



CASE NO. 1415

DATE OF HEARING 9/15/22

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 chickens USE VARIANCE INTERPRETATION

II. APPLICANT/PETITIONER

Applicant's Name Tracy Crewson
Address 5 Mary James Ln
City East Aurora State NY ZIP 14052
Phone [redacted] Fax [redacted] Email [redacted]@gmail.com
Interes [redacted] ner/purchaser/developer) [redacted]

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 5 Mary James Ln
SBL# 104.116-4-33.21
Property size in acres 1.4 Property Frontage in feet 240.96
Zoning District R1 Surrounding Zoning R1 / Village SFR
Current Use of Property Residential

IV. REQUEST DETAIL

(check all that apply)

Variance from Ordinance Section(s) # 116-19A; 116-8.1E(4) & 116-18A(1); 116-8.1E(1)
 Special Use Permit for: chickens
 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 of Applicant/Petitioner

Tracy Crewson
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 20th day of July 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.


Notary Public
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: 8/8/22 Receipt #: 385917 Sam
Cash

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 _____

Elizabeth Cassidy

From: Lee Crewson <lecrew@yahoo.com>
Sent: Friday, August 5, 2022 4:47 PM
To: Elizabeth Cassidy
Cc: Crewsontracy
Subject: 5 Mary Janes Lane - Additional Variance

Sending on behalf of Tracy Crewson

Please confirm receipt.

Good Afternoon Mrs. Cassidy,
In response for your request for additional details I submit the following information:

- 1.) Mary Janes Lane is a shared driveway running roughly North-South. Our home is located on the West side of the street and faces due East to include our front door and driveway. With this orientation, the Southern portion of the property is/was considered the side yard.
- 2.) The shed was relocated to its current location during the 2017-18 addition/renovation of our home. This was shown on the survey which was submitted and reviewed as part of the certificate of occupancy requirements. The shed was moved to this location as it was directly behind our neighbor's barn and completely obstructed from view of the South neighbor.
- 3.) We have selected this location for the chicken coop for multiple reasons:
 - a. This area will provide shade for the birds.
 - b. This is the only location in our yard where the coop could be placed that will completely obstruct the coop from view from all neighbors.
 - c. This area is directly behind our South neighbor's barn utilizing a significant barrier to closest home.
- 4.) The coop will be placed approximately 8' from the fence to be in line with, and immediately, adjacent to the shed which maintain the visual barrier to the East.

Please feel free to let me know if there are any additional questions.

Thank you for your time and consideration,

Tracy Crewson
5 Mary Janes Lane

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 would like a small chicken coop
Built off the side of my shed for
6 chickens no roosters.

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



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

TOWN OF AURORA

Aurora Municipal Center
575 Oakwood Avenue, East Aurora, NY 14052
www.townofaurora.com

August 8, 2022

TOWN COUNCIL MEMBERS

Charles D. Snyder
csnyder@townofaurora.com

Luke Wochensky
lwochensky@townofaurora.com

James F. Granville
jgranville@townofaurora.com

Joseph M. McCann
jmccann@townofaurora.com

SUPT. OF HIGHWAYS
David M. Gunner
(716) 652-4050
highway@townofaurora.com

CODE ENFORCEMENT
OFFICER
Elizabeth Cassidy
(716) 652-7591
building@townofaurora.com

ASSESSOR
Roger P. Pigeon
assessor@townofaurora.com
(716) 652-0011

DIR. OF RECREATION
Christopher Musshafen
(716) 652-8866
chris@townofaurora.com

TOWN ATTORNEY
Brigid M. Maloney

TOWN JUSTICE
Jeffrey P. Markello
Anthony DiFilippo IV

HISTORIAN
Robert L. Goller
(716) 652-7944
historian@townofaurora.com

FAX: (716) 652-3507

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

Tracy Crewson
5 Mary Janes Ln
East Aurora, NY 14052

Dear Tracy:

The Building Department has reviewed request to keep chickens at your residence. The request has been denied because it fails to meet the code requirements for chickens and an accessory building in the Residence-1 (R1) Zoning District in which it is located.

