



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

T-02-DAR-04-23

Review Date

4/13/2023

Municipality
Board Name
Applicant's Name
Referral Type
Variance(s)
Description:

DARIEN, T.

PLANNING BOARD

Jacob Dollard

Special Use Permit

Special Use Permit to construct and operate three teepees as short-term rental units.

Location
Zoning District

9940 Alleghany Rd. (NYS Rt. 77), Darien

Low Density Residential (LDR) District

PLANNING BOARD RECOMMENDS:

APPROVAL WITH MODIFICATION(S)

EXPLANATION:

The required modification is that the applicant take measures, acceptable to the Town Planning Board, that discourages pedestrian traffic to the Darien Lake Theme Park as there are no safe pedestrian facilities or crosswalks on NYS Rt. 77. With this required modification, the proposed short-term rentals should pose no significant county-wide or inter-community impact. It is recommended that the applicant submits the enclosed application for 9-1-1 Address Verification to the Genesee County Sheriff's Office to ensure that addresses are assigned to the proposed structures that meet Enhanced 9-1-1 standards.

Director

April 13, 2023

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:

GENESEE COUNTY DEPARTMENT OF PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 547-2274

DEPARTMENT USE ONLY:

GCDP Referral # T-02-DAR-04-23



*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept. of Planning
3/25/2023

Required According to:
GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N
(Please answer ALL questions as fully as possible)

1. REFERRING BOARD(S) INFORMATION

Board(s) Town of Darien Planning Board

Address 10569 Alleghany Road

City, State, Zip Darien Center, NY 14040

Phone (585) 547-2274 Ext. 1026

2. APPLICANT INFORMATION

Name Jacob Dollard

Address 810 Mammoth Road

City, State, Zip Alden, NY 14004

Phone (585) 547-9476 Ext. _____ Email jakedollard2@yahoo.com

MUNICIPALITY: City Town Village of Darien

3. TYPE OF REFERRAL: (Check all applicable items)

- Area Variance
- Use Variance
- Special Use Permit
- Site Plan Review

- Zoning Map Change
- Zoning Text Amendments
- Comprehensive Plan/Update
- Other: _____

- Subdivision Proposal
- Preliminary
- Final

4. LOCATION OF THE REAL PROPERTY PERTAINING TO THIS REFERRAL:

A. Full Address 9940 Alleghany Road, Corfu, NY 14036

B. Nearest intersecting road Sumner Road

C. Tax Map Parcel Number 6.-1-10.12

D. Total area of the property 6.7 acres Area of property to be disturbed Less than an acre

E. Present zoning district(s) LDR

5. REFERRAL CASE INFORMATION:

A. Has this referral been previously reviewed by the Genesee County Planning Board?
 NO YES If yes, give date and action taken _____

B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law
Article VII Section 701 Sub C Par. 6

C. Please describe the nature of this request He is requesting a small campground

6. ENCLOSURES – Please enclose copy(s) of all appropriate items in regard to this referral

- Local application
- Site plan
- Subdivision plot plans
- SEQR forms
- Zoning text/map amendments
- Location map or tax maps
- Elevation drawings
- Agricultural data statement
- New or updated comprehensive plan
- Photos
- Other: Highway work permit and site plan information

7. CONTACT INFORMATION of the person representing the community in filling out this form (required information)

Name Gwen Yoder Title PBZBA Clerk Phone (585) 547-2274 Ext. 1026

Address, City, State, Zip 10569 Alleghany Road, Darien Center, NY 14040 Email pbzba@townofdarienyny.com

TOWN OF DARIEN APPLICATION FOR ZONING PERMIT (revised 2/01/2021)

Today's Date: 03/14/2023 Application Number: PB-03-23
 Owner's Name: Jacob Dollard Tax Map #: 6-1-10-12
 Owner's Phone: 716-609-2975 Owner's 2nd Phone: 585-547-9476
 Owner Address: 810 Mammoth RD Alder NY 14004
 Address of Project: 9940 Allegheny RD Corfu NY 14036
 Owner's Email: Jacobdollar2@yahoo.com Builder Email: _____
 Builder Contact: _____ Builder Phone: _____

INSTRUCTIONS:

Fill out the application completely. Submit the application & required attachments to the Zoning Enforcement Officer (ZEO) prior to commencing this project or use.

