



CASE NO. 1367

DATE OF HEARING 10/15/2020

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 Aaron/Stephanie Torgalski

Address 2169 Blakeley Road

City East Aurora State NY ZIP 14052

Phone _____ Fax 716-883-0720 Email stepha _____ com

Interest _____ pr/purchaser/developer owner _____

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

Property Owner(s) Name(s) same as above

Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____ Email _____

III. PROPERTY INFORMATION

Property Address 2169 Blakeley Road East Aurora NY 14052

SBL# Lot 12, Township 9, Range 6 188.00-3-9

Property size in acres 1 Property Frontage in feet 97

Zoning District RR Surrounding Zoning RR / A

Current Use of Property residential

IV. REQUEST DETAIL

(check all that apply)

Variance from Ordinance Section(s) # ~~116-8.4 RR1&G~~

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)

Stephanie Torgalski
Signature of Applicant/Petitioner

Stephanie Torgalski
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 27 day of August 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.

Susan Ruiz
Notary Public

(Notary stamp) *Susan Ruiz*
Notary Public, State of New York
Qualified in Erie County
Comm. No. 01RU6240686
My commission expires 5-2-23

Office Use Only: Date received: 9/8/20 Receipt #: 364479 \$100.00

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)

The reason for the variance is for a larger garage height, and garage door height, it gives us the option for more square footage for use in the future for storage options. We also plan on having a loft up top for optimal space, somewhere where our daughter can hang out when she is older with her friends. The garage will be used for a workshop, personal car parking and other storage. We plan on this being our forever home, and eventually expanding our family which leads to the need for additional storage for toys, strollers, car seats, etc. The extra height in the garage will give us the opportunity to live more comfortably with the additional space for storage.

TO BE COMPLETED ONLY WHEN A USE VARIANCE IS BEING REQUESTED: not applicable

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 statement).
Financial Evidence Provided _____ 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/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 your 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:

2169 Blakeley Road East Aurora NY 14052....., identified as Tax Map (SBL)# Lot 12, Township 9, Range 6
(address)

hereby authorizes Town of Aurora..... 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.

Stephanie Torgalski
Owner (print)

08/27/2020
Date

Stephanie Torgalski
Owner (signature)

STATE OF NEW YORK)
 SS
COUNTY OF ERIE)

On this 27 day of August, 2020, before me, the undersigned, a notary public in and for said state, personally appeared Stephanie Torgalski, 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.

Susan Ruiz
Notary Public

Susan Ruiz
Notary Public, State of New York
Qualified in Erie County
Comm. No. 01RU6240586
My commission expires 5.2.23

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



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

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

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historian@townofaurora.com

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NYS Relay Number:
1(800) 662-1220

*This institution is
an equal opportunity
provider and
employer.*

September 8, 2020

Aaron & Stephanie Torgalski
2169 Blakeley Rd
East Aurora, NY 14052

The Building Department has reviewed your request construct a pole barn at your property. The request has been denied because it fails to meet the requirements of the Town of Aurora Code for the Rural Residential (RR) zoning district in which it is located.

Section 116-8.4B(2)
Required: Maximum mean height for accessory building 15 feet
Requested: Mean height of 19'10"
Variance: 4'10"

Section 116-17D
Required: In any R district, the permitted accessory use shall not include a private garage with vehicular entrance headroom more than nine feet high.
Requested: 2-10' overhead doors
Variance: 1' for each door

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

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			
Aaron and Stephanie Torgalski			
Name of Action or Project:			
New Garage Accessory Building			
Project Location (describe, and attach a location map):			
2169 Blakeley Road East Aurora NY 14052			
Brief Description of Proposed Action:			
We are looking to have the existing garage structure demolished and replaced with a new structure erected by Morton Building			
Name of Applicant or Sponsor:		Telephone	
Stephanle Torgalski		E-Mail: st	
Address:			
2169 Blakeley Road			
City/PO:		State:	Zip Code:
East Aurora		NY	14052
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
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.			YES
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO
If Yes, list agency(s) name and permit or approval:			YES
3. a. Total acreage of the site of the proposed action? _____ 1 acres			
b. Total acreage to be physically disturbed? _____ .04 acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 1 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 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? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	<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? 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 type="checkbox"/>	
	<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: _____ _____	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 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 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"/>	
	<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 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? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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: <u>Stephanie Torgalski</u> Date: <u>08/28/2020</u>		
Signature: <u><i>Stephanie Torgalski</i></u> Title: <u>Owner</u>		

OFFICE: ALBANY, NY
JOB NO.: 07-10000

ALIED DESIGN ARCHITECTURAL & ENGINEERING GROUP, P.C.
100 S. FRESHMAN TOWER 110 HOBOKEN, N.J. 07030
PHONE NUMBER: 908-524-1100
ESTABLISHED: 1978

DATE:	12/20/2020
DATE:	12/20/2020
DATE:	12/20/2020
DATE:	12/20/2020
DATE:	12/20/2020
DATE:	12/20/2020



SCALE: NOTED
SHEET NO.
54 OF 56

DESIGN AND EXPLANATORY NOTES
1. EXTERIOR FINISH AND WINDOW LOCATIONS ARE SHOWN RESULTING FROM THE CENTER FACE OF THE WALLS AND AROUND THE CENTER OF BEDROOM AND WINDOW UNITS. VERIFY ALL DOOR, WINDOW, SLOTTED AND SILLING LOCATIONS WITH THE OWNER.





