



CASE NO. 1341

DATE OF HEARING 8/15/19

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 Erin Masterson Holko / Benjamin Holko  
Address 648 Olden Rd.  
City West Falls State NY ZIP 14170  
Phone [redacted] Fax [redacted] Email erin [redacted] ahl.com  
Interest [redacted] (owner/purchaser/developer) owner

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

Property Owner(s) Name(s) Same  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

#### III. PROPERTY INFORMATION

Property Address 648 Olden Rd. West Falls, NY 14170  
SBL# 199-00-2-4.1  
Property size in acres 6.1 Property Frontage in feet 620  
Zoning District RR/A Surrounding Zoning RR/A  
Current Use of Property residential agricultural

#### IV. REQUEST DETAIL

(check all that apply)  
 Variance from Ordinance Section(s) # 116 8.4 B. 2.  
 Special Use Permit for: \_\_\_\_\_  
 Use Variance for: \_\_\_\_\_  
 Interpretation of \_\_\_\_\_

**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)

*We are planning to build a barn for storage and small animals. We plan to build a second story to use for additional storage space. The final dimensions of the building will be 36'x48', max height of ~20' at peak.*

**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: \_\_\_\_\_

*N/A*

- 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: \_\_\_\_\_

*N/A*

- 4) Is your need for a use variance a result of you own actions (is your difficulty self-created)? Please explain: \_\_\_\_\_

*N/A*

(Attach additional pages if needed)

## 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.

<b>Part 1 - Project and Sponsor Information</b>							
Name of Action or Project: <i>2-Story Barn Building</i>							
Project Location (describe, and attach a location map): <i>648 Olden Rd., West Falls</i>							
Brief Description of Proposed Action: <i>build storage barn 36x48, with second story for additional storage</i>							
Name of Applicant or Sponsor: <i>Erin Masterson / Ben Holko</i>		Telephone: <i>716-7- [redacted]</i>					
Address: <i>648 Olden Rd.</i>		E-Mail: <i>er [redacted] mail</i>					
City/PO: <i>West Falls</i>		State: <i>NY</i>	Zip Code: <i>14170</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.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">NO</th> <th style="width: 50%; text-align: center;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">NO</th> <th style="width: 50%; text-align: center;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
3.a. Total acreage of the site of the proposed action?		<i>.04</i> acres					
b. Total acreage to be physically disturbed?		<i>.06</i> acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<i>6</i> 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 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?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input 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?	<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: <u>none / water from house</u>	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? 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? 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 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?	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 b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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: _____ _____ _____	<b>NO</b>   <input checked="" type="checkbox"/>	<b>YES</b>   <input type="checkbox"/>
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: _____ _____ _____	<b>NO</b>   <input checked="" type="checkbox"/>	<b>YES</b>   <input type="checkbox"/>
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: _____ _____ _____	<b>NO</b>   <input checked="" type="checkbox"/>	<b>YES</b>   <input type="checkbox"/>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor name: <u>Erin Masterson Holko</u>		Date: <u>7/16/19</u>
Signature: <u>[Handwritten Signature]</u>		

SUPERVISOR  
James J. Bach  
(716) 652-7590  
[jbach@townofaurora.com](mailto:jbach@townofaurora.com)



TOWN CLERK  
Martha L. Libroek  
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[townclerk@townofaurora.com](mailto:townclerk@townofaurora.com)

**TOWN OF AURORA**  
**Southside Municipal Center**  
300 Glead Avenue, East Aurora, NY 14052  
[www.townofaurora.com](http://www.townofaurora.com)

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Anthony DiFilippo IV

HISTORIAN  
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[historian@townofaurora.com](mailto:historian@townofaurora.com)

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

July 17, 2019

Benjamin & Erin Holko  
648 Olden Rd  
West Falls, NY 14170

The Building Department reviewed your proposal for a barn on your property at 648 Olden Rd. We have denied your application because the barn fails to meet the requirements of the Town of Aurora Code for an accessory building in the Rural Residential (RR) zoning district in which it is located.

Section 116-8.4B(2) –  
Required: Accessory Buildings not to exceed 15 feet  
Requested: Two story accessory building with mean height of 17'9"  
*VARIANCE REQUIRED : 2' 9"*

Section 116-17D –  
Required: In any R district the permitted accessory uses on any premises shall not include a private garage with vehicular entrance headroom more than nine feet high  
Requested: Two 10' overhead doors  
*VARIANCE REQUIRED : 1 FOOT*

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 and fee, a letter to the ZBA explaining your difficulty, any information to support your need for a variance from the Town Code.