***THIS APPLICATION IS NONTRANSFERABLE AND IS VALID FOR ONE YEAR PERIOD ONLY**

- Zoning District property located in: RESIDENTIAL (Low or Medium Density)
 Industrial Commercial Recreational
- Permit Application for: New Construction Demolition Addition Alteration Relocation
 Roof Solar Panels Generator Swimming Pool Signs Fence Kennel
 SPECIAL USE VARIANCE SITE PLAN HOME OCCUPATION
- Is this parcel: Corner Lot Water District Sewer District
- Dimensions of this lot: 719' length X 423' width and/or area _____
- What is the front set back (in feet) from the project to the street right-of-way (Check Survey for ROW);
450' ft and what is the set back (in feet) from project property line Side A 180' Side B 51'
 Back 165' (Also depict on plot diagram).
- Total percentage (%) of coverage of all buildings on lot (including proposed): _____ %
- Total Dwelling Units: _____
- Project Cost: \$7000 Actual _____ Estimated

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQUARE FEET
House				
Garage/Pole Barn				
Accessory Structure				
Commercial				
Industrial				
Signs				

Bathrooms: _____
 # Bedrooms: _____
 Rec Room: _____
 Family Room: _____
 Fireplace: _____

Describe proposed project and/or use:
Teepees sitting on wooden platforms

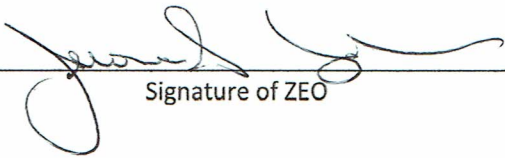
Attachments required & verified by ZEO:

Action taken by ZEO: **APPROVED:** **DENIED:** Reason:

Referral To: Town Planning Town Appeals County Planning Building Inspector

Requires: Zoning Permit Zoning/Building Permit Operating Permit Temporary Use Permit
 Emergency Housing Permit Certificate of Compliance

03/15/2023
Date of Signature


Signature of ZEO

Date of Signature # of Inspects

Signature of Building Inspector

Date Fee Received Fee

Indicate Fees Paid/Town Clerk Use Only

Date of Signature Renewal Approval / ZEO Signature

CERTIFICATION: I hereby certify that I have read the instructions, examined this application and supporting attachments and know them to be true & correct. All provisions of Laws and Ordinances covering this type of work or use will be complied with, whether specified herein or not. The granting of a permit does not give authority to violate or cancel the provisions of any other State or Local Law/Ordinance regulating construction, performance, or use.

Designation of Representative to act in my stead form required? _____ (attach form if required)


APPLICANT SIGNATURE

PROPERTY OWNER SIGNATURE (If other than applicant)

Office Use Only:

Total Square Footage: _____ Average Sq. Footage Cost: _____

Valuation: _____ Reference Year: _____

TOWN OF DARIEN
GENESEE COUNTY, NEW YORK 14040

PLANNING BOARD
SITE PLAN REVIEW
SPECIAL USE PERMIT APPLICATION

Application #: PS-03-23
(For office use only)

Today's Date: 03/13/2023

Provision of Zoning Law Involved:
Article: VII, Section: 701, Subsection: C, Paragraph: 6

Purpose of Request:
*This request would be in harmony with the orderly development of the district in which it is located because: Permitted use by SUP/ Site Plan approval

*This request would not be detrimental to the property or persons in the neighborhood because: Permitted use

*This request would not increase the traffic flow in the area to the extent that traffic safety would be endangered because: Limited to 4 sites

The applicant should submit one (1) copy of the application, nine (9) copies of the site plan and one (1) copy of the zoning application

CERTIFICATION:
I hereby certify that I have read the instructions and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinance regulating construction or performance of construction.

03/13/2023
Date of Signature
03/13/2023
Date of Signature

[Signature]
Signature of Applicant
[Signature]
Signature of Owner (If different from Applicant)

Office Use Only:
Zoning Permit Application #: _____ Date Received: 3/13/23 Fee Paid: 160⁰⁰
Date of First Hearing: _____ Location: _____
Date of Second Hearing: _____ Location: _____
Date of Subsequent Hearings: _____ Location: _____
Action: () APPROVED () REJECTED Date: _____
Planning Board Chairman Signature: _____
Zoning Officer Signature: _____ Date Permit Issued: _____
Additional Conditions Imposed: _____

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.