Section 116-19A

Required: No bees, cattle, horses, goats, sheep, swine, mink, fox or other commercial fur bearing animals, chickens, ducks, geese, pigeons or other fowl shall be kept, harbored or maintained in any R-1, R-2 or R-3 District. The Zoning Board of Appeals may grant temporary or permanent permission to keep chickens on such conditions it may require.

Requested: 6 chickens, no rooster in an R-1 District

Variance: 6 chickens, no rooster

Section 116-8.1E(4) & 116-18A(1)

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

Section 116-8.1E(1)

Required: Front yard setback a minimum of 75' from the street ROW

Requested: 8' front yard setback for an accessory building

Variance: 67' variance

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,

A handwritten signature in black ink, appearing to read "Elizabeth Cassidy".

Elizabeth Cassidy
Code Enforcement Officer

**SITE PLAN OR ZONING REFERRAL TO COUNTY OF ERIE, N.Y.
AND REPLY TO MUNICIPALITY**

Submit this form with full statement of proposed action (as described in GML 239-m(c)) at www.Erie.gov/IRonline, OR mail a hard copy (retain a copy for your files) to: Erie County Division of Planning, 95 Franklin Street, Room 1053, Buffalo, N.Y., 14202

DO NOT WRITE IN THIS SPACE

Case No.: _____

Postmark/Delivery Date: _____

The proposed action described herein is referred in accordance with the provisions of NYS General Municipal Law §239 l - nn. A Municipal Referral Map is available to help determine whether an applicable action is subject to referral.

Description of Proposed Action

1. Name of Municipality: Town of Aurora

§239-m(4)(b) provides that the county shall have 30 days after receipt of a full statement of the proposed action to reply. If the county fails to reply within such period, the referring body may take final action. However, any county reply received after 30 days but 2 or more days prior to final action by the referring body shall be subject to §239-m(5). The referring body shall file a report of its final action with the county within 30 days per §239-m(6).

2. Hearing Schedule: **Date** 09/15/2022 **Time** 7:00 pm **Location** 575 Oakwood Ave., EA

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 Address: 5 Mary Janes Lane

5a. S.B.L. of Property: 164.16-4-33.21 East Aurora, NY

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

7. Proposed change or use: Chickens and chicken coop in R Zone require special use permit and
(specify the action, such as the scope of variances or site plans) accessory building in front yard and setback not allowed by code.

8. Other remarks: _____

9. Submitted by: Martha L. Librock **Email:** townclerk@townofaurora.com

10. Return Address: 575 Oakwood Avenue, 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. Comment on proposed action is attached hereto.
3. The proposed action is subject to review; Recommendation on Proposed Action is attached hereto.
4. No Recommendation; proposed action has been reviewed and determined to be of local concern.

By the Division of Planning: _____ **Date:** _____

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: Chicken Coop			
Project Location (describe, and attach a location map): near Shed			
Brief Description of Proposed Action: Build chicken coop with a run 16x8			
Name of Applicant or Sponsor: Tracy Crewson	Telephone: 71	E-Mail: 24@gmail.com	
Address: 5 Mary James Ln			
City/PO: East Aurora	State: NY	Zip Code: 14052	
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	YES
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:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? 1.4 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 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			

5. Is the proposed action.	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" 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?	NO	YES	
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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies:			
_____	<input type="checkbox"/>	<input type="checkbox"/>	

