town Code and advised you to request an area variance from the Town ZBA if you wished to proceed with this site plan.

116-18A(1) Required: No accessory building in the front yard
Request: 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 you need to support your need for a variance from the Town Code. If you have any questions contact us at 652-7591.

William R. Kramer

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 NOT WRITE IN THIS SPACE

Case No.: _____

Received: _____

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Description of Proposed Action

1. Name of Municipality: Town of Aurora

2. Hearing Schedule: **Date** 4/18/2019 **Time** 7:15 **Location** 300 Gleed Ave., E. Aurora, NY

3. Action is before: Legislative Body Board of Appeals Planning Board

4. Action consists of: New Ordinance Rezone/Map Change Ordinance Amendment

Site Plan Variance Special Use Permit Other

5. Location of Property: Entire Municipality Specific as follows 1889 Center Street

6. Referral required as Site is within 500' of: State or County Property/Institution Municipal Boundary Farm Operation located in an Agricultural District

Expressway County Road State Highway Proposed State or County Road, Property, Building/Institution, Drainageway

7. Proposed change or use: (be specific) Accessory building in front yard of residence not allowed by code.

8. Other remarks: (ID#, SBL#, etc.) SBL#200.00-1-18.131

9. Submitted by: Martha Librock, Town Clerk 3.25.19

300 Gleed Avenue, East Aurora, 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. Form ZR-3, Comment on Proposed Action is attached hereto.
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: _____ 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			
Name of Action or Project: PROPOSED HOME CONSTRUCTION			
Project Location (describe, and attach a location map): 1889 CENTER STREET			
Brief Description of Proposed Action: NEW HOME CONSTRUCTION TO INCLUDE SITE PREPARATION, INSTALLATION OF UTILITIES AND SEPTIC SYSTEM			
Name of Applicant or Sponsor: JODI OSINSKI		Telephone: 9 E-Mail: Jo [unclear].com	
Address: 108 RIVERMIST DRIVE			
City/PO: BUFFALO		State: NY	Zip Code: 14202
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action? 71 acres			
b. Total acreage to be physically disturbed? 1 acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 71 acres			
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

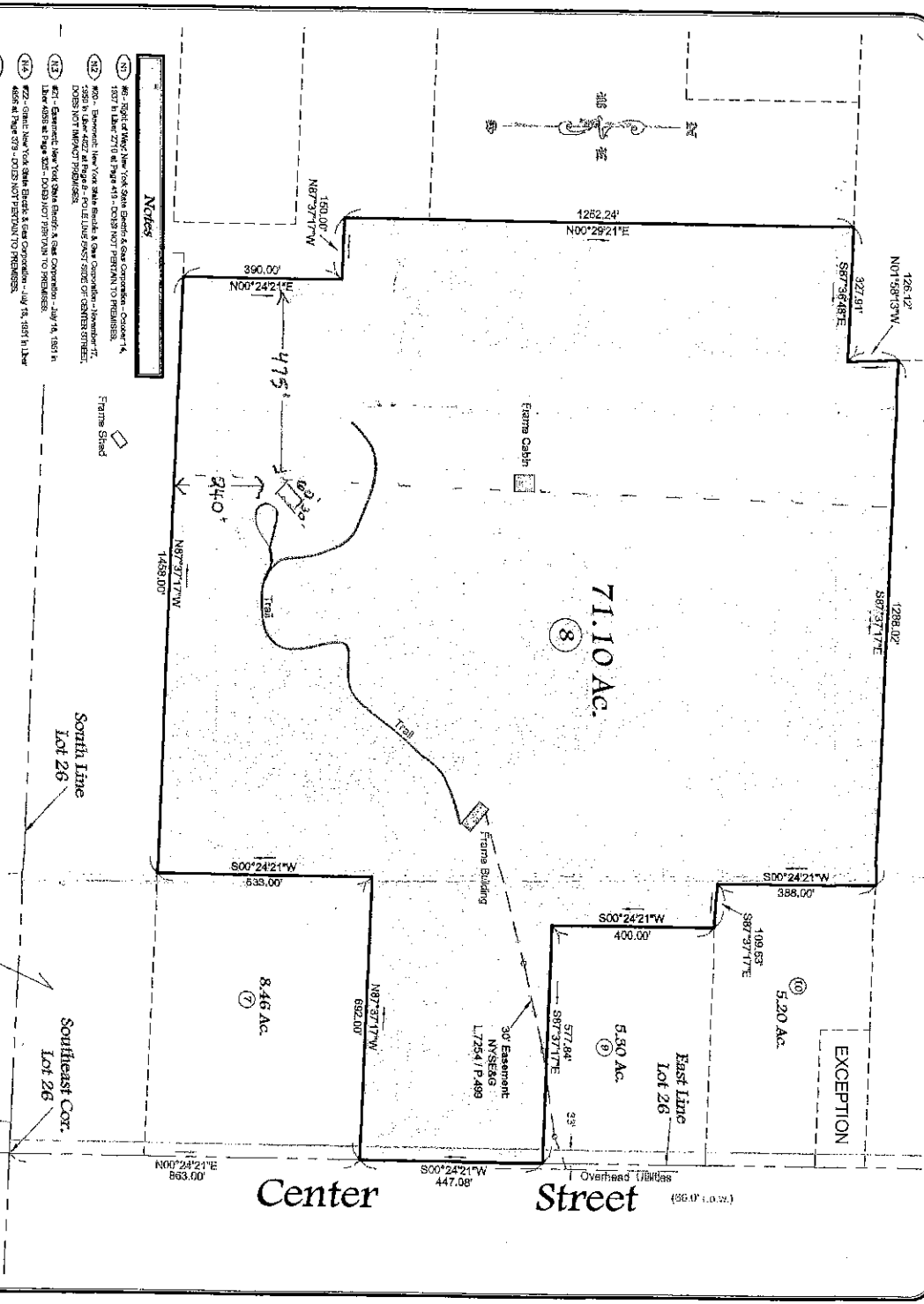
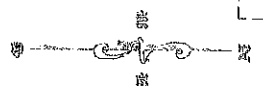
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: <u>septic</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain 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: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input checked="" type="checkbox"/> Forest <input checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100 year flood plain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: Jodi Osinski Date: 3-20-19