If you have any questions contact us at 652-7591.

Sincerely,

Elizabeth Cassidy  
Asst. 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

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**2. Hearing Schedule:** **Date** 8/15/2019 **Time** 7:45pm **Location** 300 Gleed Ave., E. Aurora

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**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                  648 Olden Rd., PO West Falls,  
Town of Aurora

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**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

Height of proposed accessory building and overhead doors not allowed by  
Town Code.

**7. Proposed change or use: (be specific)** \_\_\_\_\_

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**8. Other remarks: (ID#, SBL#, etc.)** SBL#199-00-2-4.1

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**9. Submitted by:** Martha Librock, Town Clerk                                  7/18/2019

300 Gleed Ave., 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: \_\_\_\_\_



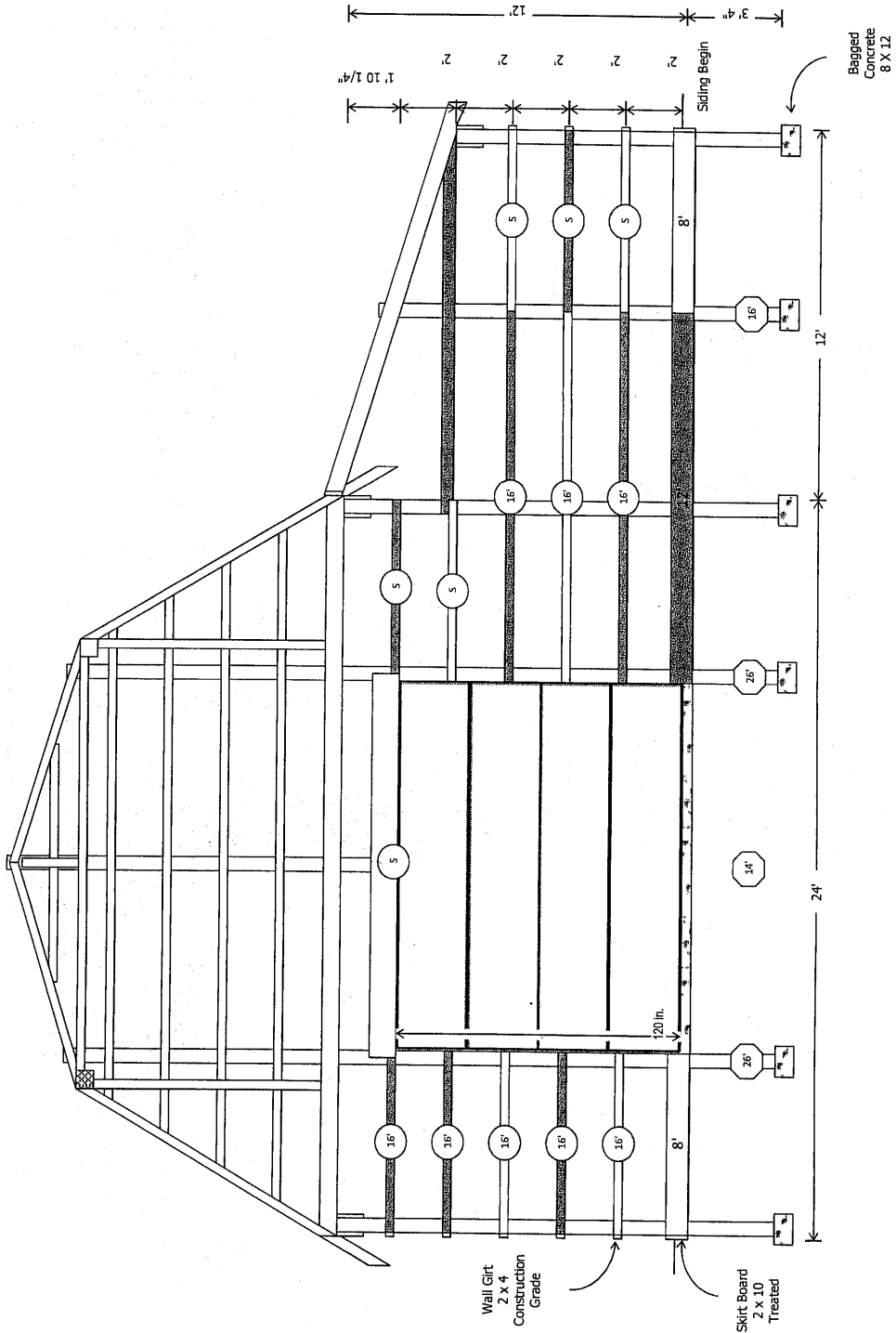




**YOUR LOGO  
HERE**

**SOUTH SIDE-GABLE SIDE 2 WALL GIRT VIEW**

**Construction  
Maestro**  
ESTABLISHED 1998  
WALL, ROOF, GROUND & DRIVE



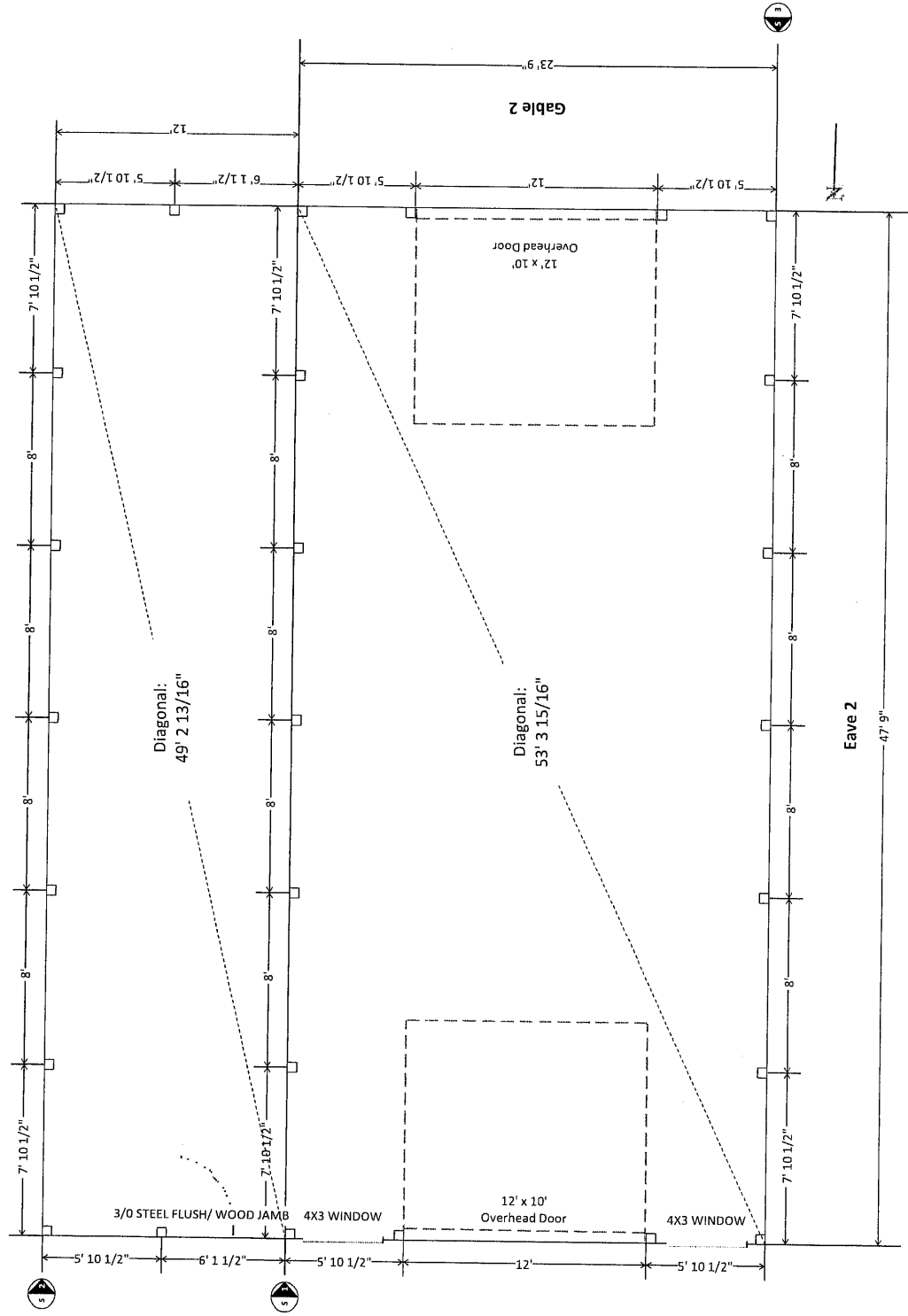
**YOUR LOGO  
HERE**

**POLE LAYOUT**

Personal Use, 1728 sq. ft.