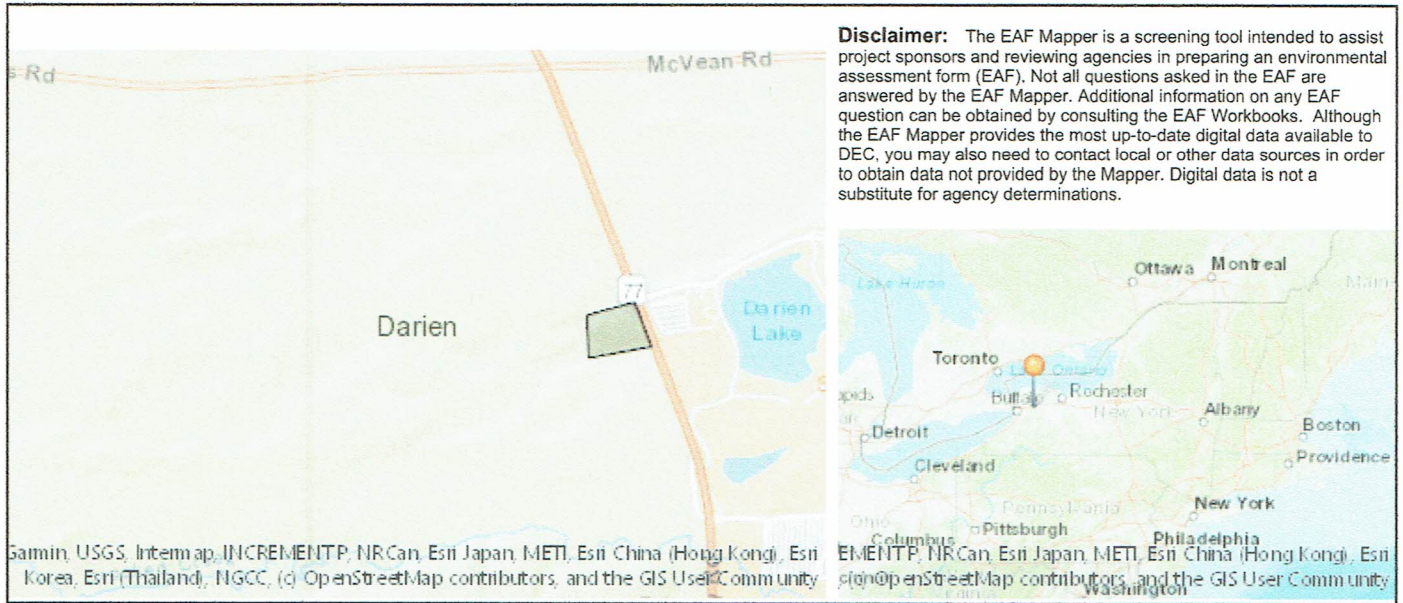
Part 1 – Project and Sponsor Information			
Name of Action or Project: TEEPEE			
Project Location (describe, and attach a location map): 9940 ALLEGHANY RD			
Brief Description of Proposed Action: PUT UP TEEPEES ON WOODEN PLATFORMS THAT WILL SIT ON GRAVEL/STONE.			
Name of Applicant or Sponsor: JACOB DOLLARD		Telephone: 716-609-2975	
		E-Mail: jakedollard2@yahoo.com	
Address: 810 MAMMOT RD.			
City/PO: ALDEN	State: NY	Zip Code: 14004	
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: DARIEN TOWN PLANNING BOARD			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		6.7 acres	
b. Total acreage to be physically disturbed?		<1 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		6.7 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input checked="" 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 type="checkbox"/>	<input checked="" 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 <input type="checkbox"/>	YES <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 <input checked="" type="checkbox"/>	YES <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 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <input type="checkbox"/> <input 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 <input checked="" type="checkbox"/>	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: _____ BOTTLED WATER	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ PORTA POTTIES REGULARLY MAINTAINED BY PROFESSIONSAL COMPANY	NO <input checked="" type="checkbox"/>	YES <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 <input checked="" type="checkbox"/> <input type="checkbox"/>	YES <input 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: _____ 130 + feet away from any wetlands _____ _____	NO <input type="checkbox"/> <input checked="" type="checkbox"/>	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 checked="" 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 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?	NO	YES
If 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)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____ _____	<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?	NO	YES
If Yes, describe: _____ _____	<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?	NO	YES
If Yes, describe: _____ _____	<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>Jacob Dollard</u> Date: <u>03/14/2023</u>		
Signature: <u>[Signature]</u> Title: <u>Owner</u>		