Signature: Jodi Osinski



- Notes**
- (1) 800' Right of Way for New York State Thruway Authority - Contract No. 1007 in Liber 2710 of Page 451 - DOES NOT PERTAIN TO PRESENCE.
 - (2) 800' Right of Way for New York State Thruway Authority - Contract No. 1007 in Liber 2710 of Page 451 - DOES NOT PERTAIN TO PRESENCE.
 - (3) 800' Right of Way for New York State Thruway Authority - Contract No. 1007 in Liber 2710 of Page 451 - DOES NOT PERTAIN TO PRESENCE.
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 - (5) 800' Right of Way for New York State Thruway Authority - Contract No. 1007 in Liber 2710 of Page 451 - DOES NOT PERTAIN TO PRESENCE.
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 - (20) 800' Right of Way for New York State Thruway Authority - Contract No. 1007 in Liber 2710 of Page 451 - DOES NOT PERTAIN TO PRESENCE.

Statement of Encroachments

A No encroachments were noted as shown to in the original field survey.



Survey Prepared By:
 Licensed Surveyor: David Scott Freeman
 Licensed Land Surveyor No. 0550460
 In the State of New York
 Date of Survey: September 12, 2016
 Date of Last Revision: October 17, 2016
 Drawing Scale: 1" = 250'
 Freeman and Freeman Land Surveyors
 10432 Camp Road - Glenwood, N.Y. 14688
 Phone: (716) 692-7740, Email: David@FreemanSurveyors.com



Survey

Being Part of
 Lot 26 Township 9 Range 6
 Holland Land Company Survey
 Town of Aurora
 Erie County, New York

Surveyor's Certificate
 I hereby certify:

Freeman and Freeman Land Surveyors
 Resurveying the Holland Land Company for the 21st Century
 10432 Camp Road - Glenwood, N.Y. 14688
 Phone: (716) 692-7740, Email: David@FreemanSurveyors.com

