



CASE NO. 1372

DATE OF HEARING 12/17/2020

Town of Aurora Zoning Board of Appeals  
575 Oakwood 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 CHARZ VANCE  
Address 1963 DAVIS RD  
City WEST FALLS State NY ZIP 14170  
Phone 716 6 ax \_\_\_\_\_ Email \_\_\_\_\_  
Interest in the property (ex: owner/purchaser/developer) \_\_\_\_\_

#### 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 1963 DAVIS RD.  
SBL# 199.03-1-32  
Property size in acres .30 Property Frontage in feet 131.4  
Zoning District R2 Surrounding Zoning R2/B2  
Current Use of Property Residential / Comm.

#### IV. REQUEST DETAIL

(check all that apply)

Variance from Ordinance Section(s) # 116-8.2 F(2)  
 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

CHAZ VANCE  
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 6<sup>th</sup> day of November in the year 2020 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) **SHERYL A. MILLER**  
Reg. #01MI6128663  
Notary Public, State of New York  
Qualified In Erie County  
Commission Expires June 13, 2021

Office Use Only: Date received: 11/10/2020 Receipt #: 369591

Application reviewed by: [Signature]

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)

I'D LIKE A SHED ALIGNED WITH THE EXISTING SERVICE DRIVEWAY, WHICH IS A PRODUCT OF NECESSARY PARKING SPACES RELATIVE TO THE BUILDING. THIS WILL SERVE TO INCREASE PRIVACY FOR BOTH MYSELF AND MY NEIGHBORS. THIS ALSO PRESERVES THE SMALL AMOUNT OF OPEN BACKYARD, AND WORKS WITH FUTURE LANDSCAPING PLANS. OVERALL REDUCING EYESORES AND INCREASING ORDER.

**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)



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



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

## TOWN OF AURORA

Aurora Municipal Center  
575 Oakwood Avenue, East Aurora, NY 14052  
[www.townofaurora.com](http://www.townofaurora.com)

### TOWN COUNCIL MEMBERS

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TOWN JUSTICE  
Jeffrey P. Markello  
Anthony DiFilippo IV

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

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

November 9, 2020

Charles Vance  
1963 Davis Rd  
West Falls, NY 14170

The Building Department has reviewed your request for a shed at your property. The request has been denied because it fails to meet the requirements of the Town of Aurora Code for the Residence 2 (R2) zoning district in which it is located.

Section 116-8.2F(2)

Required: Side yard accessory buildings: a distance equal to the mean height of the building, but not less than 10'

Requested: 4' side yard setback

Variance: 6.5' since the mean height is 10.5'

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 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 the office at 652-7591.

Sincerely,

Elizabeth Cassidy  
Asst. Code Enforcement Officer

*This institution is  
an equal opportunity  
provider and  
employer*

## 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.: ZR-20-513

Received: 11/25/20

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

<b>1. Name of Municipality:</b>	<u>Town of Aurora</u>		
<b>2. Hearing Schedule:</b>	<b>Date</b> <u>12/17/2020</u>	<b>Time</b> <u>7:00pm</u>	<b>Location</b> <u>575 Oakwood Ave., E. Aurora</u>
<b>3. Action is before:</b>	<input type="checkbox"/> Legislative Body	<input checked="" type="checkbox"/> Board of Appeals	<input type="checkbox"/> Planning Board
<b>4. Action consists of:</b>	<input type="checkbox"/> New Ordinance	<input type="checkbox"/> Rezone/Map Change	<input type="checkbox"/> Ordinance Amendment
	<input type="checkbox"/> Site Plan	<input checked="" type="checkbox"/> Variance	<input type="checkbox"/> Special Use Permit
			<input type="checkbox"/> Other
<b>5. Location of Property:</b>	<input type="checkbox"/> Entire Municipality	<input checked="" type="checkbox"/> Specific as follows	<u>1963 Davis Road, PO W. Falls, Town of Aurora, NY</u>
<b>6. Referral required as Site is within 500' of:</b>	<input type="checkbox"/> State or County Property/Institution	<input type="checkbox"/> Municipal Boundary	<input type="checkbox"/> Farm Operation located in an Agricultural District
	<input type="checkbox"/> Expressway	<input type="checkbox"/> County Road	<input type="checkbox"/> Proposed State or County Road, Property, Building/Institution, Drainageway
<b>7. Proposed change or use: (be specific)</b>	<u>Proposed accessory building closer to side lot line than allowed by Town Code</u>		
<b>8. Other remarks: (ID#, SBL#, etc.)</b>	<u>SBL#199.03-1-32</u>		
<b>9. Submitted by:</b>	<u>Martha L. Librock</u>	<u>11/25/2020</u>	
<u>575 Oakwood Ave., E. Aurora, NY 14052</u>			