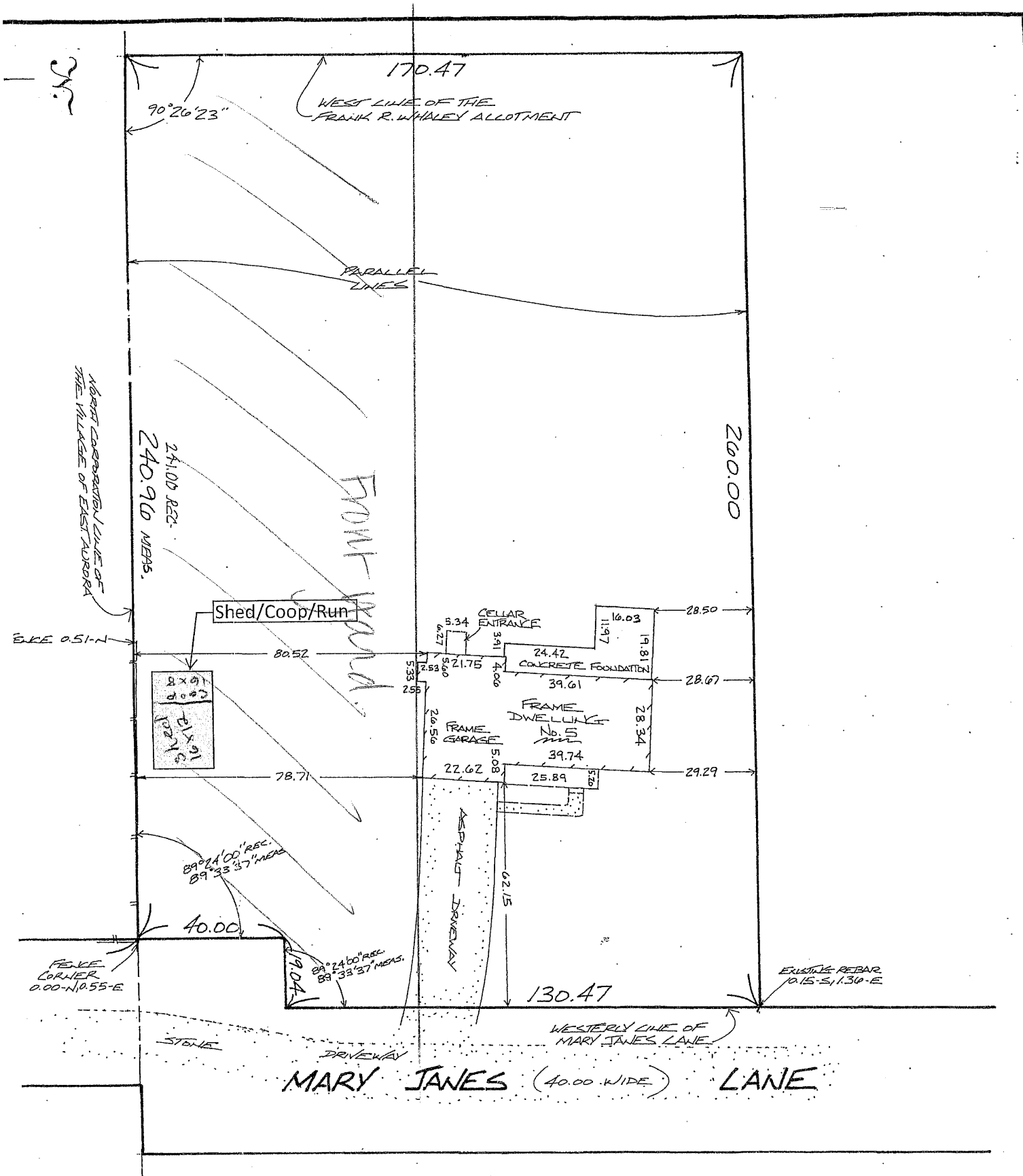
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A

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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

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 checked="" 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,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
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>Tracy Crewson</u> Date: <u>7/18/22</u> Signature: <u>[Signature]</u> Title: <u>Home owner</u>		