**Maestro**  
CONSTRUCTION  
Estimate Number: 513  
7/1/2019

Eave 1

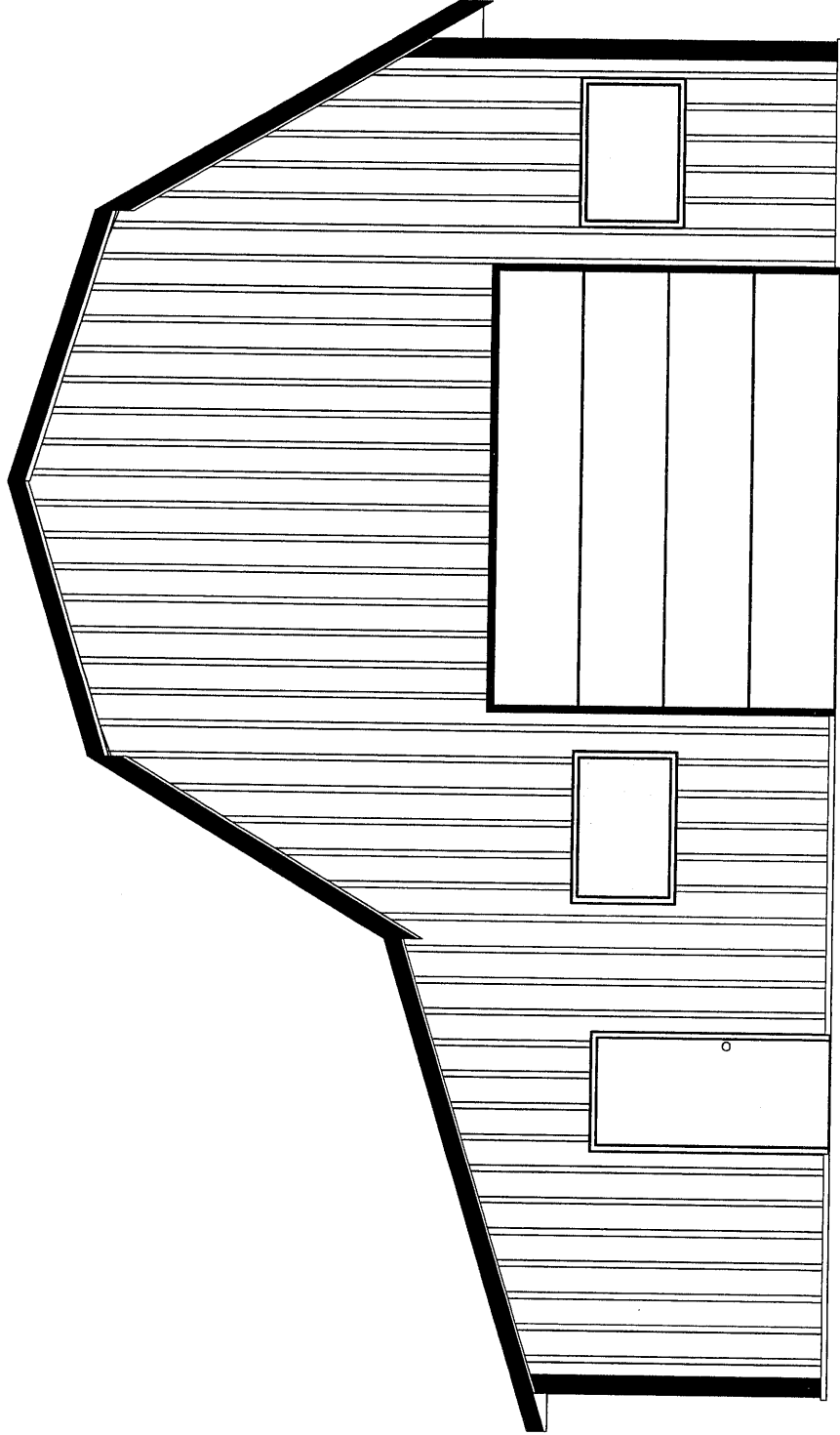


Gable 1

**YOUR LOGO  
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**NORTH