EAF Mapper Summary Report

Tuesday, March 14, 2023 8:56 AM



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	No

PERM 42 (09/09)

State of New York
Department of Transportation
Highway Work Permit



Permit No.: 202204102436

Date Issued: 12/13/2022

Project ID No.:

Expiration Date: 12/13/2023

***Permittee 1:**

JACOB DOLLARD

810 MAMMOT ROAD

ALDEN, NY 14001

Emergency Contact: CHRIS DOLLARD

Emergency Number: 716-913-3001

Under the provisions of the Highway Law or Vehicle & Traffic Law, permission is hereby granted to the permittee to:

INSTALL 15 FT. WIDE RESIDENTAL DRIVEWAY WITH 16' RADIUS NOT DRIVEWAY PIPE REQUIRED. DRIVEWAY SIDE SLOPES SHALL BE GRADED TO 1/6 AND GRADE DRIVEWAY TO DRAIN AWAY FROM HIGHWAY. DRIVEWAY SHALL BE A MINIMUM OF 8 INCHES OF 304.02, 2 INCH CRUSHED STONE. ALL DISTURBED AREAS SHALL BE MULCHED OR TURF ESTABLISHED WITHIN 10 DAYS. CONTRACTORS OPERATIONS SHALL NOT ENCROACH PAST THE WHITE LINE EDGE OF TRAVEL LANE INTO THE TRAVEL LANES ON RTE 77 WITHOUT REDUCING TRAFFIC TO ONE WAY ALTERNATING TRAFFIC SEE ATTACHED DETAIL 619-307. SPECIAL NOTES FOR HOLIDAY LANE CLOSURE RESTRICTIONS SHALL APPLY TO ALL WORK UNDER THIS PERMIT. ALL WORK PERFORMED SHALL COMPLY WITH NYSDOT 2008 STANDARD SPECIFICATIONS, NYSDOT POLICY AND STANDARDS FOR ENTRANCES TO STATE HIGHWAYS, STANDARD SHEETS, NATIONAL MUTCD AND ATTACHED SHEETS. PERMITTEE SHALL NOTIFY NYSDOT REGIONAL OPERATIONS CENTER (RTOC) OF ALL LANE AND SHOULDER CLOSURES AT LEAST 3 DAYS IN ADVANCE OF THE PROPOSED WORK UTILIZING RTOC'S CONSTRUCTION NOTIFICATION FORM. SEE STANDARD GENERAL PLAN NOTE# 5 FOR WEBSITE TO ACCESS RTOC'S CONSTRUCTION NOTIFICATION FORM. ALL OPERATIONS UNDER THIS PERMIT SHALL BE REMOVED FROM PAVEMENT OF RTE 77 BY 15:00 ON DATES DARIEN LAKE THEME PARK HAS SPECIAL EVENTS. CONTRACTOR SHALL CONTACT MOLLY GRODEN REGIONAL OPERATIONS MANAGER, UPSTATE NY DARIEN LAKE AMPHITHEATER AT 716-428-5930, MOLLYGRODEN@LIVENATION.COM FOR AN UPDATED SPECIAL EVENT SCHEDULE. NOTE: ONLY JACOB DOLLARD IS AUTHORIZED TO WORK WITHIN THE STATE RIGHT-OF-WAY FOR THIS PERMIT WORK. ALL INSURANCE COVERAGE MUST BE KEPT IN FORCE UNTIL PERMIT EXPIRATION DATE TO AVOID INVALIDATION OF PERMIT. CALL GENESEE/ORLEANS COUNTY PERMITS ENGINEER DANIEL STAHLEY AT 585-343-0503, 3 DAYS BEFORE WORKING WITHIN STATE ROW.