PRINT FORM



D COMPANY'S SURVEY
 State of New York,

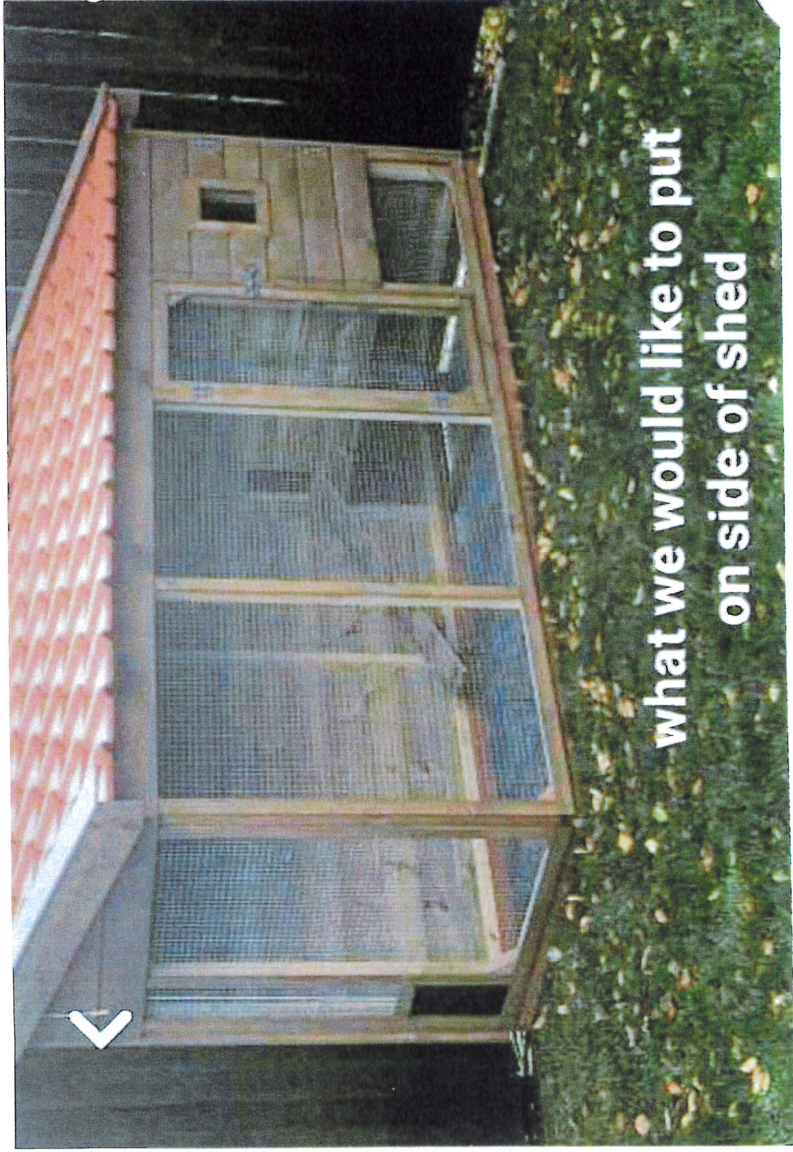
New York State Education Law,
 may be revealed by an
 Drawing Scale: 1" = 25'

MARSHALL L. MILL PLS
 KRAUSE AND GANTZER
 LAND SURVEYORS
 13 OLEAN STREET
 EAST AURORA
 NEW YORK, 14052



Feet	Inches	Feet	Inches
0.08	1 inch	0.58	7 inches
0.17	2 inches	0.67	8 inches
0.25	3 inches	0.75	9 inches
0.33	4 inches	0.83	10 inches
0.42	5 inches	0.92	11 inches
0.50	6 inches	1.00	12 inches

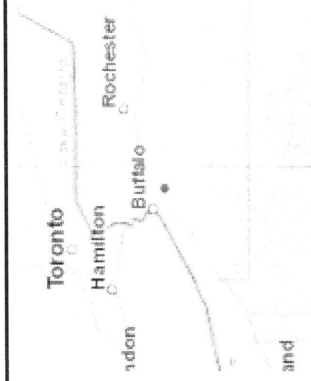
nb. 1167, 013 LL 7095



Erie County On-Line Mapping Application



Legend
Parcels



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 0.04 0.1 Miles
WGS_1984_Web_Mercator_Auxiliary_Sphere
THIS MAP IS NOT TO BE USED FOR NAVIGATION

1: 2,257