SIDE-GABLE SIDE 1 ELEVATION**

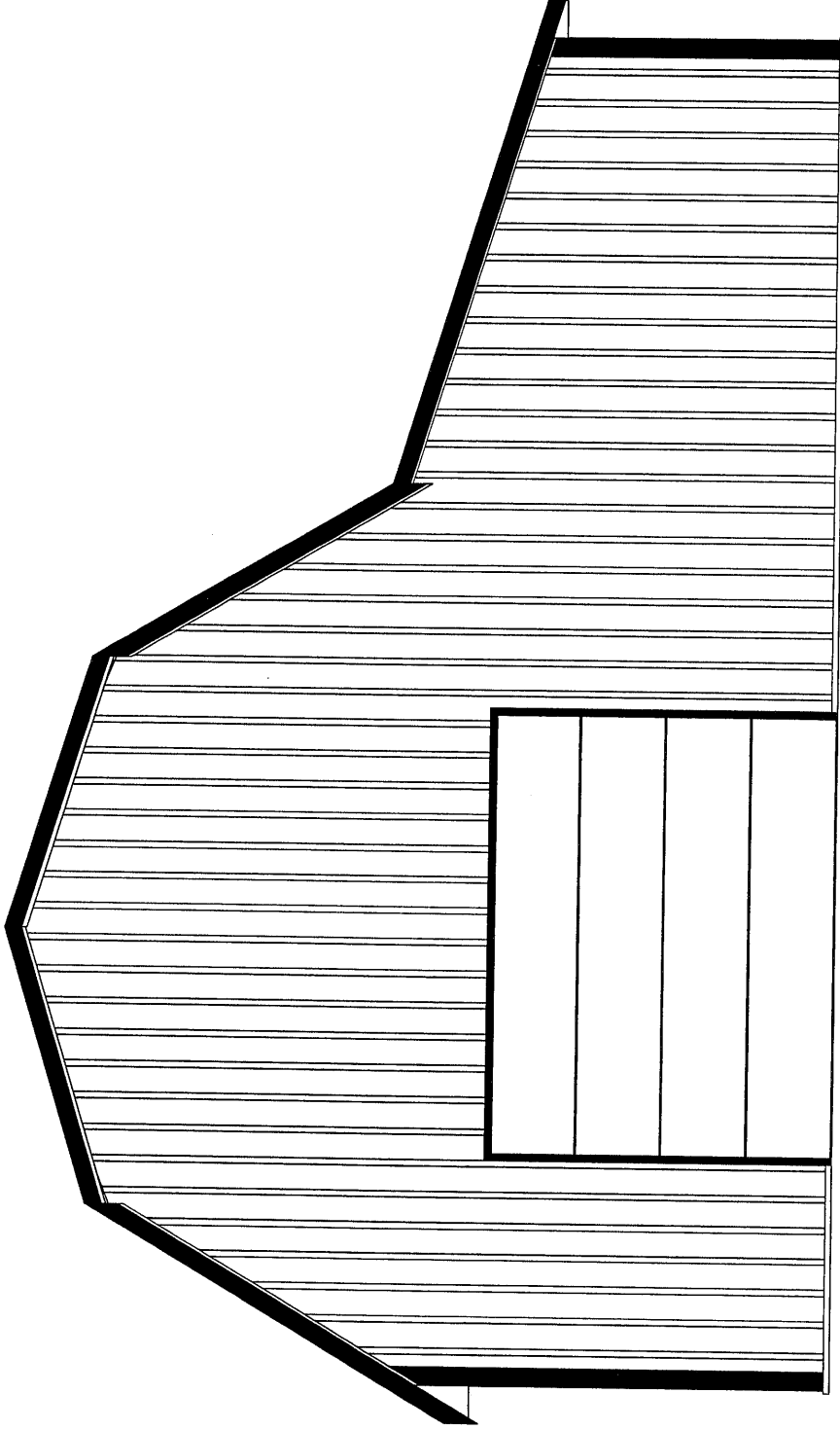
**CONSTRUCTION**  
**Maestro**<sup>®</sup>  
Estimate Software  
For Builders, Contractors & Designers



