

TOWN OF AURORA

575 OAKWOOD AVENUE, EAST AURORA, NY 14052
BUILDING DEPARTMENT
(716) 652-7591

MEMO

TO: Supervisor Snyder and Town Board Members

FROM: Elizabeth Cassidy, Code Enforcement Officer

DATE: October 28, 2024

The Building Department has received a Special Use Permit application for a short-term rental at 99 ½ Gypsy Ln (99 Gypsy Ln property address) as per Town Code section 116-8.B(1). Todd Stine, owner of the property, would like to continue renting the carriage house on a short-term basis. There are no physical changes to the property proposed at this time. The property is zoned RR along the road and A behind and the existing carriage house is in the RR District.

Town Code section 116-41A(2) states that the Town Board may take one of the following actions:

- 1-take no action
- 2-request modification and resubmission
- 3-request a site plan application (*not applicable*)
- 4-refer the application to the Planning Board for review and recommendation.

If the Board refers it to Planning Board, a public hearing should be scheduled prior to a decision on SEQR and the application. The application should be sent to Erie County Department of Planning for their review and recommendation due to the proximity of a County highway (Jewett Holmwood Rd).

This is an Unlisted action for purposes of SEQRA.

Thank you
Liz Cassidy

TB: 10/12/24
PB: 12/4/24
PH:
TB:



Town of Aurora Town Board
300 Glead Avenue, East Aurora, New York 14052

Special Use Permit Application Form

I. PROJECT INFORMATION (Applicant/Petitioner):

Business/Project Name: The Carriage House at Rushing Waters
Business/Project Address: 99 1/2 Gypsy Lane East Aurora NY 14052
Applicant Name: Todd Stine
Mailing Address: 99 Gypsy Lane East Aurora NY 14052
City East Aurora State NY ZIP 14052
Phone 716.955.0222 Fax _____ Email todd.stine@eastauroraproperties.ca
Interest in the property (ex: owner/purchaser/developer) owner

II. PROPERTY OWNER INFORMATION (If different than Applicant AND the Owner does not sign below, please submit and original, notarized "Owner Authorization" form - attached):

Property Owner(s) Name(s) _____
If a corporate, please name a responsible party/designated officer: _____
Address _____
City _____ State _____ ZIP _____
Phone _____ Fax _____ Email _____

III. SPECIAL USE AND PROPERTY INFORMATION:

Property Address 99 1/2 Gypsy Lane East Aurora NY 14052
SBL# 164.00-2-13
Describe Special Use requested (use additional pages if needed): Short term rental

Property size in acres 9.5 Property Frontage in feet 611'
Zoning District RR1A Surrounding Zoning RR1A/R2
Current Use of Property Short term rental
Size of existing building(s): 1,700 sf Size of proposed building(s) 1,700 sf
Present/Prior tenant/use: Short term rental
Parking spaces: Existing: 4 Proposed additional spaces: 0 Total #: 4

Proposed water service: public private (well) n/a Is this existing Y/N
 Proposed sanitary sewer: public private (septic) n/a Is this existing Y/N


Hours of operation (if applicable):

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	By Appt.
Hours								

Peak hours: _____
 Number of employees (if applicable): Full-time _____ Part-time _____ Seasonal _____

Upon approval of this application, the applicant intends to apply for: (Check all that apply)
 a. Building Permit _____
 b. Sign Permit _____

IV. SIGNATURE (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. 4)

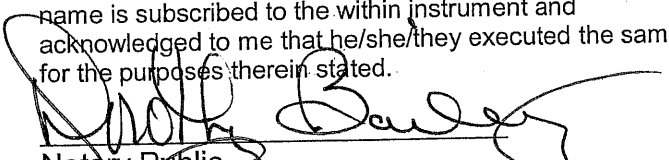


 Signature of Applicant/Petitioner
 Todd Lewis Stone

 Print name of Applicant/Petitioner

State of New York; County of Erie

On the _____ day of _____ in the year _____ 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.