THE PERMITTEE IS RESPONSIBLE FOR TEMPORARY TRAFFIC CONTROL IN ACCORDANCE WITH THE CURRENT NATIONAL MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES AND THE NYS SUPPLEMENT. ANYONE WORKING WITHIN THE HIGHWAY RIGHT-OF-WAY SHALL WEAR HIGH-VISIBILITY APPAREL MEETING THE CURRENT ANSI 107 CLASS II OR CLASS III (AT NIGHT) STANDARDS AND A HARD HAT MEETING THE CURRENT ANSI/ISEA Z89.1 TYPE I, CLASS C OR IF WORKING WITHIN CLOSE PROXIMITY TO ELECTRICAL POWER LINE, CLASS E OR G.

County	Municipality	State Hwy	State Route	Beg Ref	End Ref
GENESEE	DARIEN	64-16	77	77 41021044	77 41021045

as set forth and represented in the attached application at the particular location or areas, or over the routes as stated therein, if required; and pursuant to the conditions and regulations general or special, and methods of performing work, if any; all of which are set forth in the application and form of this permit. See additional conditions on PAGE 2.

THIS PERMIT IS ISSUED BASED ON ALL LOCAL, STATE, AND FEDERAL REQUIREMENTS BEING SATISFIED.

Dated at: Rochester Date Signed: 12/13/2022 Commissioner of Transportation By: Matthew C. Oravec

IMPORTANT:

THIS PERMIT, WITH APPLICATION AND DRAWING (OR COPIES THEREOF) ATTACHED, SHALL BE PLACED IN THE HANDS OF THE CONTRACTOR BEFORE ANY WORK BEGINS. THE HIGHWAY WORK PERMIT SHALL BE AVAILABLE AT THE SITE DURING CONSTRUCTION.



New York State
Parks, Recreation and
Historic Preservation

KATHY HOCHUL
Governor

ERIK KULLESEID
Commissioner

March 21, 2023

Jacob Dollard
810 Mammoth Rd
Alden, NY 14004

Re: SEQRA
Teepee Installation
9940 Alleghany Rd, Corfu, NY 14036
23PR02272

Dear Jacob Dollard:

Thank you for requesting the comments of the Office of Parks, Recreation and Historic Preservation (OPRHP). We have reviewed the project in accordance with the New York State Historic Preservation Act of 1980 (Section 14.09 of the New York Parks, Recreation and Historic Preservation Law). These comments are those of the OPRHP and relate only to Historic/Cultural resources. They do not include potential environmental impacts to New York State Parkland that may be involved in or near your project. Such impacts must be considered as part of the environmental review of the project pursuant to the State Environmental Quality Review Act (New York Environmental Conservation Law Article 8) and its implementing regulations (6 NYCRR Part 617).

Based upon this review, it is the opinion of OPRHP that no properties, including archaeological and/or historic resources, listed in or eligible for the New York State and National Registers of Historic Places will be impacted by this project.

If further correspondence is required regarding this project, please be sure to refer to the OPRHP Project Review (PR) number noted above.

