

\$100



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

### Special Use Permit Application Form

#### I. PROJECT INFORMATION (Applicant/Petitioner):

Business/Project Name: Alpine Storage LLC  
 Business/Project Address: 196 Ellicott Road West Falls, NY 14170  
 Applicant Name: Richard Mund  
 Mailing Address: P.O. Box 535  
 City West Falls State NY ZIP 14170  
 Phone 716-863-0979 Fax \_\_\_\_\_ Email Alpinestorageunits@gmail.com  
 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) Richard + Nadine Mund  
 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 196 Ellicott Road West Falls, NY 14170  
 SBL# 186.00-1-42.2  
 Describe Special Use requested (use additional pages if needed):  
Self Storage Building

Property size in acres 2 Property Frontage in feet 350'  
 Zoning District C3 Surrounding Zoning C3  
 Current Use of Property Self Storage Facility  
 Size of existing building(s): 9850 sf Size of proposed building(s) 4800 sf  
 Present/Prior tenant/use: Self Storage  
 Parking spaces: Existing: NA Proposed additional spaces: NA Total #: \_\_\_\_\_

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 )

Richard J. Mond  
 Signature of Applicant/Petitioner

Richard J. Mond  
 Print name of Applicant/Petitioner

State of New York; County of Erie

On the 16 day of August in the year 2023 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.

Morgan A. Eaton  
 Notary Public

(Notary stamp)

**Morgan A Eaton**  
 Notary Public, State of New York  
 Registration No. 01EA6365129  
 Qualified In Erie County  
 My Commission Expires October 2, 2025

Office Use Only: Date received: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Application reviewed by: \_\_\_\_\_

Town of Aurora  
300 Glead Avenue  
East Aurora, NY 14052  
www.townofaurora.com

**Special Use Permit  
Application  
Owner Authorization**

The undersigned, who is the owner of the premises know as: Hipine Storage LLC  
196 Elliecot Road West Falls N.Y., identified as Tax Map (SBL)#.....  
(address)  
hereby authorizes Richard Mund to bring an application for a special use permit  
before the Town of Aurora Town Board 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.

Richard J. Mund  
Owner (print)

8/15/23  
Date

[Signature]  
Owner (signature)

STATE OF NEW YORK )  
  ) SS  
COUNTY OF ERIE        )

On this 16 day of August, 2023 before me, the undersigned, a notary public in and for said state,  
personally appeared Richard J. Mund, 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.

Laurie H. Monin  
Notary Public

LAURIE H. MONIN  
Notary Public, State of New York  
Registration No. 01MO6304887  
Qualified in Erie County  
Commission Expires June 02, 2026

## 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>Alpine Storage LLC Construct New Storage building</i>			
Project Location (describe, and attach a location map): <i>Construct 40' x 120' Self Storage Unit 196 Elliott Road W. Falls</i>			
Brief Description of Proposed Action: <i>Construct 40' x 120' Self Storage Building</i>			
Name of Applicant or Sponsor: <i>Richard Mond</i>		Telephone: <i>716-863-0979</i>	
		E-Mail: <i>alpinestorageunits@gmail.com</i>	
Address: <i>7048 Center St.</i>			
City/PO: <i>W. Falls</i>		State: <i>NY</i>	Zip Code: <i>14170</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 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:			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<u>  2  </u> acres	
b. Total acreage to be physically disturbed?		<u>  .4  </u> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>  2  </u> acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input checked="" type="checkbox"/> Industrial <input checked="" 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?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) 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 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? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" 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 site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	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? 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"/>	
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 checked="" type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input 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 plain?	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? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	NO	YES	
	<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES		
Natural Runway Surrounding Property			

<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>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<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>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<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>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p><b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor name: <u>Richard Mund</u> Date: <u>8/15/23</u>          Signature: <u>[Signature]</u></p>		





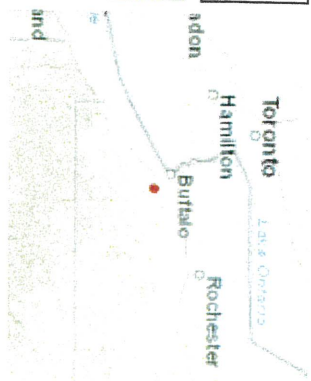
# Erie County On-Line Mapping Application



WGS\_1984\_Web\_Mercator\_Auxiliary\_Sphere  
THIS MAP IS NOT TO BE USED FOR NAVIGATION

**ERIE COUNTY**  
**DEPARTMENT OF ENVIRONMENT & PLANNING**  
**OFFICE OF GIS**

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.



**Legend**  
□ Parcels

1: 4,514