Legend of Symbols & Abbreviations

● P / Aerial	○ North	○ B/L	○ Encroachment
○ Light Pole	○ South	○ Z	○ Ordinance
○ Ring Signal Box	○ East	○ I	○ Indicates Mineral
○ Stem Post	○ West	○ N/P	○ New or Pending
○ Fire Hydrant	○ Rec. Record	○ One Inch = 400.00 Ft.	
○ Meter Pole	○ Rec. Survey	○ One Inch = 1,000.00 Ft.	
○ Utility Pole	○ Rec. Plat	○ One Inch = 4,000.00 Ft.	
○ Sign	○ Rec. Plat		
	○ Property Boundary		
	○ Line of Record		
	○ Edge of R.O.W.		
	○ Railroad Line Co. Use Line		
	○ Road Centerline		
	○ Fence Along Line		

Miscellaneous Notes

(M1) Some features shown on this plot may be shown out of scale for clarity.
 (M2) Certain easements and/or utility lines, lines, or may not be shown here, however, this shall not constitute an easement or utility affecting premises here shown.
 (M3) Unsubstantiated Affidavit of Adverse to this Survey Map is a Violation of Section 7200 (revised 2 of the New York State Education Law)
 (M4) THIS MAP IS NOT VALID WITH AFFIDAVIT OF NO CHANGE

ORIGINAL



CASE NO. 1336

DATE OF HEARING 4.18.19

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 VARIANCE INTERPRETATION

II. APPLICANT/PETITIONER

Applicant's Name BUY ROBERTS SOUTHERN TIER BUILDING AUTHORITY CORP
Address 74 BROOKSIDE ESTATE DR.
City JAM ESTOWN State NY ZIP 14701
Phone 616-822-2433 Fax _____ Email ixx.net
Interest in the property (ex: owner/purchaser/developer) CON

III. PROPERTY OWNER INFORMATION (if different from applicant information.)

Property Owner(s) Name(s) ALEXANDERS 46 INC
Address 4733 TRANSIT RD
City L. AMCASTER State NY ZIP 14043
Phone 716-656-0600 Fax _____ Email j pc.com

III. PROPERTY INFORMATION

Property Address 555 SOUTH ST, EAST AURORA, NY 14052
SBL# 175.16-1-9
Property size in acres .29 Property Frontage in feet 70
Zoning District R Surrounding Zoning _____
Current Use of Property Residential

IV. REQUEST DETAIL

(check all that apply)

Variance from Ordinance Section(s) # Setback of Porch 118-8.1 E(1)
 Special Use Permit for: _____
 Use Variance for: _____
 Interpretation of _____

V. SIGNATURES (This application must be signed by the applicant/petitioner. If the applicant is not the owner of the property, a separate owner authorization form must be submitted – see pg. 5)

[Signature]
Signature of Applicant/Petitioner

J. Joyce Pres. Alexander 46, Inc
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 20th day of March in the year 2019 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.

[Signature]
Notary Public

(Notary stamp) TIFFANY M SPANICH
Notary Public, State of New York
Qualified in Erie County
Reg. No. 01-SP6034113
My Commission Expires Dec. 6, 2021

Office Use Only: Date received: 3/21/19 Receipt #: 121441
Application reviewed by: _____ #100 ch# 1692 from James Joyce Eng.

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.

Previous appeals:
Date: _____ Type of Appeal: _____ Granted _____ Denied _____
Date: _____ Type of Appeal: _____ 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)

Renovation of property will include enlarging the footprint of covered but not enclosed front porch/entryway by approximate two (2) feet closer to and into the designated utility easement from center of the public road. Location of existing front driveway to remain unchanged.

TO BE 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 Town 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 to other properties in the zoning district or neighborhood:

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 explain:

(Attach additional pages if needed)

Town of Aurora
300 Glead Avenue
East Aurora, NY 14052
www.townofaurora.com

**Zoning Board of Appeals
Application
Owner Authorization**

The undersigned, who is the owner of the premises know as:

555 South St Aurora

(address)

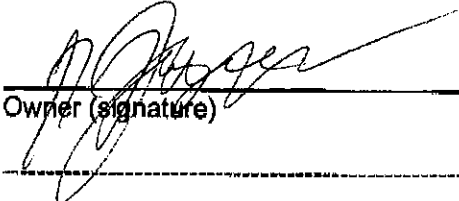
identified as Tax Map (SBL)# 175,16-1-9

hereby authorizes Guy Roberts/Southern Tier Building Authority to bring an application for area variance

special use permit use variance interpretation before the Town of Aurora Zoning Board of Appeals for review and potential approval. The undersigned further permits the Town or its authorized representative(s) access to the property to review existing site conditions during the review process.