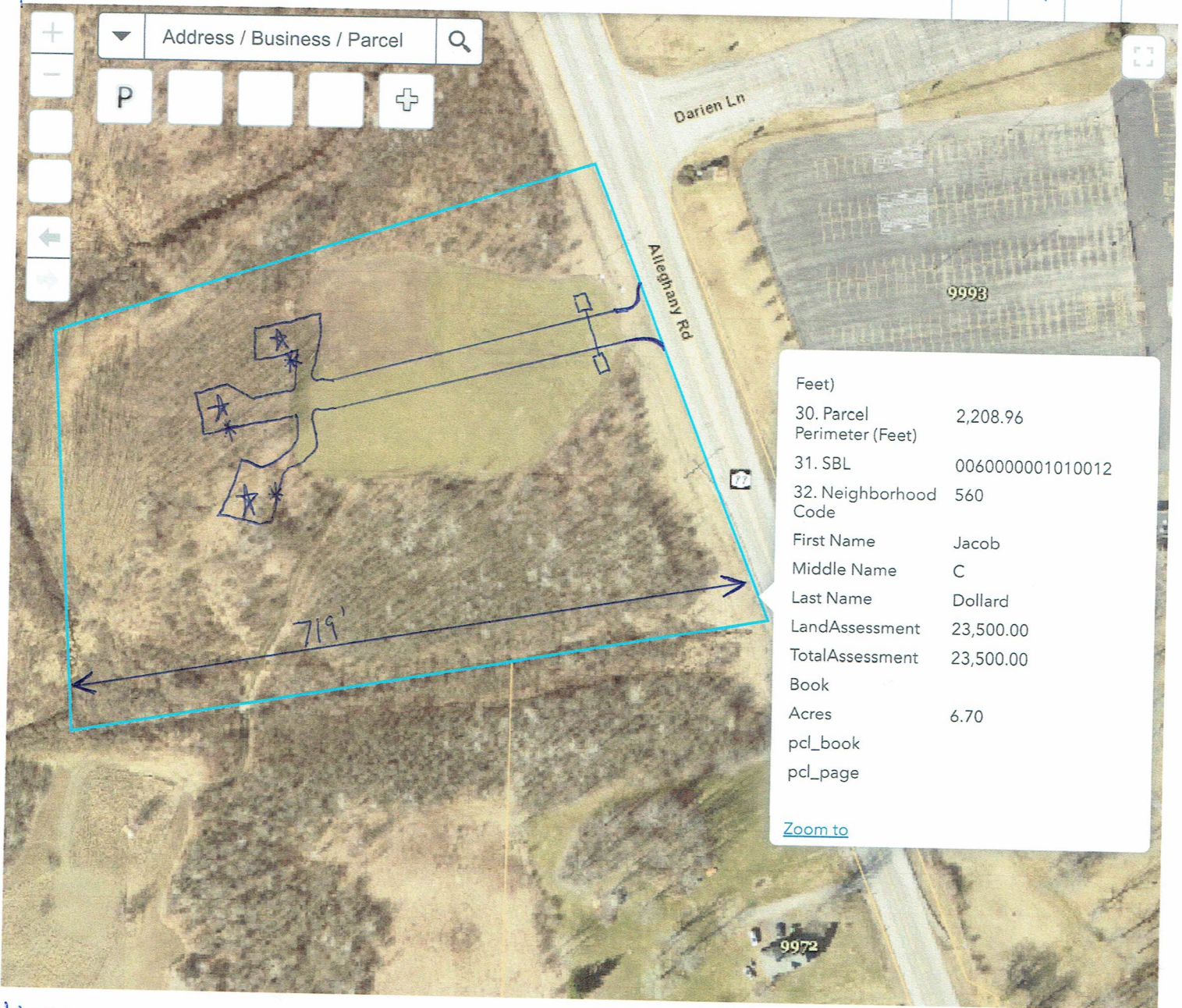
Sincerely,

R. Daniel Mackay

Deputy Commissioner for Historic Preservation
Division for Historic Preservation

rev: S. Snyder

Property address: 9940 Alleghany Road
Corfu, NY 14836

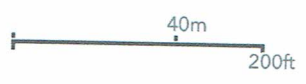


Feet)	
30. Parcel Perimeter (Feet)	2,208.96
31. SBL	0060000001010012
32. Neighborhood Code	560
First Name	Jacob
Middle Name	C
Last Name	Dollard
LandAssessment	23,500.00
TotalAssessment	23,500.00
Book	
Acres	6.70
pcl_book	
pcl_page	
Zoom to	

Key:

- Blue line represents property boundary lines
- * Represents teepee
- 13 ft wide driveway
- * Represents Porta Potty location
- □ Represents wooden archway, 21' wide by 15' tall

Tax Number: 183289 6. -1 -10. 12



42.93132 -78.38836 Degrees

TEEPEE SITE PLAN

Site plan will consist of putting teepees up on wooden platforms to rent out on Airbnb. The property will consist of three teepee locations. Also, a wooden archway.

The Airbnb's will consist of off the grid and eco-friendly amenities. Guest will have access to a portable outhouse. Which will be regularly serviced by a local waste company. In addition, an eco-friendly portable handwashing station will be available for guests by the outhouses. These stations are designed to store dirty water in a separate chamber than the clean water. As part of the off-grid experience, showers will not be provided to guests. However guests will be provided with a list of showers available in the surrounding area.

The wooden archway will be placed roughly 40 feet off the edge of public road way pavement. Two of the vertical logs holding up the archway will sit 4 foot in the ground. 811 dig will be called before any digging is done to set the poles. Sitting back off of the road a good ways, the archways dimensions will be 21 foot wide by 15 foot in height. It will be well high enough for a firetruck to fit under.

T-02-DAR-04-23

