



CASE NO. 1420

DATE OF HEARING 10/20/2022

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 Jacquelyn Andersen
Address 2105 Mill Rd.
City West Falls State NY ZIP 14170
Phone 716-5 Email Zei
Interest in the chaser/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 2105 Mill Rd., West Falls NY 14170
SBL# 186.000-4-39.111
Property size in acres 2.9 Property Frontage in feet 419.90
Zoning District Rural Residential Surrounding Zoning RR/A/RZ/C2
Current Use of Property Primary Residence SFR

IV. REQUEST DETAIL

(check all that apply)
 Variance from Ordinance Section(s) # _____
 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)

Jacquelyn Andersen
Signature of Applicant/Petitioner

Jacquelyn Andersen
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 12th day of September in the year 2022 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.

Sheryl A. Miller
Notary Public

(Notary stamp) **SHERYL A. MILLER**
Reg. #01MI6128663
Notary Public, State of New York
Qualified In Erie County
Commission Expires June 13, 2025

Office Use Only: Date received: 9/14/22 Receipt #: 385979
CR# 1125

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)

I need to build an additional garage for storage and parking for my truck, which will not fit in my existing garage. Intended site for the building as shown on the submitted survey is the only accessible spot on my property. This location is situated in the front, right portion of my yard, which is the reason for this variance. Exhibit A and B show where the building will be located, along with the already existing driveway turnout. Exhibit C, shows tree coverage of the building spot, as it will be almost unseen from the road. Exhibit D, shows the left portion of the yard & our extreme elevations and natural water runoff from the hills and woods behind our home. This side (left) of our home would be impossible to build on, there also is no driveway access. Exhibit E, shows the rear of our home on the right side of the garage. This area again has extreme slopes. Cont.

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: No

(Attach additional pages if needed)

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



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

TOWN OF AURORA

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www.townofaurora.com

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September 14, 2022

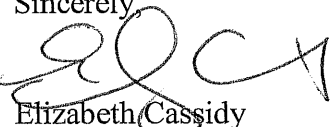
Jacquelyn Anderson
2105 Mill Rd
West Falls, NY 14170

Dear Ms. Anderson:

The Building Department has reviewed request to construct a detached garage at your residence at 2105 Mill Rd. The request has been denied because it fails to meet the code requirements for accessory buildings for the Rural Residential Zoning District.

Section 116-8.4E(4) and 116-18A
Required: No accessory building shall be erected in the front yard.
Requested: Accessory building in the front yard
Variance: Accessory building in the front yard

This letter serves as notice that we have received the application and fee for the Zoning Board of Appeals. You will receive notification from the Town Clerk with the date and time of the next available hearing. If you have any questions, please contact our office at 652-7591.

Sincerely,

Elizabeth Cassidy
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			
Name of Action or Project: 30x40 Garage/Barn			
Project Location (describe, and attach a location map): Front side yard at 2105 Mill Rd. West Falls, NY 14170			
Brief Description of Proposed Action: Construction of 30x40 Pole Barn/Garage.			
Name of Applicant or Sponsor: Jacquelyn Andersen		Telephon [REDACTED]	
		E-Mail: [REDACTED]	
Address: 2105 Mill Rd.			
City/PO: West Falls		State: NY	Zip Code: 14170
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 type="checkbox"/>
			YES <input 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: Aurora Building Permit			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		2.9 acres	
b. Total acreage to be physically disturbed?		0.028 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		2.9 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input checked="" 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			

	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<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"/>
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"/>
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?	NO	YES	<input checked="" type="checkbox"/>
			<input checked="" 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"/>
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ Project does not require a water supply	NO	YES	<input checked="" type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ Project does not require a wastewater treatment facility	NO	YES	<input checked="" 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?	NO	YES	<input checked="" type="checkbox"/>
			<input checked="" 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 checked="" type="checkbox"/>

Exhibit E also shows the well that is located in the back yard. As seen by Exhibit F. Our proposed building location is the most feasible spot. There would be no need to clear any of the forest, like would need to be done if built behind our home. Also, the overall appeal of the garage in the proposed location makes sense, there will be driveway access and the structure will be blocked from most street views.