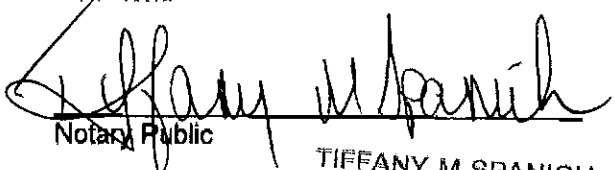
Alexander 46, Inc
Owner (print)

3-20-19
Date


Owner (signature)

STATE OF NEW YORK)
) SS
COUNTY OF ERIE)

On this 20th day of March, 2019, before me, the undersigned, a notary public in and for said state, personally appeared James Joyce, personally known 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.


Notary Public

TIFFANY M SPANICH
Notary Public, State of New York
Qualified in Erie County
Reg. No. 01-SP6034113
My Commission Expires Dec. 6, 2021

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



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

TOWN OF AURORA
Southside Municipal Center
300 Glead Avenue, East Aurora, NY 14052
www.townofaurora.com

TOWN COUNCIL MEMBERS

Susan A. Friess
sfriess@townofaurora.com

Jeffrey T. Harris
jharris@townofaurora.com

Jolene M. Jeffe
jjeffe@townofaurora.com

Charles D. Snyder
csnyder@townofaurora.com

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

BUILDING INSPECTOR
William R. Kramer
(716) 652-7591
building@townofaurora.com

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

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

TOWN ATTORNEY
Ronald P. Bennett

TOWN JUSTICE
Douglas W. Marky
Jeffrey P. Markello

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

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

James Joyce
4733 Transit Rd
Lancaster, NY 14043

3/20/2019

Re; Variance at 555 South St.

James,

The Building Department has reviewed your request to erect a covered porch to the existing residence at 555 South St. in the Town of Aurora. Your design shows the new structure encroaching further into the front yard than existing legal non-conforming residence. We have requested that you apply to the Town of Aurora Zoning Board of Appeals for an area variance if you wish to further pursue this building option.

116-8.1E(1) Required: Front yard depth a minimum of 75'
Existing legal non-conforming set back: 30'
Request: 28' front yard setback
Variance: 2' from existing non-conforming

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 you need to support your need for a variance from the Town Code. If you have any questions contact us at 652-7591.

William R. Kramer

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 NOT 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: Town of Aurora

2. Hearing Schedule: **Date** 4/18/2019 **Time** 7:30 **Location** 300 Glead Ave., E. Aurora, NY

3. Action is before: Legislative Body Board of Appeals Planning Board

4. Action consists of: New Ordinance Rezone/Map Change Ordinance Amendment

Site Plan Variance Special Use Permit Other

5. Location of Property: Entire Municipality Specific as follows 555 Center Street

6. Referral required as Site is within 500' of: State or County Property/Institution Municipal Boundary Farm Operation located in an Agricultural District

Expressway County Road State Highway Proposed State or County Road, Property, Building/Institution, Drainageway

7. Proposed change or use: (be specific) Addition to ^{home} closer to right of way than allowed by code.

8. Other remarks: (ID#, SBL#, etc.) SBL#175.16-1-9

9. Submitted by: Martha Librock, Town Clerk 3.25.19

300 Glead Avenue, East Aurora, 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. Form ZR-3, Comment on Proposed Action is attached hereto.
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: _____ 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			
Name of Action or Project: <i>Home Renovation</i>			
Project Location (describe, and attach a location map): <i>555 South St, East Aurora, NY</i>			
Brief Description of Proposed Action: <i>Increase size of front entry way/porch, an additional approximate two (2) feet. Entry way/porch will be covered but not enclosed, location of actual front door to remain unchanged</i>			
Name of Applicant or Sponsor: <i>Guy Roberts, Southern Tier Bids Authority</i>		Telephone: <i>716-223-1193</i>	E-Mail: <i>grob@stba.net</i>
Address: <i>74 Brookside Estates Dr</i>			
City/PO: <i>JAMESTOWN</i>	State: <i>NY</i>	Zip Code: <i>14701</i>	
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO YES <input checked="" type="checkbox"/> <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO YES <input checked="" type="checkbox"/> <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<i>.29</i> acres	
b. Total acreage to be physically disturbed?		<i>0</i> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<i>.29</i> acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____</p>	NO	YES
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____</p>	NO	YES
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____</p>	NO	YES
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>GUY ROBERTS</u> Date: <u>3/19/2019</u></p> <p>Signature: <u>[Signature]</u></p>		