 Notary Public

(Notary stamp)

DOROTHY BAILEY
 Reg #01BA0023544
 Notary Public, State of New York
 Qualified in Erie County
 Commission Expires April 15, 2028

 Office Use Only: Date received: _____ Receipt #: _____

Application reviewed by: _____

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

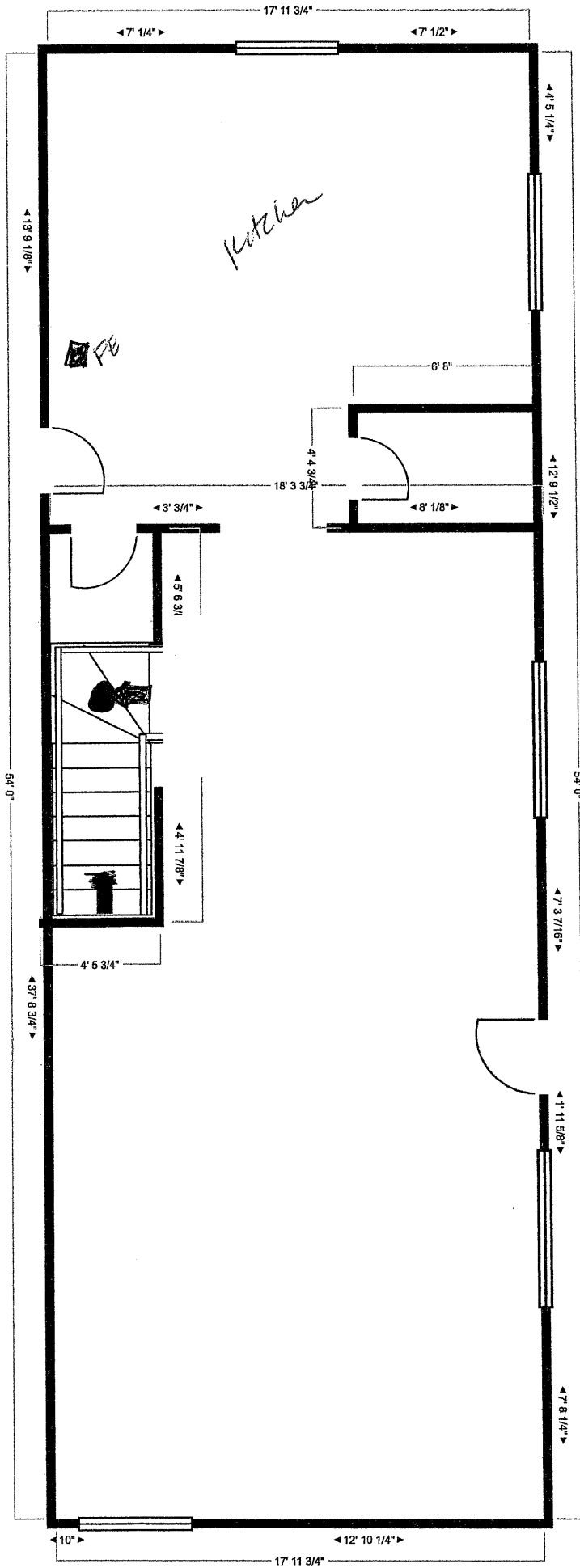
Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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.