EXHIBIT A



EXHIBIT B



EXHIBIT C



EXHIBIT D



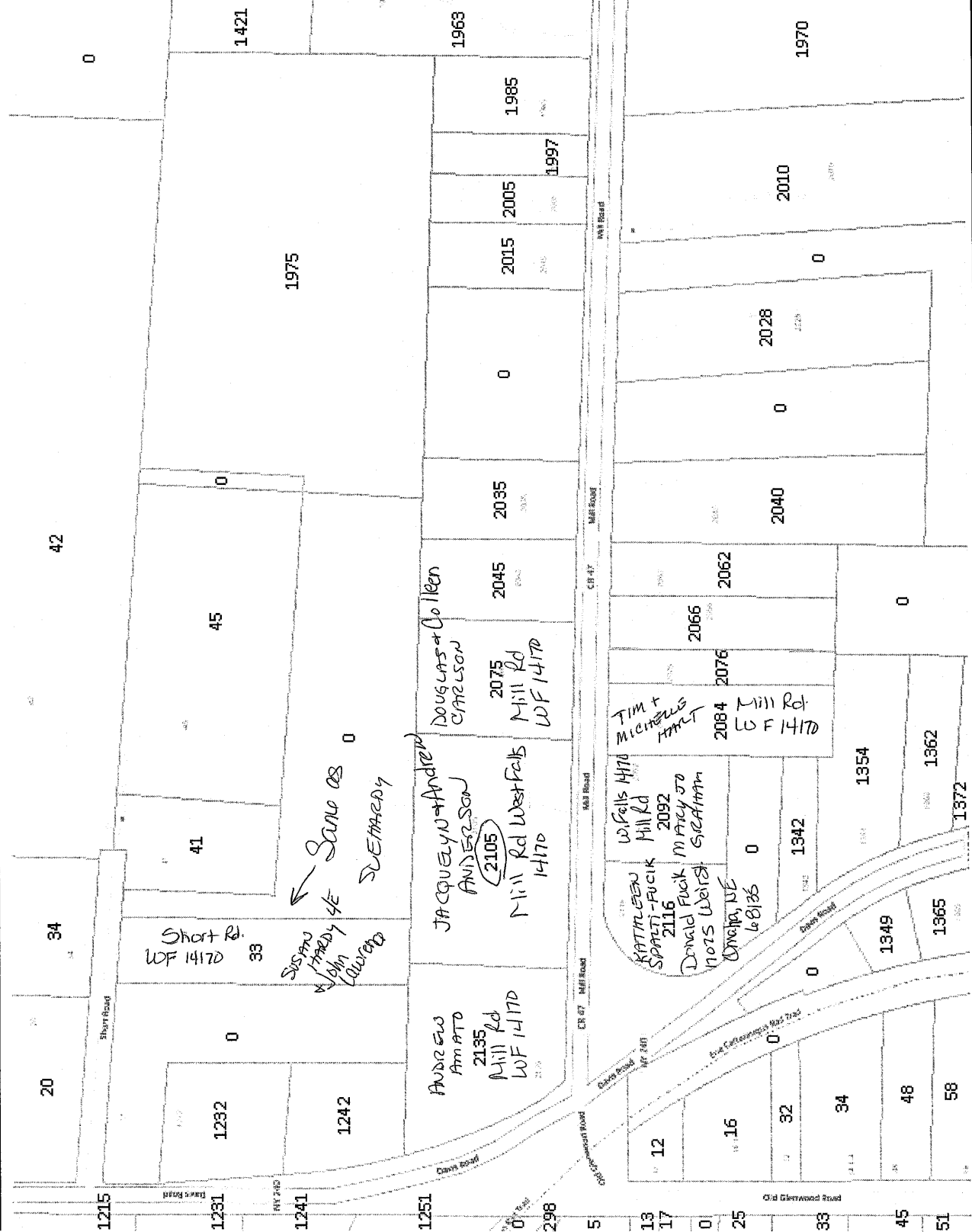
EXHIBIT E



EXHIBIT F

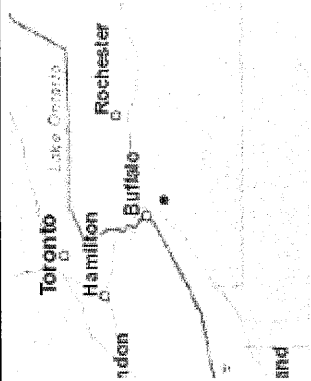


Erie County On-Line Mapping Application



Legend

- Parcels



1: 4,514

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