AFFIDAVIT OF NO CHANGE - SURVEY

STATE OF NEW YORK)
) SS.
COUNTY OF ERIE)

Re: 555 South Street, Town of Aurora, Erie County, New York

CONSTANCE B. SHARTLE, being duly sworn, deposes and says:

1. I am one of the owners of the above property and I have owned the same since October 25, 2010.
2. The above property is improved by a one to four family residential dwelling only, which has been in existence at its present location for at least two years.
3. No adverse claim has been made to any right to title in and to the above property during my ownership of the same.
4. Attached to this Affidavit is an original print or a copy of an original print of a survey covering the above property made by A. S. Kuster, Surveyor, dated June 25, 1970, Job No. A-460. I have examined this survey and state that it shows all of the buildings and improvements presently located on the above property. I have made no structural changes or additions to the buildings and improvements located on the above property.
5. There have been no disputes with any adjacent property owners as to the locations of property lines or fences.
6. This affidavit is made to induce the title insurance company to issue a title insurance policy with a survey endorsement insuring a mortgage on the above property.

Constance B. Shartle
CONSTANCE B. SHARTLE

Subscribed and sworn to before me
this 28th day of March, 2011.

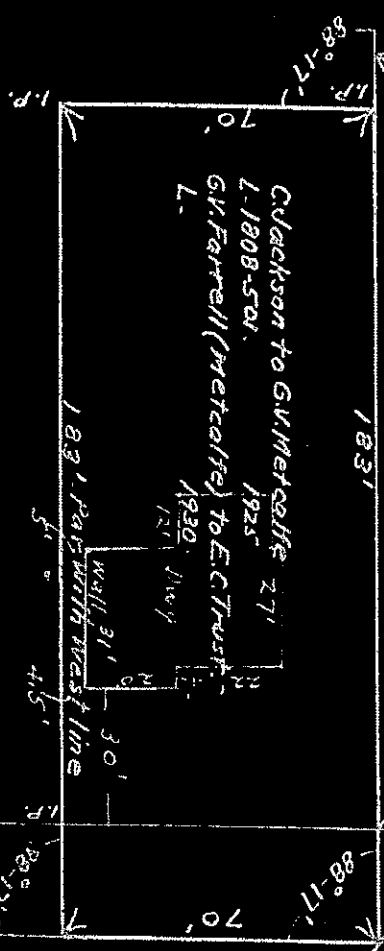
Julie M. Mazurkiewicz

JULIE M. MAZURKIEWICZ
NOTARY PUBLIC, STATE OF NEW YORK
NO. 01MA6161125
QUALIFIED IN ERIE COUNTY
COMMISSION EXPIRES 02/20/2015

Lot 22
T-9
R-6

C. Jackson

fence line occup.



1993.03' west from H.E. Cor. lot 22. SOUTH 49.5'

Lot 23

66' sycamore

Survey showing location of property owned by

GLEESING

TOWN of AURORA, N.Y.

Scale 1" = 40' May 1936

Revised Feb. 1953 A.S. Kuster, Surveyor, Licensed Land

File A. 460. 6-25-70.

ASPHALT SHINGLES

EXISTING CHIMNEY TO REMAIN

6" RAKE BOARD WRAPPED IN ALUM. TYP.

4" TRIM FOR WINDOW HEADER

DECORATIVE LOUVER

12

9

SMOOTH HARDBOARD

10" DECORATIVE HEADER TYP. FRONT ELEVATION

2" SILL NOSING TYP. FRONT ELEVATION

STONE VENEER

7" MAX RISER ON ALL EXTERIOR CONC. STEPS

PRE-MANUFACTURED TAPERED FIBERGLASS COMPOSITE COLUMN

ELEVATION