**YOUR LOGO  
HERE**

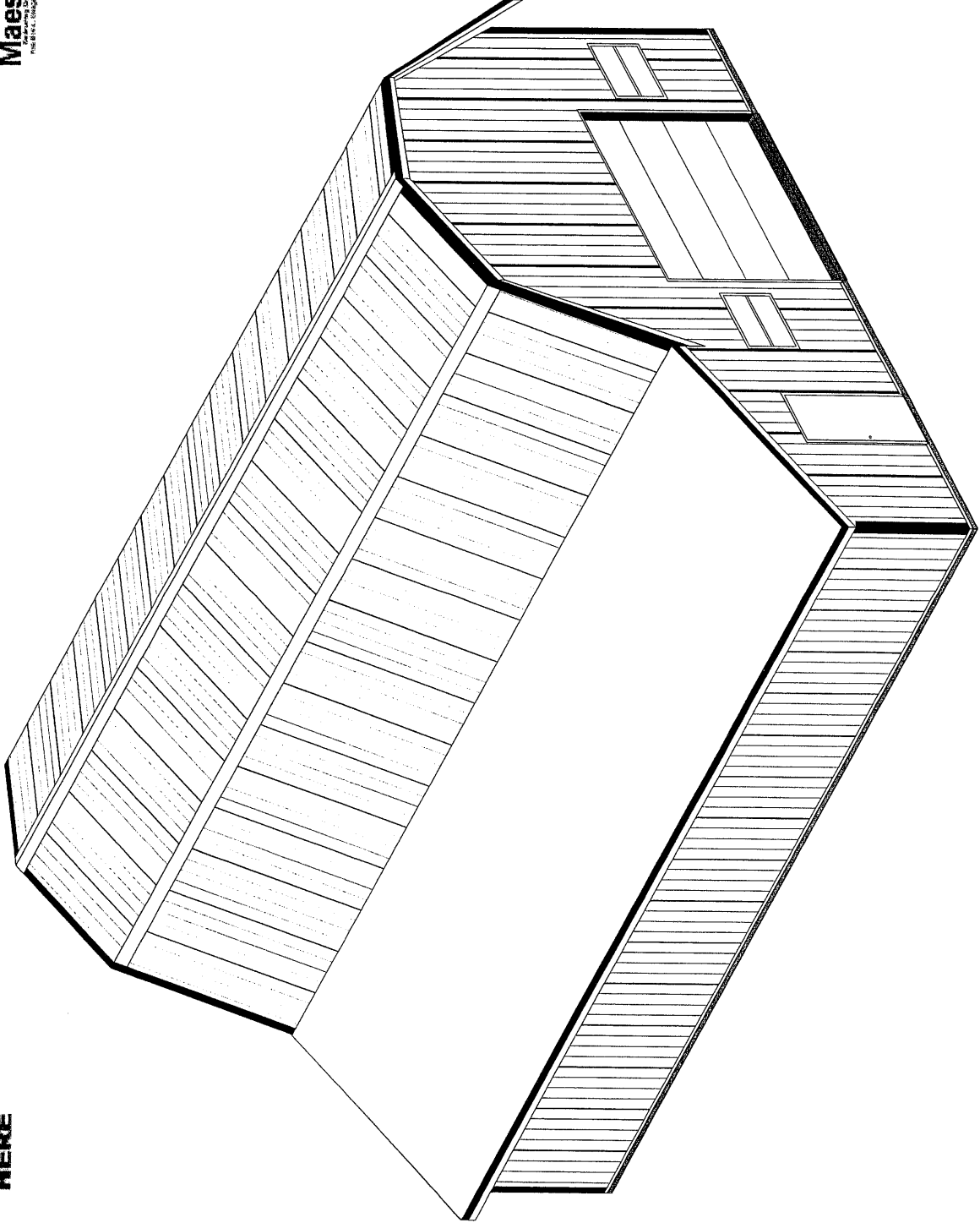
**SOUTH SIDE-GABLE SIDE 2 ELEVATION**

Construction  
**Maestro**  
Estimate Software  
For Builders, Contractors & Designers