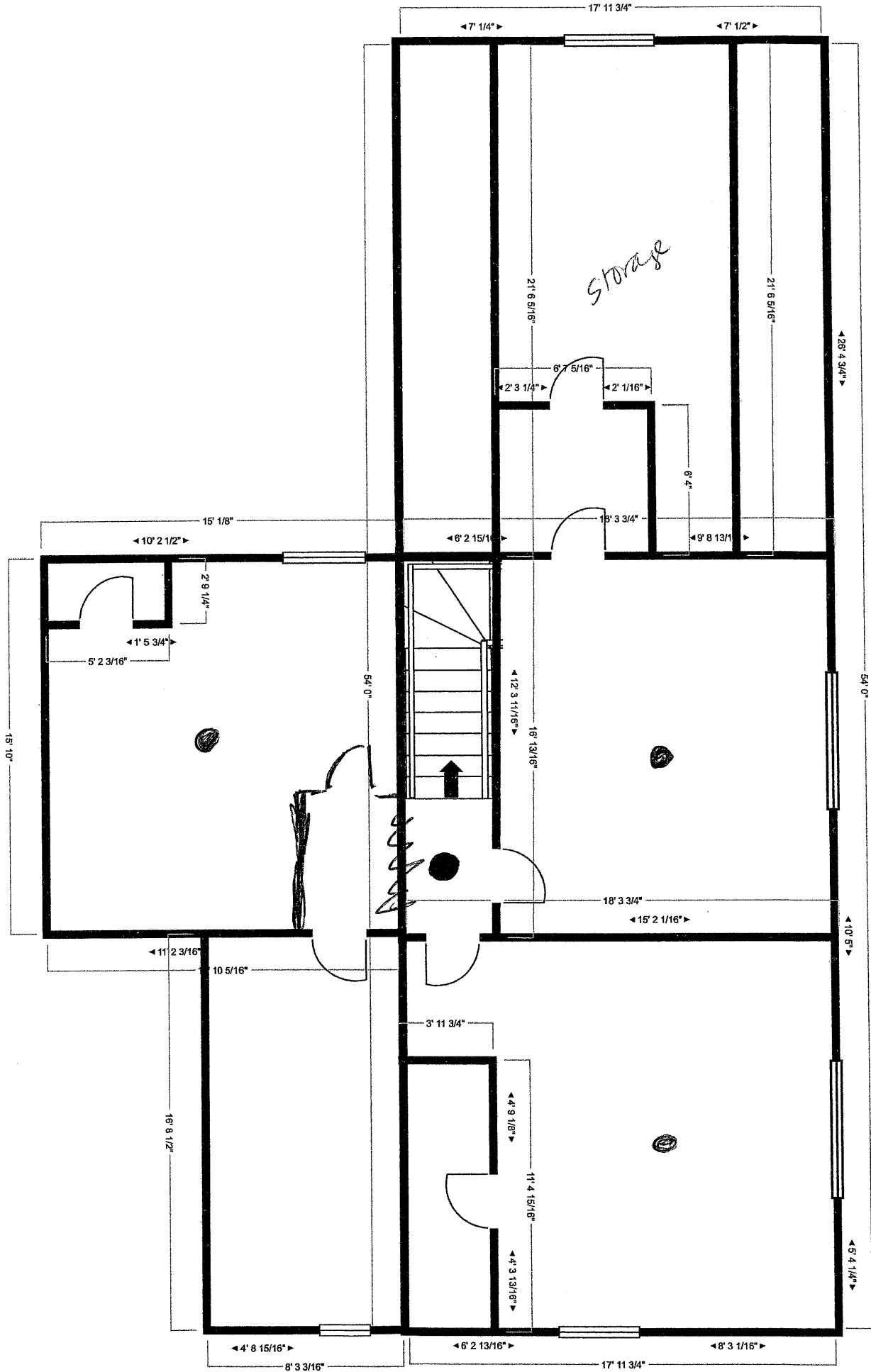
Part 1 - Project and Sponsor Information			
Name of Action or Project: <i>Carriage House at Rushing Waters - short term rental</i>			
Project Location (describe, and attach a location map): <i>99 1/2 Gypsy Lane East Awarua NY 14052</i>			
Brief Description of Proposed Action: <i>Approval for short term rental.</i>			
Name of Applicant or Sponsor: <i>Todd Stine</i>		Telephone: <i>716-955-0222</i>	
		E-Mail: <i>todd.stine@eastawaruaproperties.com</i>	
Address: <i>99 Gypsy Lane</i>			
City/PO: <i>East Awarua NY 14052</i>		State: <i>NY</i>	Zip Code: <i>14052</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 <input checked="" type="checkbox"/>	YES <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: <i>SUP from Town Board</i>		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<i>9.05</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>9.05</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 checked="" type="checkbox"/> Parkland			

<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>Todd Stine</u></p>	<p>Date: <u>10.29.2024</u></p>	
<p>Signature: _____</p>		

Carriage House 1st Floor



Carriage House 2nd Floor



Carriage House Basement