### Reply to Municipality by Erie County Division of Planning

Receipt of the above-described proposed action is acknowledged on 11/30/20. 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: Sarah Gatti Date: 12/2/20

# 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: <span style="font-size: 1.2em; font-family: cursive;">CHAR VANCE</span>							
Project Location (describe, and attach a location map): <span style="font-size: 1.2em; font-family: cursive;">SHED</span> <span style="font-size: 1.2em; font-family: cursive;">REAR SOUTHWEST CORNER OF PROPERTY</span>							
Brief Description of Proposed Action: <span style="font-size: 1.2em; font-family: cursive;">INSTALL 8' x 12' x 13' SHED LESS THAN 10' FROM PROPERTY LINE.</span>							
Name of Applicant or Sponsor: <span style="font-size: 1.2em; font-family: cursive;">CHAR VANCE</span>		Telephone: <span style="font-size: 1.2em; font-family: cursive;">716 5</span>					
Address: <span style="font-size: 1.2em; font-family: cursive;">1963 DAVIS RD.</span>		E-Mail:					
City/PO: <span style="font-size: 1.2em; font-family: cursive;">WEST FALLS</span>		State: <span style="font-size: 1.2em; font-family: cursive;">NY</span>	Zip Code: <span style="font-size: 1.2em; font-family: cursive;">14170</span>				
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%; text-align: center;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>	NO	YES	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NO	YES						
<input type="checkbox"/>	<input checked="" type="checkbox"/>						
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><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? _____ 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, are adjoining or near the proposed action: <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" 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							

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<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?	<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: _____	<input checked="" 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 services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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: _____ _____	<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"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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:

Shoreline    Forest    Agricultural/grasslands    Early mid-successional  
 Wetland    Urban    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 plan?

	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?

	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?

	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If Yes, briefly describe:  
GUTTERS AND DOWNSPOUT TO GRADE

18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)?  
If Yes, explain the purpose and size of the impoundment:

	NO	YES
	<input checked="" type="checkbox"/>	<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:

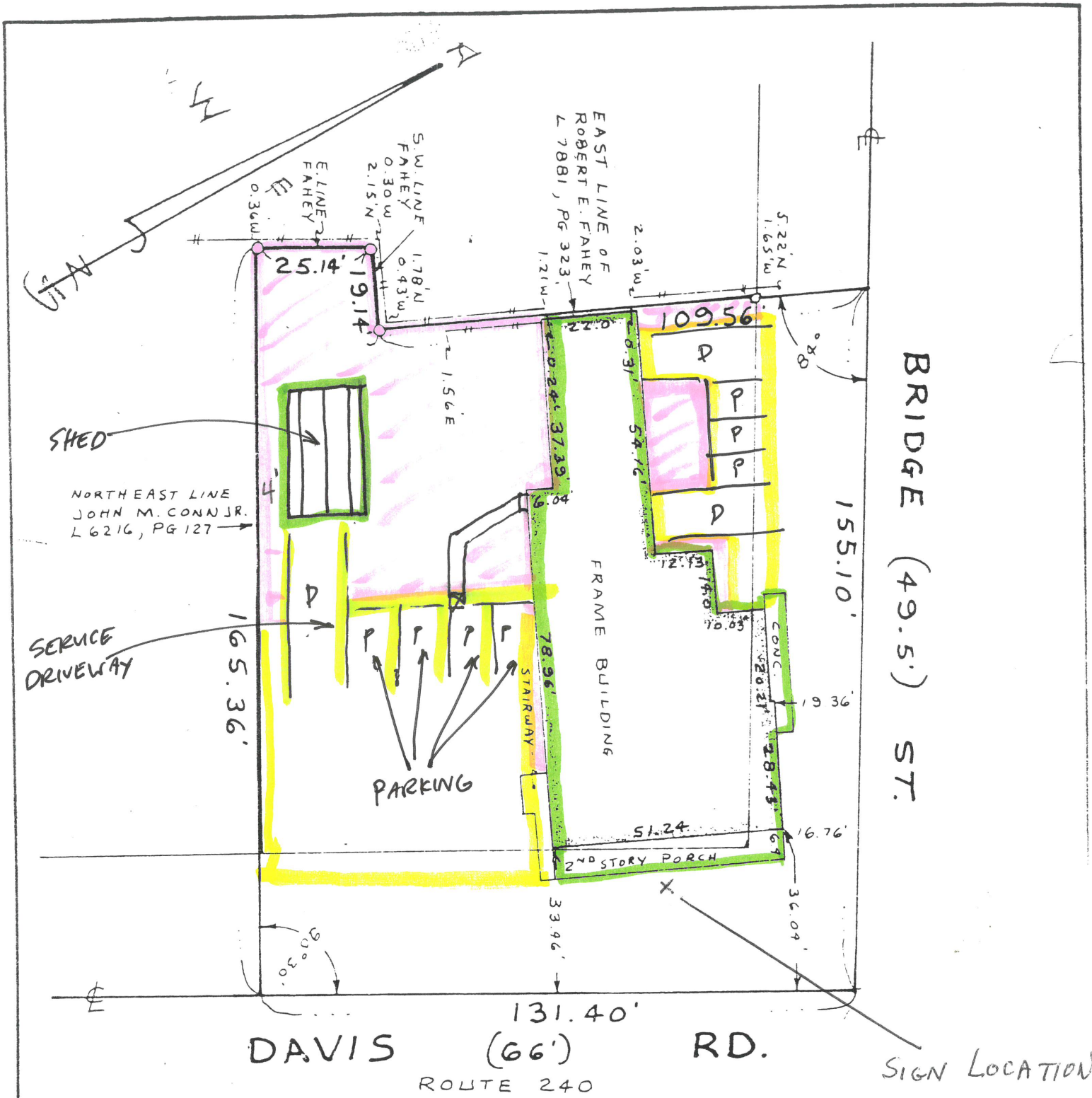
	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Applicant/sponsor/name: CHAZ VANCE Date: 11/6/20  
Signature: [Signature] Title: OWNER



ALTERATION OR ADDITION TO THIS DOCUMENT IS A VIOLATION OF SECTION 7209, PROVISION 2 OF NEW YORK STATE EDUCATION LAW. THIS DOCUMENT VOID UNLESS EMBOSSED WITH NEW YORK STATE LICENSED LAND SURVEYOR'S SEAL, NO. 44611.

TOWN OF AURORA  
DEPT. OF BLDGS.

*Handwritten signature*

LOCATION: Town of Aurora Aurora County, New York State	DATE: July 12, 1999	GORDON A. MECCAY LICENSED LAND SURVEYOR 2558 Colvin Blvd. Tonawanda, N.Y. 14150
	SCALE: 1" = 30'	
BEING: Part of Lot 57 Township 9 Range 6	JOB NO: 34-79	693-5386 LIC NO 44611
	RESURVEY:	