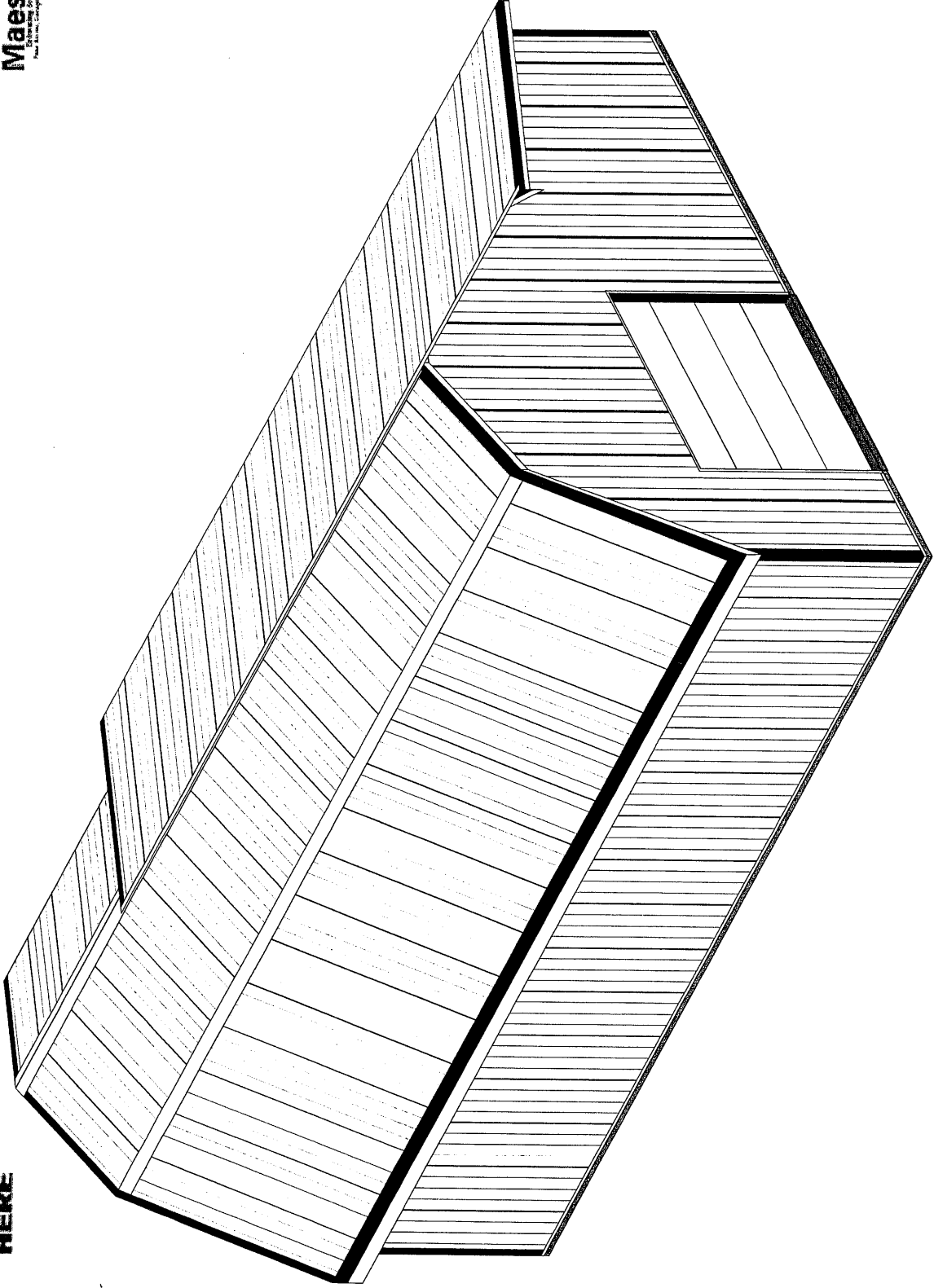
**YOUR LOGO  
HERE**

CONSTRUCTION  
**Maestro**  
Floor & Wall Covering & Drywall



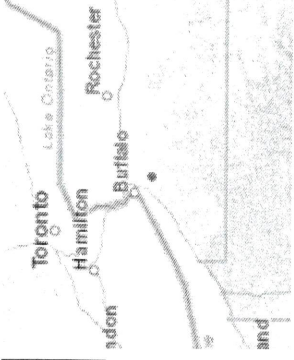
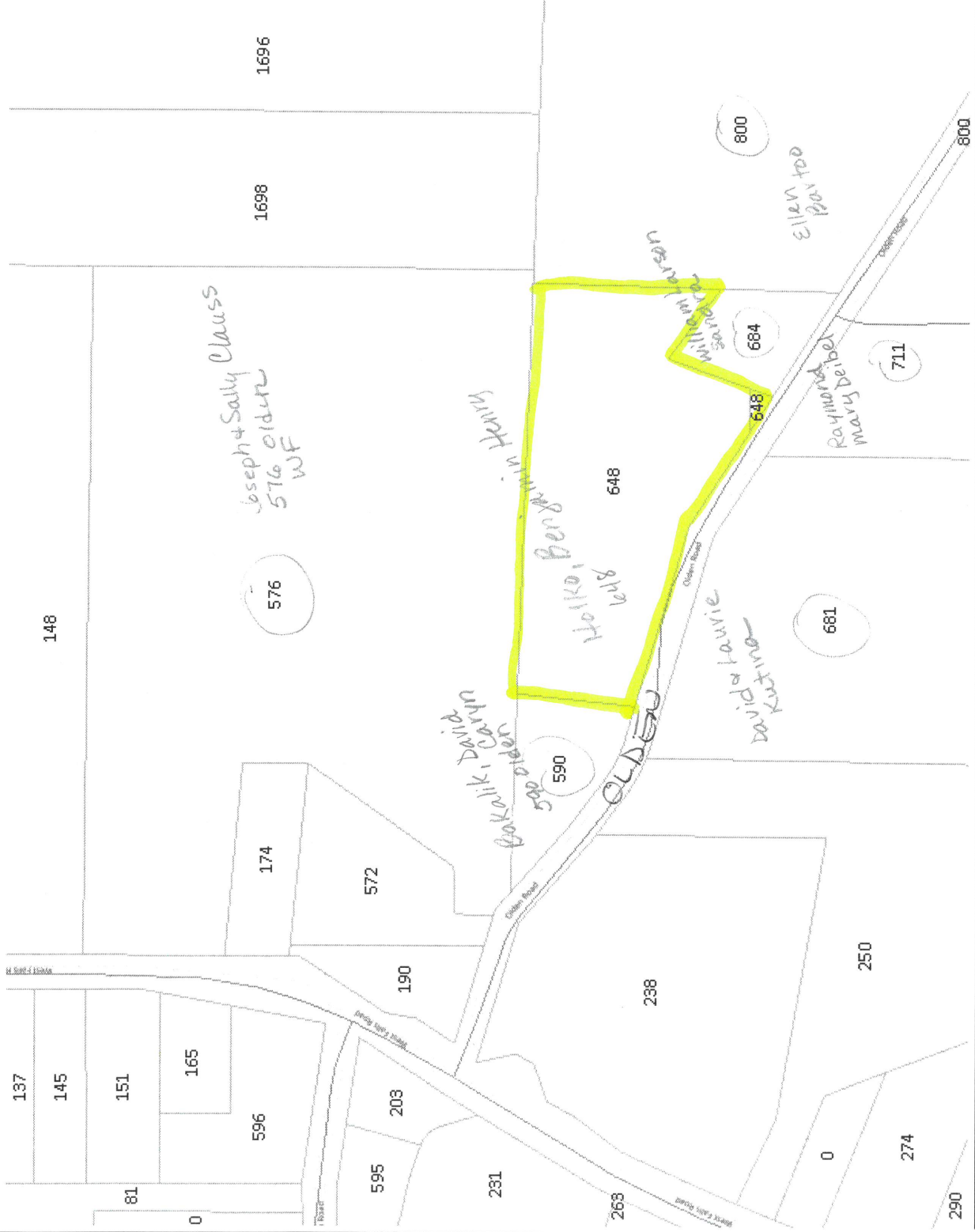
**YOUR LOGO  
HERE**

Construction  
**Maestro**  
Estimating Software  
and Business Management System





# Erie County On-Line Mapping Application



- Legend**
- Parcels
  - Streets and Highways
    - Interstate
    - Primary State Road
    - Secondary State Road
    - County Road
    - Local Road

1341

This map is a user generated static output from an Internet mapping site and is for reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.

**ERIE COUNTY**  
**DEPARTMENT OF ENVIRONMENT & PLANNING**  
**OFFICE OF GIS**

0 0.07 0.1 Miles

WGS 1984 Web Mercator Auxiliary Sphere  
 THIS MAP IS NOT TO BE USED FOR NAVIGATION



1: 4,514